

Psychological Health of Pregnant Women Experiencing Domestic Violence in Central Punjab

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ABSTRACT

Objective: To evaluate the impact of domestic violence on the psychological health of pregnant women.

Study Design: Cross-sectional study.

Place and Duration of Study: The study was conducted public and private hospitals in Central Punjab, specifically in the districts of Sargodha, Khushab, and Jauharabad, Pakistan, from Jan 2022 to Apr 2023.

Methodology: A purposive sampling technique was employed to collect the data. The Domestic Violence Scale for intimate partner violence and the Psychological Distress Scale for adults were utilized for data collection. Demographic variables recorded included name, age, number of children, residential area, and profession.

Results: The sample for the research comprised (n=250) pregnant women, further categorized into primigravida (n=138) and multigravida (n=112) from Central Punjab, Pakistan. The age range of the participants was 18-45 years. Two self-report measures, the Domestic Violence Scale for intimate partner and the Psychological Distress Scale for adults were used to measure the constructs of the present study.

Conclusion: The overall findings revealed that domestic violence is a significant predictor of psychological distress among pregnant women. Furthermore, the findings indicated that there were no significant mean differences in psychological health, anxiety, depression, and stress between the two groups.

Keywords: Domestic Violence, Multigravida, Pregnant women, Psychological Health, Primigravida.

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INTRODUCTION

Humans are special natural creatures. As social beings, they include family, close companions, and other social networks and are likely to reside in complex social structures. Families are the fundamental social units in which people live together by adoption, marriage, or other means.¹ In all spheres of life, human beings are part of a valued system that provides support and ensures family security. In a positive family environment, both husband and wife collaborate effectively to support their family in an organized manner.² However, a maladaptive family environment and violent behavior in a family can lead to conflicts, disrupting family functioning, causing significant harm and domestic violence.³ Domestic violence and the violation of human rights are global health issues that can adversely affect women's health and quality of life in numerous ways.⁴

Domestic abuse during pregnancy is a critically neglected and underreported issue with severe consequences. Furthermore, domestic violence is

defined as violent and abusive behavior exhibited against partners.⁵ Domestic violence is a significant social issue that women may face at various points throughout their lives.⁶ Global reports indicate that 27% of women aged 15-49, who are married or have a partner, have experienced physical and/or sexual violence within the past year.⁷

Additionally, the prenatal period is a particularly sensitive phase in a woman's life that requires immediate care and strong family support, especially from her husband. Husbands' support during prenatal period reduces the symptoms of anxiety, depression and stress among women.⁸

Experiencing violence during this time can have dangerous effects on a woman's mental health, potentially leading to severe issues such as anxiety, depression, stress, and suicidal ideation.⁹

A study found strong correlation between domestic violence and mental health disorders. Approximately 27.15% of the women reported experiencing domestic violence, and 38.24% were diagnosed with mental health disorders. A significant association was identified between psychosocial factors specifically anxiety and physical violence and

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negative neonatal outcomes, such as small-for-gestational-age in newborns. These findings highlight the severe impact of domestic violence and mental health disorders on maternal and neonatal health.¹⁰

METHODOLOGY

A correlational design was employed using a cross-sectional survey approach. A purposive sampling technique was utilized, and data collection took place from January 2022 to April 2023. The study included only pregnant women (n=250), further categorized into primigravida (n=138) and multi-gravida (n=112), data collected from both public and private hospitals in Central Punjab, specifically in the districts of Sargodha, Khushab, and Jauharabad, Pakistan. The Domestic Violence Scale for intimate partner violence and the Psychological Distress Scale for adults were utilized for data collection.^{11,12} Demographic variables recorded included name, age, number of children, residential area, and profession.

The data was entered into the Statistical Package for the Social Sciences (SPSS) version 23 for analysis, including frequency, reliability, regression, and mean calculations. The present study aimed to evaluate the impact of domestic violence on the psychological health of pregnant women.

RESULTS

Table-I demonstrated the psychometric properties of the research variables, showing that all variables have reliability coefficients greater than 0.60, indicating strong internal consistency. Additionally, the kurtosis and skewness values for all variables are below 1, which is satisfactory and suggests that the data meets the assumptions of bivariate normality, permitting further analyses. Table-II demonstrated the predictive effect of domestic violence on the psychological health of pregnant women, specifically regarding psychological distress, depression, anxiety, and stress. Linear regression analysis revealed that domestic violence accounted for 35.2% of the variance in psychological distress, 25.8% in depression, 27.1% in anxiety, and 34.9% in stress. The significant *p*-value (*p*<0.01) indicated that domestic violence is a significant predictor of psychological distress among pregnant women.

Table-III presents the mean differences in domestic violence's impact on psychological health between primigravida and multigravida women. The findings indicated that there were no significant mean differences in psychological health, anxiety, depression, and stress between the two groups.

Table-I: Psychometric Properties of Study Variables (n=250)

Variable	K	α	Mean ± SD	Kurtosis	Skewness
Domestic Violence	25	0.96	31.29 ± 14.59	0.184	0.49
Psychological Health	38	0.92	51.42 ± 18.08	0.30	0.57

Table-II: Summary of Linear Regression Analysis of Domestic Violence as Predictor of Psychological Distress (Anxiety, Depression and Stress) among pregnant women (n=250)

Variables	R	R2	ΔR2	F	<i>p</i>
Psychological Distress	0.593	0.352	0.349	134.58	0.000
Depression	0.508	0.258	0.255	86.37	0.000
Anxiety	0.521	0.271	0.268	92.17	0.000
Stress	0.591	0.349	0.346	132.88	0.000

Table-III: Mean Comparison of Primigravida Gravida and Multi-Gravida on Domestic Violence on Psychological Health (n=250)

Variables	Primigravida (n=138)			Multigravida (n=112)		
	Mean ± SD	t (248)	<i>p</i>	Mean ± SD	t (248)	<i>p</i>
Psychological health	78.93 ± 17.36	-0.77	0.30	80.71 ± 18.93	-0.76	0.30
Anxiety	32.75 ± 7.34	-0.80	0.20	33.52 ± 7.80	-0.80	0.20
Depression	21.93 ± 5.70	-0.43	0.13	22.26 ± 6.38	-0.43	0.13
Stress	24.24 ± 6.15	-0.83	0.75	24.91 ± 6.57	-0.83	0.75

Note: *p*>0.05

DISCUSSION

The objective of the current study is to investigate the effects of domestic violence on the psychological health of pregnant women. Domestic violence is one of the largest and most prevalent forms of gender-related violence.¹³ It is receiving increased attention due to its frequent occurrence and alarming health implications.¹⁴ Domestic violence, considered a traumatic act within a family, occurs when one family member perpetrates violence against others in a domestic setting. This violence equally harms all family members, including the mother, father, and children.¹⁵⁻¹⁷ The problematic attitudes of both husband and wife can disrupt the home environment, with husbands sometimes displaying harsh behavior toward their wives. This abusive behavior causes emotional distress in pregnant women, which negatively impacts their physical, mental, and emotional well-being.¹⁸ As a result, they may experience feelings of helplessness, low self-esteem, weakness, sleep disturbances, and worry. Domestic violence poses a major health threat to pregnant women.¹⁹

The results of the current study indicate that domestic violence is a significant predictor of psychological distress among pregnant women. Statistical analysis confirmed these findings, showing that domestic violence significantly predicts emotional distress among pregnant women [$R^2=0.32$; $F(1, 248)=134.58$, $p<0.01$]. Previous studies support this result, demonstrating that domestic violence affects mental health and leads to psychological distress, including depression, anxiety, and stress, the study also found that domestic violence is prevalent among pregnant women and strongly correlated with mental health issues.^{20,21} A cross-sectional study in Brazil revealed that adolescents who were victims of violence during pregnancy were 4.3 times more likely to suffer from common mental disorders.²² Another study confirmed the high prevalence and close correlation between domestic violence and mental health issues in pregnant women. Domestic violence against pregnant women has detrimental effects on psychological health.²³

LIMITATION OF STUDY

The current study has several limitations that affect the generalizability of its findings. It was conducted exclusively in central Punjab, specifically in Sargodha, Khushab, and Jauharabad, Pakistan. To increase the generalizability of future research, a wider range of cities across the country should be included. Moreover, with a sample size of 250 participants, future studies would benefit from a larger sample to improve the robustness of the results. The study's implications highlight the significant influence of domestic violence on the mental health of pregnant women, serving as a foundation for future quantitative research that further explores this critical issue.

CONCLUSION

These findings of the study indicate that domestic violence is a significant predictor of psychological distress, anxiety, depression and stress among pregnant women. Moreover, the findings indicated that there were no significant mean differences in psychological health, anxiety, depression, and stress between the two groups.

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Authors' Contribution

Following authors have made substantial contributions to the manuscript as under:

RF & TP: Data acquisition, data analysis, critical review, approval of the final version to be published.

AJ & JMS: Study design, data interpretation, drafting the manuscript, critical review, approval of the final version to be published.

Authors agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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