

Original Article

Prevalence of physical, sexual and emotional violence among married women in Pakistan: A detailed analysis from Pakistan demographic health survey 2017-18

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Abstract

Background: Domestic violence is a significant public health concern all around the world. Globally around 10 out of 70 women faced domestic violence at least once in their life. However, there is a vast variation in the reported prevalence of domestic violence all around the world. Our study aims to explore the situation of domestic violence by using the Pakistan Demographic Health Survey (PDHS) dataset 2017-18.

Methodology: Secondary data analysis was performed on 4085 married women of age 15-49 years by using a recently conducted PDHS data set to determine the prevalence, socio-demographic and economic factors that potentially increase the risk of different domestic violence types. Multivariate logistic regression analysis was used to identify the factors associated with domestic violence.

Results: In this study, the overall prevalence of domestic violence in Pakistan is 34.2%. However, the prevalence of sexual violence 4.79% (3.75-6.09), emotional violence 28.91% (26.76-31.17), and physical violence was 14.84% (13.22-16.63) respectively in Pakistan. Khyber Pakhtunkhwa reported the highest prevalence of sexual violence, 7.71%, followed by FATA 4.69%, Punjab 4.61%, Sindh 3.73%, and Balochistan 3.13%. Moreover, FATA has the highest prevalence of physical violence, 36.13%, followed by Balochistan, 33.5%, KPK, 22.5%, Punjab 13.28%, ICT 10.65%, and Sindh 7.68%. However, FATA also has the highest prevalence of emotional violence, 65.87%, followed by KPK 50.80%, Balochistan 48.37%, ICT 33.23%, Punjab 25.45%, and Sindh 15.1%.

Conclusion: In our study, we found an association of low educational level of husband, poor wealth index, increase age of husband, and use of alcohol by the husband. Although policies are in place at the provincial level in Pakistan but there is no effective implementation of those policies at the provincial level. There is a need to study risk factors and societal perceptions regarding domestic violence across provinces to design and implement an effective intervention.

Keywords

Domestic Violence, Intimate Partner Violence, Pakistan Demographic & Health Survey, Domestic Violence Risk Factors.

Introduction

Domestic violence is a serious public health concern not only in Pakistan but all around the world. It may affect the married women of all age groups irrespective of education, economic development, and geographical limits. Domestic violence is generally done by the partner, typically women being the victim^{1,2}. According to the United Nations, violence against women is defined as "any act of gender-based violence that leads to sexual, physical or psychological harm to women." Violence against women not only breach the rules of human, but it may also lead to psychological and physical issues³. Domestic violence is generally practiced in every part of the world, as 10 out of 70 women are faced physical violence by their husbands once in their life⁴. Domestic violence may lead to psycho-behavioral issues, anxiety, and depression. Ultimately domestic violence affects women's quality of life and affects their children, ultimately pose a significant threat to society's well-being⁵. Most of the societies in Pakistan is male dominant, and in those societies, women have fewer privileges and limited human right. In Pakistan, domestic violence is critical in rural and tribal areas compared to middle-upper and urban areas⁶. Domestic violence may lead to many issues such as psycho-behavioral issues, low quality of life, attempt of suicide, physical injuries, substance abuse, anxiety, depression, social limitation, and nightmares. Domestic violence affects the women's quality of life and affects the mental health of other family members, which ultimately leads to increased utilization of healthcare services⁷. Domestic violence is highly prevalent all around the world. Around 30% of women faced domestic violence in various forms, such as physical/sexual abuse by their spouses during their lives⁸. Domestic violence is a breach of human rights and causes physical injuries to women⁹. Women who faced domestic violence have a higher risk of mental health disorders^{10,11}.

Domestic violence is considered to be a personal matter in Pakistan, as it happened within the family. Hence, there is no proper focus on assessment, designing an intervention, or policy development. In countries like Pakistan, women faced violence

and discrimination in the day to day life. The primary reason behind that was religious beliefs and cultural norms¹². In Pakistan, it is estimated that almost 70% to 90% of females are domestic violence sufferers¹³. Our study aims to explore domestic violence by using a nationally representative dataset of the PDHS 2017-18. The main reason to choose this topic is to break out the voices against domestic violence because it is a common observation that domestic violence cases are increasing day by day. Still, only a few of those cases are registered due to societal and cultural barriers. Unfortunately, those women who registered their cases remain unresolved for many years. However, domestic violence is a well-recognized public health issue.

To explore the situation, various studies have been done in developing countries. Still, diversity in cultural, societal, and geographical context needs to be considered, so further studies are required to explore Pakistan's current situation. Moreover, in Pakistan, few studies done on this topic by using PDHS data set 2012-13¹⁴⁻¹⁶, as news reported on media and few local studies shows that situation on domestic violence is worsening in past few years¹⁷⁻¹⁹, so we planned to explore the status of domestic violence by using recent PDHS 2017-18 dataset which is nationally representative.

Methodology

Data Source and Sample selection

Secondary data analysis was performed using the PDHS 2017-18 data set. For Pakistan, demographic health survey 2017-18 data were taken from all provinces, including Sindh, Punjab Khyber Pakhtunkhwa, and Balochistan, and four regions that include Islamabad Capital Territory (ICT), Azad Jammu Kashmir, FATA, and Gilgit Baltistan. The two-stage stratified sampling design was used in PDHS 2017-18. In total, 16 sampling strata were created. By using the two-stage selection, process samples were selected independently in each stratum.

In PDHS total of 580 clusters were selected. Out of which survey was successfully carried out in 561 clusters, 19 clusters were dropped due to

worsening law and order situation during the data collection process. In PDHS 2017-18 sample was not a self-weighting sample because of non-proportional sampling for the allocation of a sample in the survey. Weighting factors have been computed so that results were nationally and regionally representative for Pakistan. In contrast, weights for Gilgit Baltistan and Azad Jammu and Kashmir were separately computed in the survey. These two regions were not included in the national total or background characteristics and were presented separately, and their sample weight was also computed separately. In PDHS 2017-18 data was collected from 16240 households. The sample includes married women of age 15-49 years. Out of 4216 eligible women, only 4085 were successfully interviewed for domestic violence. The final analysis was performed on 4085 married women of reproductive age.

Measurement tool

In PDHS 2017-18, domestic violence was measured using a modified conflicts tactics scale (CTS). The modified conflict tactics scale is an effective tool for measuring domestic violence in populations with diverse cultural situations. In PDHS 2017-18 questions regarding sexual, physical, and emotional violence were asked. So the analysis of our study includes all three domains of domestic violence. Moreover, for assessing emotional violence, the following questions were asked: humiliation, insulting, limiting contact with families, restriction to meet friends, threatening, accusation, and being afraid of husband. However, physical violence assessment following questions were asked, twisting the arm, attacking with knife/gun, hair pulling, dragging, slapping, pushing, burning, kicking, and punching. While for the assessment of sexual violence following questions were asked from the respondent: husband physically force for unwanted sexual intercourse, husband forced physically to perform any other sexual act that respondent doesn't want to perform or threaten the respondent to perform an unwanted sexual act. For analysis, we create a binary variable of physical, emotional, and sexual violence coded as No (0) and yes (1). For this purpose composite score was calculated for every woman, physical or emotional

violence will be labelled if any woman's composite score was greater than or equal to 2. In contrast, sexual violence will be labelled if the composite score of any woman was ≥ 1 .

Factors associated with Domestic Violence

In this analysis, we explore the association between socioeconomic and demographic characteristics with domestic violence. The variables selected for analysis include region, respondent and husband age, residence status, respondent and husband educational level, occupational status of respondent and husband, wealth index, and alcohol use by the husband.

Statistical Analysis

The descriptive and inferential analysis was performed using STATA v16.0. We used the "svy" command for analysis. Two-stage stratified sampling was used in the survey. For adjustment of unequal sampling, weights were applied to calculate the representative estimates for each province. The weighted proportion of sexual, physical, and emotional was calculated with 95% confidence interval at national and regional levels separately. To determine the factors associated with domestic violence, a binary logistic regression analysis was performed. In univariate and multivariate analysis, variables with a $p < 0.25$ were considered significant. We selected a model with a maximum Wald Chi-square value as a final model in multivariate analysis. Logistic regression analysis was used for survey design by the STATA "svy" command to adjust the sample's intra-class correlation effects. The adjusted odds ratio for all variables, with 95% CI were computed. The data of PDHS 2017-18 are freely available in the public domain. There is no restriction of using data for analysis by the National Institute of Population studies, so to use the data set for analysis, no ethical approval was required.

Results

In this study, the overall prevalence of domestic violence in Pakistan is 34.2%. However, the prevalence of sexual violence 4.79% (3.75-6.09), emotional violence 28.91% (26.76-31.17), and physical violence was 14.84% (13.22-16.63)

respectively in Pakistan. Khyber Pakhtunkhwa reported the highest prevalence of sexual violence, 7.71%, followed by FATA (4.69%), Punjab 4.61%, Sindh 3.73%, and Balochistan 3.13%. Moreover, FATA has the highest prevalence of physical violence, 36.13%, followed by Balochistan, 33.5 %, KPK, 22.5%, Punjab 13.28%, ICT 10.65%, and Sindh 7.68%. However, FATA also has the highest prevalence of emotional violence, 65.87%, followed by KPK 50.80%, Balochistan 48.37%, ICT 33.23%, Punjab 25.45%, and Sindh 15.1%. The prevalence of domestic violence was higher in rural areas than urban areas (Sexual Violence, rural 4.7%, Urban 4.97%; physical violence rural 16.6 %, Urban 11.9%; emotional violence rural 32.0%, urban 23.76). The multivariate analysis shows that the odds of sexual violence decreased aOR 0.31(0.14-0.68) if women have higher education than no education. However, the odds of sexual violence increased by

6.43(2.83-14.6) times if the husband has a history of alcohol intake. The multivariate analysis shows a variability of physical and emotional violence across provinces with FATA aOR 6.17(3.51-10.86) and 9.34(5.39-16.18) respectively, as compared to Sindh. The odds of having physical violence increased by 2.05(1.2-3.51) times if the husband's age was more than 45 years as compared to 15-25 years. The odds of having physical violence increased by 1.51(1-2.33) times if the husband was primary education as compared to no education. Moreover, women who belong to poorer wealth quantiles have a higher aOR 2.32(1.53-3.53) of emotional violence than women who belong to the richest wealth quantiles. Multivariate analysis shows higher odds of domestic violence if the husband intake alcohol. Details of analysis shown in table 1.

Table 1: Frequency and mutually adjusted socioeconomic and behavioral factors of sexual, physical and emotional violence among married women in Pakistan

| Characteristics | Sexual Violence | | Physical Violence | | Emotional Violence | |
|--------------------|------------------|--------------|--------------------|-----------------|--------------------|-----------------|
| | Weighted % (CI) | aOR (95% CI) | Weighted % (CI) | aOR (95% CI) | Weighted % (CI) | aOR (95% CI) |
| Pakistan | 4.79(3.75-6.09) | -- | 14.84(13.22-16.63) | -- | 28.91(26.76-31.17) | -- |
| AJK & GB | 5.01(3.15-7.87) | -- | 8.13(5.86-11.17) | -- | 26.1(22.1-30.61) | -- |
| Place of residence | | | | | | |
| Urban | 4.93(3.17-7.59) | -- | 11.9(9.5-14.8) | -- | 23.76(20.57-27.28) | -- |
| Rural | 4.7(3.54-6.22) | -- | 16.6(14.4-18.93) | -- | 32.0(29.16-34.97) | -- |
| Province | | | | | | |
| Sindh | 3.73(2.41-5.74) | -- | 7.68(5.82-10.08) | 1 | 15.1(12.27-18.45) | 1 |
| Punjab | 4.61(3.15-6.711) | -- | 13.28(10.92-16.07) | 1.89(1.25-2.85) | 25.45(22.34-28.82) | 2.09(1.47-2.97) |
| Balochistan | 3.13(1.79-5.41) | -- | 33.5(27.48-40.12) | 5.4(2.91-10.01) | 48.37(41.6-55.19) | 4.62(2.97-7.18) |
| KPK | 7.71(4.82-12.1) | -- | 22.5(18.02-27.72) | 3.53(2.21-5.63) | 50.80(44.97-56.62) | 5.92(3.79-9.26) |
| ICT | 1.89(0.74-4.7) | -- | 10.65(7.23-15.42) | 1.81(0.95-3.47) | 33.23(25.66-41.77) | 3.69(2.15-6.33) |

| | | | | | | |
|------------------------------------|------------------|-----------------|--------------------|------------------|--------------------|------------------|
| FATA | 4.69(2.21-9.68) | -- | 36.13(28.64-44.37) | 6.17(3.51-10.86) | 65.87(57.75-73.14) | 9.34(5.39-16.18) |
| Current age of the woman (years) | | | | | | |
| 15-25 | 3.95(2.40-6.45) | -- | 11.08(8.55-14.22) | -- | 26.52(22.26-31.27) | -- |
| 26-35 | 5.80(4.00-8.34) | -- | 17.28(14.45-20.52) | -- | 31.08(27.55-34.84) | -- |
| 36-45 | 4.76(2.99-7.47) | -- | 14.27(11.60-17.43) | -- | 29.26(25.51-33.31) | -- |
| >45 | 2.53(1.23-5.10) | -- | 16.68(11.01-24.48) | -- | 24.66(18.10-32.66) | -- |
| Current age of the husband (years) | | | | | | |
| 15-25 | 4.57(2.17-9.37) | -- | 9.94(6.52-14.86) | 1 | 24.48(18-32.38) | -- |
| 26-35 | 4.86(3.18-7.38) | -- | 13.38(10.94-16.26) | 1.66(1.03-2.7) | 27.28(23.72-31.16) | -- |
| 36-45 | 4.24(2.8-6.4) | -- | 16.3(13.29-19.84) | 2(1.17-3.41) | 32.5(28.51-36.76) | -- |
| >45 | 5.6(3.37-9.17) | -- | 18.16(14.37-22.69) | 2.05(1.2-3.51) | 30.26(25.92-34.97) | -- |
| Woman's education | | | | | | |
| No education | 4.57(3.32-6.26) | -- | 17.62(15.39-20.09) | -- | 33.04(30.04-36.17) | -- |
| Primary education | 7.2(4.74-10.77) | -- | 20.45(15.41-26.62) | -- | 35.57(29.48-42.18) | -- |
| Secondary education | 5.22(2.57-10.3) | -- | 10.76(7.53-15.17) | -- | 21.62(17.19-26.83) | -- |
| Higher education | 2.36(1.19-4.64) | -- | 5.13(3.19-8.16) | -- | 18.02(13.78-23.22) | -- |
| Husband's education | | | | | | |
| No education | 6.11(4.28-8.65) | 1 | 19.19(16.23-22.55) | 1 | 34.63(30.73-38.76) | -- |
| Primary education | 8.2(4.92-13.36) | 1.48(0.73-3.02) | 19.01(14.41-24.66) | 1.53(1-2.33) | 31.73(26.01-38.06) | -- |
| Secondary education | 2.99(1.91-4.64) | 0.48(0.26-0.9) | 12.36(9.83-15.42) | 0.88(0.61-1.27) | 27.47(23.63-31.67) | -- |
| Higher education | 1.73(0.91-3.26) | 0.31(0.14-0.68) | 6.81(4.96-9.27) | 0.66(0.4-1.09) | 19.94(16.25-24.23) | -- |
| Woman's occupation | | | | | | |
| Does not work | 4.3(3.23-5.69) | -- | 14.37(12.62-16.32) | -- | 28.8(26.4-31.34) | -- |
| Unskilled work | 7.27(3.87-13.26) | -- | 17.87(13.02-24.02) | -- | 29.45(23.52-36.16) | -- |
| Skilled work | 6.19(3.05-12.13) | -- | 15.34(9.65-23.53) | -- | 29.48(22.14-38.06) | -- |

| Husband's occupation | | | | | | |
|-------------------------------|-------------------|-----------------|--------------------|------------------|--------------------|-----------------|
| Does not work | 12.77(5.78-25.89) | -- | 25.48(15.97-38.07) | -- | 47.64(35.86-59.68) | -- |
| Unskilled workers | 3.8(2.66-5.4) | -- | 11.87(10.03-14.01) | -- | 26.06(23.29-29.03) | -- |
| Skilled workers | 4.71(3.32-6.65) | -- | 16.87(14.23-19.88) | -- | 30.74(27.2-34.52) | -- |
| Wealth index | | | | | | |
| Richest | 3.83(1.68-8.49) | -- | 7.97(5.07-12.32) | 1 | 18.86(14.57-24.05) | 1 |
| Richer | 3.3(2-5.39) | -- | 11.02(8.1-14.82) | 1.62(0.9-2.89) | 24.05(19.74-28.97) | 1.41(0.91-2.18) |
| Middle | 5.86(3.54-9.56) | -- | 14.8(11.39-19) | 2.02(1.22-3.37) | 31.75(26.65-37.33) | 1.77(1.16-2.68) |
| Poorer | 6.88(4.65-10.06) | -- | 22.77(18.77-27.33) | 2.99(1.73-5.18) | 39.99(35.08-45.12) | 2.32(1.53-3.53) |
| Poorest | 4.22(2.6-6.77) | -- | 19.3(15.67-23.53) | 2.66(1.51-4.71) | 31.93(27.57-36.64) | 2.07(1.33-3.22) |
| Alcohol intake by the husband | | | | | | |
| No | 4.14(3.15-5.44) | 1 | 13.47(11.91-15.19) | 1 | 27.18(25.04-29.43) | 1 |
| Yes | 22.23(13.7-33.98) | 6.43(2.83-14.6) | 51.98(39.32-64.4) | 6.76(3.27-13.97) | 75.73(64.02-84.54) | 8.83(4.67-16.7) |

aOR-Adjusted Odds Ratio; CI-Confidence Interval

Discussion

In this study, the prevalence of domestic violence in Pakistan is (34.2%) which is almost the same as global prevalence (35%)²⁰, and slightly lower than the South-East Asian average (37.7%)²¹. In our study prevalence of sexual violence is 4.79%, while the prevalence of physical and emotional violence is 14.84% and 28.91%, respectively. A study conducted in 2019 using PDHS 2012-13 data set shows that the prevalence of emotional and physical violence was 36.4% and 18.4%, respectively.¹⁶ According to the World Health Organization in 2006, the reported prevalence of emotional and physical in Iraq were 33.4% and 21.2%, respectively.²² In 2014, a hospital-based study reported that the domestic violence prevalence was 35 %²³, comparable to our study. Previous studies conducted in Saudi Arabia, Iran, and India reported that emotional violence was more prevalent than physical and sexual violence^{1,24,25}. Traditionally, in societies where

gender inequalities exist prevalence of sexual violence is more than societies where men considered women as their equals^{26,27}.

Our study is nationally representative. In our study, sexual violence ranged from 3.13% to 7.71%. Moreover, physical violence ranged from 7.68% to 36.13%, while emotional violence ranged from 15.1% to 65.8%. The FATA had the highest estimates of domestic violence. The education level of the husband serves as a protective factor against domestic violence. Women whose husbands have higher education are less likely to face sexual violence, whereas the odds of sexual, physical, and emotional violence increased if the husband consumed alcohol. However, wealth quintile also had a protective effect against physical and emotional violence. Our study's findings reveal that women whose husbands drink alcohol were more likely to experience domestic violence. Our study's finding supports evidence from previous studies¹⁶.

²⁸⁻³¹. Possibly use of alcohol by the husband was the common risk factor for domestic violence against women. The majority of policymakers and researchers assumed that alcohol increases the likelihood of domestic violence by decreasing judgmental capabilities, inhibitions and impairing a person's ability to analyze the situation²⁹.

Moreover, in our study, higher education of husband had a protective effect against domestic violence. Husband's poor academic attainment is one of the common risk factors for domestic violence by the husband. Moreover, a study conducted in India reported that education level higher than secondary of both husband and woman acts as a buffer against domestic violence. Findings of the current and previous studies suggest that education plays a crucial role in reducing domestic violence against women^{16,30,31}. A review conducted in 17 sub-Saharan countries reported that women with less education experience more domestic violence³². In our study, it is also revealed that lower wealth quintile status was associated with domestic violence. Similar findings were reported in previous studies. In previous studies, low socioeconomic status also identified as a risk factor for domestic violence against women^{16,33}. Although policies and act against domestic violence are placed at the provincial level in Pakistan³⁴, but there is no effective implementation of those policies at the provincial level³⁵, there is a need to study risk factors and societal perceptions regarding domestic violence across provinces to design and implement an effective intervention.

The cross-sectional nature of the PDHS data set limits to draw a causal relationship. Moreover, it is a likelihood that the survey undermines the actual prevalence of domestic violence in Pakistan because all evaluations were self-reported by respondents. However, even with these limitations, the PDHS data set is a nationally representative survey. Our study also highlights the risk factor of domestic violence and explore the situation domestic violence in Pakistan.

Conclusion

The domestic violence prevalence was high in Pakistan in our study. There is a difference in the prevalence of domestic violence across the provinces, which may be due to societal and cultural norms. Our study found an association of low educational level of husband, poor wealth index, increased age of husband, and use of alcohol by the husband. Domestic violence is not a private or personal matter; it should be public, and women should not hide this. There is a need to create awareness among women regarding their rights and responsibilities. Women should empower themselves to play a productive role in society. Although in Pakistan, laws and bills passed regarding women's rights but women don't know how to get their rights. Initially, a family should respond against violence, and then government authorities would compensate. There is a need to develop a database for the registration of complaints against violence in all provinces. Religious stakeholders should also address domestic violence, particularly the rights of women, marriage age, and complete dowry probation. The electronic media, such as T.V. serials and talk shows, should stop highlighting and glorifying violence against women as it has a great impact on people's minds in the community. Nowadays, the representation of Women through media is highly problematic. It should be radically changed.

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