Original Article

PHYSICAL VIOLENCE AND ITS ASSOCIATED FACTORS AMONG MARRIED WOMEN IN MULTAN, SOUTHERN PUNJAB, PAKISTAN

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Abstract

Background: Physical violence is considered as a routine matter and is a neglected issue in the heavily populated society of Pakistan. The study aimed to estimate the physical violence and its associated factors among married women living in the district Multan, a city of Southern Punjab, Pakistan.
Methods: A Cross-Sectional study was conducted among 375 married women living in the community of six towns of Multan. The data was collected from March 2013 to May 2013, through a questionnaire, based on the World Health Organization Multi-country Study on Women's Health and Life Experiences of Violence against Women. A univariate and multivariate analyses were recorded.
Results: Out of 375 women surveyed, 62.93% reported physical violence.In the univariate analysis, women's age (28-60 years), women's occupation (non-professional,) and family categories, (combined/extended) were found to be significant, at 95% confidence interval (CI). In multivariate analysis, women's employment status, as non-earning (OR; 0.57CI:0.33, 0.98) was significant in last year, and in life time multivariate analysis, husband's nonprofessional status (OR; 1.06; CI: 0.635 1, 0.793) and women's non-earning status (OR; 0.57; CI: 0.33, 0.98) became significant. The combined family system (OR; 1.795, CI: 1.120, 2.878) was found to be significant in multivariate analyses.
Conclusion: Physical violence of different forms is considered as a social and cultural norm by intimate partner. There is a pressing need for appropriate mechanisms particularly in primary health care, to identify and deal with physical violence
Keywords: Intimate partner violence, violence against married women, physical violence, associated factors, Pakistan

Introduction

Intimate partner Violence (IPV) is a pervasive human right violation and a serious public health concern. World Health Organization (WHO) defined IPV as "any behavior within an intimate relationship that causes physical, psychological, or sexual harm to those in the relationship and includes acts of physical aggression, psychological abuse, sexual coercion, and various controlling behaviors" (1) (p. 89). It is estimated that, globally one in three women experienced IPV in their life time as well as six out of every ten women experience physical violence in their lifetime from their intimate partners. More than 1.5 million women physically assaulted and 85% of executors are their intimate partners. (2,3)
A multidisciplinary study on physical violence by the WHO identified that life time prevalence of physical violence against women ranges between 15- 71 and 4-49% of women reported having suffered serious physical violence from their intimate partners.(4,5)

Although physical violence is prevalent in different forms and setting, however women in developing countries experience higher rates of violence as compared to those in developed countries.6Physical violence is also prevalent among married women in Pakistan and 70-90% of the women are affected by IPV. (6)
A study conducted in Pakistan revealed that more than fifty percent (57.6%) women experienced life time physical abuse, while 56.3% reported exposure to physical violence during the previous year. Similarly another study from Pakistan also found that more than 50% women (51%) experienced physical abuse, and 20% of the women experienced or sexual abuse.2 Battered women reported significantly serious health problems, such as: physical (injury, chronic pain, and gastro-intestinal disorders), psychological (depression, post-traumatic stress disorder, and suicide), and sexual (pelvic inflammatory diseases and sexually transmitted

infections) problems(7). In Pakistani society, physical violence driven by cultural and traditional norms, religious and social institution. Women are considered personal belongings of their husbands and husbands control every aspect of women life even their activities and movements.(4)On account of various studies in the context of Pakistan several factors like socio-demographic disparity, women employment status and family characteristics are recognized as the contributed factors of physical violence.(2,6)

Physical violence is considered as a routine matter and is a neglected issue in the heavily populated society of Punjab. In the southern part of this province, women face miserable conditions due to lack of awareness and sensitivity about the plight of women in these male dominated societies.8 Physical violence is wide spread in these areas, and most of the cases remain hidden and unreported, mainly because women have no independent access to the police and judiciary, therefore 70% cases remain unreported and the women remain silent due to the fear of their men's wrath.(8)

Several studies worldwide highlighted physical violence and factors associated in respect to establish a holistic approach toward health environment.(9, 10) In Pakistan, a number of studies have highlighted the issue of IPV and its associated risk factors which have affected women's health. (2, 11,12) However, according to researchers knowledge, none of these studies have been conducted on married women living in the community of Southern Punjab (Multan), Pakistan. Moreover, the increasing surge of the violence acts against women in this region indicating an alarming sign, that the population of the city of Multan is different as compared to the rest of the country due to different socio cultural norms.(13) Therefore, the present study aimed to estimate the prevalence and frequency of physical violence and its association with socio-demographic characteristics among married women living in the district Multan, Southern Punjab, Pakistan. This study would be the first of its kind to examine the prevalence, frequency, and associated factors of physical violence among married women living in the communities of Multan, Pakistan. Moreover, the findings of the study can help community midwives, doctors, and nurses to promote awareness about IPV. Finally this study can also serve as the foundation for further research in the same field in the context of Punjab.

Methodology:

A quantitative research approach along with an analytical cross sectional study design was used in this study to answer the research questions as analytical cross sectional study design is beneficial when one wishes to assess the prevalence of a phenomenon as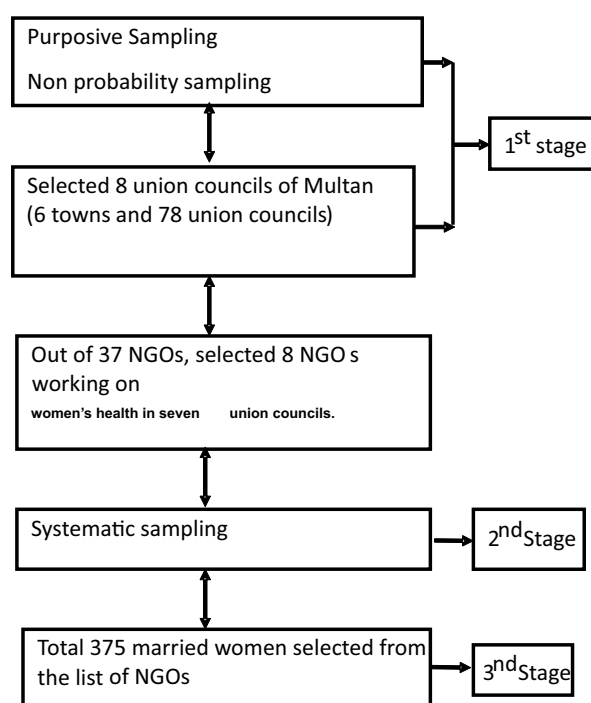 an outcome of the research topic for a given population at one point, for a short period of time. (14) Furthermore, this design is appropriate for demonstrating association between the factors studied and the outcome of interest, at one point in time (15). It also measures the prevalence and frequency (last week, last month, and last year) of physical violence. A cross-sectional study also helps in providing information on the frequency of the characteristics of concerned by collecting data on both, the characteristics of the interested population and the risk factors(2).In the present study, this research design helped in determining the association of the outcome of interest (intimate partner violence i.e., physical, psychological and sexual) with the relevant factors (socio demographic and economic characteristics). This study was conducted in the community of Multan, a district of Southern Punjab, Pakistan. Multan is situated in the southern part of the province on the east bank of the Chenab River, somehow in the geographic center of the country and about 562 km from Islamabad, 356 km from Lahore and 966 km from Karachi Multan is divided into four tehsils (Multan Cantonment, Multan Sadar, Shujabad and Jalalpur Pirwala) which are further divided into six towns, as follows: 1.Bosan Town, 2. Shah Rukn e Alam. 3. Mumtazabad Town, 4. Shersha Town, 5. Shujaabad Town, 6. Jalapur Town. The rationale for selecting thepopulation of Multan as a study setting was to get married women with diverse socioeconomic and demographic backgrounds. The study setting gave a representation of the overall population of Multan which increased the external validity of the study by confirming the generalizability of the study setting. The selected population of this study was all currently married women, living with their husbands, and residing in the community of district Multan, Pakistan, from 25thDecember, 2012 to 25th February, 2013. Currently married women living with their husbands and residing in the community of district Multan, Pakistan were included in this study while pregnant women (IPV is less reported during pregnancy as compared to marital life time16 were excluded from the study. The sample size was calculated by using the statistical method of Epi Info software version 06. Firstly, the sample size was calculated for frequency/prevalence of IPV by taking physical violence as 57.7%, sexual violence as 54.5%, and psychological violence as 83.6%. This required sample size of 11, 12, and 8 married women, respectively. Secondly, the minimum number of women required to calculate the sample size for associated factors was assessed. The ratio of exposed (husband illiterate and family low SES) to unexposed (husband literate and family high SES) was 1:2. By taking the OR of 2.57 with 95% confidence interval and 80% power the minimum sample size calculated which was found to be 365. A

refusal rate of 10% was also estimated which led to an increase in the sample size from 365 to 402. Thus, a sample size of 402 was considered to be sufficient to address all the components of the study questions. However, data was collected from 375 participants and this was considered for analysis; this was because out of 402 women who were selected, initially 17 refused to participate during the data collection procedure. Additionally 10 forms were identified which had incomplete information or higher refusal for the actual variable. This resulted in a 93% response rate.In this study, a three stage sampling strategy was used. In the first stage purposive sampling was utilized to select the study setting; purposive sampling (a type of non-probability sampling) is operationally defined as the selection of a sampling unit in which purposely selected districts are judged on the characteristics of interest and are accessible 15. Multan has six towns namely: Shah Rukan- e-Alam Town, Shershah Town, Bosan Town, Mumtazabad Town, Shujabad Town, and Jalapur Pirwala Town. Within these districts there are 78 union councils, from which at eight union councils were randomly selected. This selection was based on the surveillance system of existing 37 non-governmental organizations (NGO) working in these areas on women health. In the second stage, from among the 37 NGOs only eight NGOs, working within the selected eight union councils and working on women's health, were selected.

In the third stage, the systematic sampling technique was used to select the participants. First a list of all married women registered with the selected NGOs living in the community of Multan was developed. Then, every tenth woman from the list was selected. Only one woman from each house was selected as a participant. Among them 375 married women who met the inclusion criteria, and were currently living with their husbands were selected randomly, as this meant equal probability for each individual for being selected in the study. After determining the eligibility of the study participants and taking their written consent, the research assistants(RAs) completed the questionnaire based on the participants, responses. The process of interview took about 20 minutes (maximum). If the participants had any queries related to questions, an explanation was given to them. The participants were also assured of the anonymity and confidentiality of the information. The data was collected through a questionnaire based on the WHO Multi-country Study on Women's Health and Life Experience focusing on violence against women.2 The tool was translated into national language Urdu and went through face and content validity assessment by experts including a psychologist, an epidemiologist, a community-based medical doctor, the field supervisor, a public health specialist, and the collectors. The content validity index came out as 0.95 for 'relevancy' and 0.99 for 'linguistic clarity' and for reliability computed value of Cohen's Kappa was 0.99. In order to collect the data from Multan's eight union councils simultaneously, eight RAs who were living in the same locality were hired. The research assistants were trained by the PI and the research supervisor for a week, which included two days of official training, followed by three days of field training. Before starting the formal and collection process for the present study, the translated tool was pilot tested on 20 participants (i.e. 5% of the total sample size of 375).All data were entered in the SPSS version 19 by the data entry programmers. Before any analysis was conducted, the data entered was cross checked and cleaned by the investigators and research assistants. Percentages and frequencies distribution were calculated for nominal data (i.e., education, wife's earning, belonging and participation in any organization etc.) and ordinal data (health status, general health status problem in performing general activities, memory, concentration and socioeconomic status etc.). To assess the relation between various social demographics and the occurrence of physical violence, univariate and multivariate analysis was performed. The Multivariate analysis was run by backwards logistic regression for the various variables. The model was cross checked by using back and forth method where each and every variable was assessed how it is behaving. Finally the model which came from backward method was selected. Ethical approval for the present study was obtained from the Ethical Review Committee (ERC) of the Aga Khan University (AKU), district coordinator officer, social welfare department and the department of 1122 from district Multan and NGOs. As the study topic is a very sensitive social issue, the safety of the participants was ensured according to the ethical principle of WHO guidelines provided for the safety of women. 4 The participants were selected on voluntary basis. The confidentiality and safety of the participants was maintained by providing pseudo nyms to the respondents. All respondents were informed about their right to end their participation in the study whenever they wanted during the research process. The data was kept under lock and key and was accessible only to the chief investigator and the supervisor.

Figure 1: Flow chart of Participants' Recruitment for the Present study

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┌─────────────────────────────────┐
│ Purposive Sampling              │ ──┐
│                                 │   │──▶ 1ˢᵗ stage
│ Non probability sampling        │   │
└─────────────────────────────────┘   │
              ↕                        │
┌─────────────────────────────────┐   │
│ Selected 8 union councils of    │ ──┘
│ Multan                          │
│ (6 towns and 78 union councils) │
└─────────────────────────────────┘
              ↕
┌─────────────────────────────────┐
│ Out of 37 NGOs, selected 8 NGO s│
│ working on                      │
│ women's health in seven         │
│ union councils.                 │
└─────────────────────────────────┘
              ↕
┌─────────────────────────────────┐
│ Systematic sampling             │ ──▶ 2ⁿᵈStage
└─────────────────────────────────┘
              ↕
┌─────────────────────────────────┐
│ Total 375 married women selected│ ──▶ 3ⁿᵈStage
│ from the list of NGOs           │
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Results

Table 1: Prevalence and frequency of physical violence over life time, last year and last month

Variable	N (%)	Life Time %				N (%)	Last Year %				N (%)	Last Month %			
		Number of events					Number of events					Number of events			
		1-2	3-4	5-6	>6		1-2	3-4	5-6	>6		1-2	3-4	5-6	>6
		(n)%	(n)%	(n) %	(n)%		(n)%	(n)%	(n)%	(n)%		(n)%	(n)%	(n)%	(n)%
Slapped	213 (56.8)	25	9	23	156	158 (42.1)	42	22	26	68	92 (24.5)	44	13	22	13
Threw things that causeharm	74 (19.7)	4	12	8	50	58 (15.5)	15	5	10	28	38 (10.1)	21	7	5	5
Pushed	140 (37.3)	16	10	14	100	111 (29.6)	30	17	24	40	62 (16.5)	35	7	12	8
Pulled Hair	79 (21.0)	7	5	8	59	59 (15.7)	15	8	12	24	39 (10.4)	20	5	6	8
Punched	72 (18.9)	10	3	8	51	49 (13.1)	15	2	9	23	32 (8.5)	18	3	3	8
Beat with inanimate object	43 (11.5)	6	1	5	31	29 (7.7)	8	3	3	15	21 (5.6)	11	4	2	4
Kicked	57 (15.2)	4	3	7	43	37 (9.8)	7	1	9	20	24 (6.4)	11	4	1	8
Dragged	42 (11.2)	3	1	4	34	33 (8.8)	7	2	6	18	21 (5.6)	12	1	4	4
Hit	120(32)	19	8	13	80	88 (23.4)	26	11	7	44	54 (14.4)	35	1	6	12
Strangled	36 (9.6)	5	2	4	25	27 (7.2)	9	2	5	11	18 (4.8)	11	1	3	3
Burned	21 (5.6)	6	4	0	11	16 (4.2)	7	1	2	6	13 (3.5)	10	0	0	3
Summary measure of physical abuse	897/1425=62.93%					665/1425 46.6/%					414/1425 =29%				

In all the forms of physical violence, a majority of the women (n=213, 56.8%) reported being slapped by their husbands. Thirteen women reported being slapped > 6 times in the last month; followed by 68 women who reported being slapped > 6 times in the last 12 months, and 156 women reported being slapped > 6 times over their life time.

Another kind of physical violence reported by most of the women (n=140, 37.3%) was being pushed by the husband. Eight women reported being pushed by their husbands > 6 times in the last month; followed by forty women who reported being pushed > 6 times in the last 12 months, and 100 reported being pushed > 6 times over their whole life time.

Table 2: Univariate and Multivariate Analysis to Show Association between Socio-Demographic Variable and past year Physical Violence

Characteristic	Past Year Physical violence			
	Absence of Event n (%)	Presence of Event n (%)	Physical OR (CI, 95%)	Physical OR adj (CI, 95%)
Women's Age in Categories				
16-27	61 (32.8%)	38 (20.1%)		
28-60	125 (67.2%)	151 (79.9%)	**1.93 (1.21,3.10)**	**1.83 (1.06, 3.156)**
Women's Educational level				
Illiterate	109 (58.6%)	119 (63.0%)		
Literate	77 (41.4%)	70 (37.0%)	0.83 (0.55,1.26)	
Women's Employment Status				
Non-earning	39 (21.0%)	45 (23.8%)		
Earning	147 (79.0%)	144 (76.2%)	0.85 (0.52,1.38)	**0.57 (0.33, 0.98)**
Women Occupation				
Professional	14 (35.9%)	27 (60.0%)		
Non Professional	25 (64.1%)	18 (40.0%)	**0.37 (0.15, 0.90)**	
Husband's Age				
<45 years of age	136 (51.7%)	127 (48.3%)		
> 45 years of age	50 (44.6%)	62 (55.4%)	1.32 (0.85,2.07)	------
Husband's Educational Status				
Literate	148 (51.4%)	140 (49.6%)		
Illiterate	38 43.7%	49 (56.3%)	1.36 (0.84, 2.21)	-------
Husband's Employment Status				
Employed	164 (48.4%)	175 (51.6%)		
Unemployed	22 (61.1%)	14 (38.9)	0.59 (0.29, 1.21)	0.61 (0.38,1.00)
Husband's Occupation				
Professional	110 (51.6%)	103 (48.4%)		
Non Professional	54 (42.9%)	72 (57.1%)	1.42 (0.92, 2.22)	1.08 (0.66, 1.78)
Children				
1-4	117 (50.9%)	113 (49.1)		
0, >4	69 (47.6%)	76 (52.4%)	1.14 (0.75,1.73)	

Family Categories				
Nuclear	133 (57.1%)	100 (42.9%)		
Combined/extended	53 (37.3%)	89 (62.7%)	**2.23 (1.45,3.43)**	**2.210 (1.40,3.47)**
Socio-economic Status			0.76 (0.43-1.18)	
Member Categories				
<5	68 (55.7%)	54 (44.3%)		
>5	118 (46.6%)	135 (53.4%)	1.44 (0.93,2.23)	**2.21 (1.40, 3.47)**

In the univariate analysis some variables, including women's age (28-60 years), women's occupation (non-professional,) and family categories, (combined/extended) were significant, at 95% confidence interval (CI). Women who were between the ages of 28-60 years were 1.93 times more likely to be protected from physical violence, as compared to women who were younger (OR=1.93; CI: 1.21, 3.10). Association between women's education level and physical violence was found to be significant when univariate analysis was done for this variable. The employment status of women was also an indicating factor of physical violence among women. The employment status of women living in district Multan was service, selling goods, seasonal work, and stitching. The results of this study showed a significant association between the women's employment status and physical violence. Furthermore, women who were non-professional were 0.37 times more protected from physical violence as compared to professional women (OR=0.37; CI: 0.15, 0.90). The husbands' occupation was also a strong indicator of physical violence on women in this study.

The husbands' occupation was defined in the context of professionals and non-professionals. Those who were professionals were employed, doing some kind of skilled work (military, police, and official work) and non-skilled work (manual work), whereas those who were non-professionals were unemployed. Statistical measurement revealed that husbands who were unemployed (non-professional) had a significant association with physical violence on women. Women having husbands with unemployed (non-professional) status were 0.59 times more likely to be protected from physical violence than women having husbands who had professional occupations (OR=0.59; CI: 0.29, 1.21). The type of family system (nuclear or combined) was also found to be a strong indicator of physical violence on women. Women who were living in a combined family were 2.23 times more likely to be protected from physical violence as compared to women who were living in a nuclear family (OR=2.23; CI:1.45, 3.43).

However, the women's husbands' age, husbands' educational status, husbands' employment status, children, and family members had non-significant associations with physical violence when univariate analysis was done.

Table 3: Univariate and Multivariate Analysis to Show Association between Socio-Demographic Variable and life time Physical Violence

Characteristics	Physical Violence			
	Absence of Event N (%)	Presence of event N (%)	Physical OR (CI, 95%)	Physical OR Adj (CI, 95%)
Women's Age in Categories				
16-27	49 (35.3)	50 (21.2)		
28-60	90 (64.7)	186 (78.8)	**2.02 (1.26,3.23)**	**1.740 (1.01, 3.00)**
Women's Educational level				
literate	87 (62.6)	141 (59.7)		
Illiterate	52 (37.4%)	95 (40.3%)	1.12 (0.73,1.73)	-----------

Women's Employment Status				
Non- Earning	12 (40.0%)	29 (53.7%)		
Earning	18 (60.0%)	25 (46.3%)	0.92 (0.56-1.53)	**0.57 (0.33,0.98)**
Women's Occupation				
Professional	12 (40.0%)	28 (53.7%)		
Non professional	18 (60.0%)	25 (46.3%)	0.57 (0.32, 1.42)	
Husband's Age				
<45 years of age	103 (74.1%)	160 (67.8%)		
> 45 years of age	36 (25.9%)	76 (32.2%)	1.35 (0.85-2.15)	----------
Husband's Educational Status				
Literate	114 (82.0%)	174 (78.7%)		
Illiterate	25 (18.0%)	62 (26.3%)	1.62 (0.96-2.73)	----------------
Husband's Employment Status				
Employed	126 (90.6%)	213 (90.3%)		
Unemployed	13 (9.4%)	23 (9.7%)	1.04 (0.52-2.13)	0.61 (0.38,1.00)
Husband's Occupation				
Nonprofessional	85 (67.5%)	128 (60.1%)		
Professional	41 (58.8%)	85 (39.9%)	0.1.37 (0.86,2.18)	1.0670 (0.63,0.79)
Children				
1-4	91 (65.5%)	139 (58.9%)		
0, >4	48 (34.5%)	97 (41.1%)	1.32 (0.86,2.04)	
Family Categories				
Nuclear	99 (71.2%)	134 (56.8%)		
Combined/extended	40 (28.8%)	102 (43.2%)	**1.88 (1.20,2.95)**	**1.79 (1.12,2.87)**
Member categories				
<5	44 (36.1%)	78 (30.8%)		
>5	78 (58.6%)	120 (81.1%)	1.41 (0.91-2.20)	

In the current study, in multivariate analysis women's employment status, as earning (OR; 0.57CI:0.33, 0.98) was significant in last year, and in life time multivariate analysis, husband's nonprofessional status (OR; 1.06; CI: 0.635 1, 0.793) and women's earning status (OR; 0.57; CI: 0.33, 0.98) became significant. The Combined family system (OR; 1.795, CI: 1.120, 2.878) was found to be significant in univariate analysis in last year, and in multivariate analysis as well

Discussion:

In the current study, the prevalence of physical abuse was reported by more than half of the married women, i.e., 62.93% (n=236), which is higher as compared to other studies. The results of other studies, which were conducted in different parts of the world, also show a high prevalence of physical violence. For example 26% (n= 9938) in India 17, 30.9% (n= 883) in Vietnam 18, 58.6% (n= 278) in Brazil 19, and 56.3% (n= 759) in Pakistan2. This shows that the highest figures are emerging from Pakistani studies as reported by Ali et al.2from Karachi (56 %), whereasthe current study found62.93 % women exposed to physical violence.

One of the reasons for high prevalence of physical violence in the current study is that the data was obtained from the different province (i.e., Punjab,

which has different sociocultural norms and values) of Pakistan. The high rate of physical IPV is also supported by the data from a survey conducted by Sustainable Development Policy Institute (SDPI) that, physical violence against women in the province of Punjab is socially and culturally acceptable and a large proportion of men believed that there are situations in which it becomes necessary to use physical violence against women, and that banning of the physical violence is a "western concept" [20].

In other studies the most frequent form of physical violence reported were slapping, pushing, hitting, kicking, choking, kicking, and beating2, 7,9. On an average, 9 different forms of physical violence have been reported in these studies. Similarly, in the current study, the most frequent form of physical violence includes: slapping (56.8%), pushing (37.3 %), and kicking (15.2 %). Similar forms of physical violence were identified among married women in Vietnam; for instance, the statistics show that slapping was 27.0 %, pushing 5.8 %, kicking 8.6 %, and choking 1.7 % 18. As reported by Ali et al. 2the same forms of physical violence were reported among married women of Sindh, Pakistan, which included slapping (n=227,29.9%), Pushing (n=384, 50.6%), Kicking (n=330,43.5%), and choking (n=183, 24.1%). The findings of another Pakistani study shows similar forms of physical violence: i.e.,pushed, grabbed, and shoved (n=84, 47.7%), and slapped, hit and punched (n=69, 39.2%)21.

In the current study, an association was found among socio demographic variables and violence in the past year, followed by life time exposure to physical violence. In univariate analysis women aged 28 to 60 years were found statistically significant to be at a greater risk of being exposed to physical violence. It showed that women of this age are at a greater risk of physical violence. According to many other studies18,2,22.women of older age are at more risk of being subjected to violence. The possible explanation of the current study's result is that the older women are more vulnerable than other age groups because of cultural (patriarchy, masculinity and femininity) and social factors (women empowerment and poverty) 23. The current study's results are not only congruent with the results of another study conducted in Pakistanbut are also similar to the findings of studies conducted in developed world as the findings of a study conducted in USArevealed that, physical violence increased among the women over 55 years of age2,22.

An interesting finding of the current study is that unemployed women seem to be on safer grounds and protected from physical violence. This protected status can be seen not only in the past year multivariate analysis, but also with respect to life time prevalence. However, in studies conducted in

different countries highlight the fact that women who are employed are the ones facing less violence, as compared to unemployed women.24,25One of the rationales for the findings of the current study is that; due to cultural constraints and husbands' controlling behavior, women accepts the husband's decision and stay at home 26. Furthermore, the acceptance of male dominancy and power makes women submissive which might prevent them from the exposed to physical violence 2

In the univariate analysis relating to physical violence in the past year, another interesting finding was that the women who were nonprofessionals were found to be protected. This indicates that women who are unemployed are less vulnerable to IPV, because they are submissive and behave the way culture is expecting from them. However, some studies which have been conducted on the same issue present quite a different view. The findings of these studies indicate that women who are professional and skilled workers are less vulnerable to partner violence.2,18Thus, these studies indicate that professional women are more autonomous, powerful, educated, tactful, and confident and are less vulnerable to partner violence. These women are also aware about their rights and they can raise their voice against violence and often take stand for their decisions; this is not acceptable to the society at large as well as their husbands. Therefore, they are more exposed to physical violence.

In this study, the extended family system and the number of family members are significantly associated with exposure to physical violence, as women living in an extended family system and living with more number of family members are at a higher risk of exposure to physical violence. A study conducted in Jordan assessed the association of extended family with the occurrence of violence. The findings of this study revealed that there is a significant association of these two variables. They further identified that in an extended family system, men often witness violence from other family members and then they practice this act on their wives. In addition, the findings revealed that too many members living in one household, who share the same views, at times, ends up in subjecting a vulnerable person to violence (it is always the women who are the most vulnerable)8. Since a Pakistani study stated that, women are supposed to be obedient, silent, and dependent on their husband the reinforcement of these gender role increases expectations from a woman, from almost all the members of the extended family2. Hence, if any family thinks that the woman is unable to fulfill cultural norms, she has a risk of becoming the victim of violence2

Conclusion:

Violence against women is considered as a global human rights and public health concern which exist worldwide.The current study confirms the high prevalence of physical violence among married women, across all socio-economic settings, in Multan, a city of Southern Punjab Pakistan. It is considered a general behavior that physical violence is accepted as a cultural norm and women living in the context of Punjab, Pakistan, are subjected to it routinely, on a daily basis Physical violence requires prompt attention by the governing bodies. Legal action against this IPV should be strengthened and strictly implemented, not only for housewives but also for working women.A qualitative study in recommended for an in-depth understanding of the present phenomenon and the related associated factors that lead to physical violence. Moreover, this study provides a basis for planning interventional studies aiming at testing interventions to improve the health of women suffering from physical violence.

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