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DEMOGRAPHIC CORRELATES OF PERCEIVED PSYCHOLOGICAL IMPACT OF DOMESTIC VIOLENCE: A STUDY OF WOMEN IN DISTRICT CHINIOT

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Abstract

This study examined demographic correlates of perceived psychological impact of domestic violence (DV) among 120 women in District Chiniot, Punjab, Pakistan, where (DV) threatens women's mental health, but demographic influences on its perceived toll remain underexplored. Using a cross-sectional design, seven social-demographic (age, marital status, education, employment, income, residence, and family type) and a 9-item, 5-point Likert scale measuring perceived impact (depression, anxiety, self esteem, stress/ trouma, isolation, sleep, decision making, helplessness, overall mental health; (α=.889) were assessed. Perceived impact was high overall (M=44.02, SD=6.93, range 10-50), highest for anxiety/fear (M=4.69), and depression (M=4.63). Using Chi-square and Gamma on tertile-categorised impact, significant associations emerged for employment status $\chi 2(6)=55.141$, $p<.001$, Gamma=0.488; income $\chi 2(8)=47.491$, $p<.001$, Gamma=-0.656; education $\chi 2(8)=30.752$, $p<.001$, Gamma=-0.503. Age and family type were significant on Chi-square only, while marital status and residential were non significant. Lower income, less educated homemakers reported highest impact, indicating need for mental health and economic empowerment interventions.

INTRODUCTION

Domestic violence (DV) against women remains one of the most wide spread yet under-acknowledged violations of human rights worldwide (Maleki et al., 2026). The World Health Organisation estimates that nearly 1 in 3 women globally has experienced physical or sexual violence by an intimate partner during her lifetime (World Health Statistics, 2026). A pattern that cuts across culture, class, and geography. Beyond its physical toll domestic violence carries profound psychological consequences such as depression, anxiety, post troumatic stress deminished self esteem, and impaired decision-making that often persist long after any physical injury has healed (Bouroncle Velásquez et al., 2026).

In Pakistan, as in LaBore et al., (2021) stated that domestic violence continues to be normalised by patrachal social structure, economic dependency, and weak enforcement of protective legislation such as the Punjab

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Protection of Women against Violence Act 2016. District Chiniot a predominantly rural and semi-urban district of Punjab with conservative social norms and limited institutional infrastructure has been identify as an area of particular concern. A recent report by the National Commission on the status of women ranked Chiniot among the district with the highest reported incidents of gender-based violence in the province (Sheikh et al., 2025) . Yet the psychological consequences of this violence are rarely examined in relation to the demographic profile of the women who experience it. Even though age, education, income, employment, marital status, residence, and family structure are all plausible shapers of how vulnerable a woman is, how much support she can draw on, and consequently how deeply she percieves violence to affect her psychological well-being.

This study respond to that gap by asking a focused question among Women in District Chiniot, do perceptions of the psychological impact of domestic violence differ according to demographic characteristics? Rather than measuring exposure to violence itself, the study measures womens perception of its psychological consequences for example, depression, anxiety,y low self esteem, stress, social isolation, sleep disturbance, impaired decision-making, helplessness and overall mental health and tests whether these perceptions vary ystimatically across demographic subgroups.

Purpose of the Study:

This study aims to examine how women of different demographic characteristics in District Chiniot perceive the extent to which domestic violence impacts their psychological health, in order to identify which subgroups of women perceive themselves to be most psychologically affected and therefore most in need of the targeted support.

Significance of the Study:

The findings are relevant to several audiences. For mental health and social welfare practitioner in Chiniot, identifying which demographic subgroup perceive the greater psychological impact can help direct scarce counselling and outreach resources more efficiently. For policy makers, the results clarify weather the psychological impact of domestic violence is evenly distributed across the population or concentrated among specific groups such as homemakers, low income women, or rural residence. It has direct implications for how economic empowerment and awareness programs should be targeted. Academically, the study extends the broader analysis of domestic violence prevalence and determinant in this same data set (Shahab, 2026) by focusing specifically on thedemographic correlates of its percieved psychological consequences.

Objectives of the Study

1- To describe the socio-demographic of women respondents and their perception of the psychological impact of domestic violence in District Chiniot..

2- To examine whether womens' perception of psychological impact of the domestic violence differ significantly according the their socio-demgraphic characteristics.

Literature Review

A large body of international literature documents the psychological consequences of intimate partner and domestic violence. Bulut et al., (2026) reviewed the health consequences of intimate partner violence and concluded that depression, post troumatic stress disorder, and suicidality are among the most consistically reported outcome for survivors regardless of setting. Similarly, Henderson et al., (2026) drawing on a large US population sample, found that both physical and psychological intimate partner violence were independently associated with depressive symptoms and dominate physical health, underscoring that even non physical abuse carries measurable psychological cost. The ecological perspective shows that a woman's experience of violence is influenced by personal, family, community, and social factors (Hossan et al., 2026; Widodo, 2026). Therefore, it makes sense to

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look at demographic differences rather than assuming all victims are affected in the same way.

Findings from Pakistan reveal a similar pattern. Zakar et al., (2012) a hospital-based survey of married women in Lahore linked intimate partner violence to poor mental health—including depression and anxiety—and indicated that women with lower levels of education and financial dependence were disproportionately affected. National data from the PDHS also shows that marital violence is more prevalent among rural and economically dependent women, suggesting that economic insecurity can exacerbate the psychological impact (Hassan et al., 2020). Social barriers also play a role; Barakati et al., (2026) noted that stigma and concerns regarding family honor often deter women from reporting abuse, and this silence can further aggravate the psychological consequences. Research conducted in Karachi by Gul et al., (2026) also highlighted that women often described psychological abuse—such as taunting, threats, and restrictions on their freedom—as more distressing than physical violence itself.

At the local level, studies conducted in Punjab reveal clear demographic trends. Research in central Punjab indicates that low levels of education among husbands and early marriage for women are key factors contributing to domestic violence (Gulesci et al., 2026). This implies that younger and less educated women are not only more vulnerable to such violence but also less equipped to cope with its psychological impact. Studies as in Hasan et al., (2023); Wheeler & Nye, (2025); & Wood et al., (2025) on farming families further show that poverty and financial pressures linked to crop cycles often trigger family conflicts. When violence occurred in these households, women reported a heightened sense of psychological burden, as the abuse exacerbated their existing financial anxieties. The situation is more complex for working women; Mahmood et al., (2023) observed that in southern Punjab, women who began earning an income sometimes faced initial resistance from their husbands. Consequently, employment does not necessarily equate to lower psychological stress compared to the role of a homemaker. Similarly, Siddiqi., (2016) highlighted that in rural areas, the implementation of legislation such as the 'Punjab Protection of Women Against Violence Act' remains inadequate. As a result, rural women have limited access to institutional support for coping with the psychological consequences of violence.

Overall, the available research makes it evident that domestic violence affects women differently depending on their backgrounds. Factors like limited schooling, low income, being dependent on husband's income, staying at home, and rural living have often been linked with greater psychological distress. Findings related to age and marital status, however, are mixed. Based on this, the present study examined the following hypotheses.

H1: Age is associated with differences in perceived psychological impact.

H2: Marital status is associated with differences in perceived psychological impact.

H3: Level of education is associated with differences in perceived psychological impact.

H4: Employment status is associated with differences in perceived psychological impact.

H5: Household income is associated with differences in perceived psychological impact.

H6: Rural and urban residence is associated with differences in perceived psychological impact.

H7: Family type is associated with differences in perceived psychological impact.

Methodology

A quantitative cross-sectional approach was used in this study to examine demographic factors associated with psychological impact of domestic violence in Chiniot district of Punjab, Pakistan. This paper uses part of the data collected for M.Phil research in the Department of Rural Sociology, University of Agriculture, Faisalabad. The main research covered prevalence, underlying causes and psychological consequences of domestic violence in rural and urban union councils of the district. Data were collected through a field survey using a structured interview schedule. A

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total of 120 ever-married women, aged 18 years or above, participated in the survey.

Seven socio-demographic characteristics including age, marital status, education, employment status, household income, residential area, and family type were treated as independent variables. The dependent variable namely, the psychological effects of domestic violence was measured using a nine-item Likert scale with five levels (ranging from 1 = strongly disagree to 5 = strongly agree). This scale covered aspects such as depression, anxiety and fear, low self-esteem, stress and emotional trauma, social isolation, sleep disturbances, and other adverse effects on mental health. Based on these nine items, the research team calculated a composite score for psychological effects for each respondent which is utilized in the analysis here while the details of responses to individual items are presented separately in Table 2.

The collected data were analyzed using SPSS. Frequency tables, percentages, means and standard deviations were calculated for descriptive analysis. Reliability of the psychological impact scale was checked through Cronbach's alpha. Relationship among the nine items was examined with Pearson correlation. For hypothesis testing, cross-tabulation technique with Chi-square and Gamma was applied. Significance level was set at 0.05 for all analyses.

Results and Discussion

Socio-Demographic Profile of Respondents

Table 1 presents the socio-demographic profile of the 120 women included in the study. Most respondents were young. About 46.7% were in the age group of 18 to 25 years, and another 30.0% were between 26 and 35 years. The majority were currently married (87.5%). In terms of education, there was a mixed pattern. Around 38.3% had graduation or above, while 14.2% had no formal schooling. Regarding work status, 41.7% were unemployed and 35.0% were homemakers, so together they made more than three-quarters of the sample. Only 15.8% were in formal employment. In terms of income, 62.5% of households reported a monthly income of PKR 50,000 or less. Almost three fourth of the respondents (75.0%) resided in the rural areas and 65.8% were residing in joint family system.

Table 1 Socio-Demographic Profile of Respondents (N = 120)

Variable	Category	f	%
Age (years)	18-25	56	46.7
	26-35	36	30.0
	36-45	21	17.5
	46-55	4	3.3
	>55	3	2.5
Marital Status	Married	105	87.5
	Unmarried	12	10.0
	Divorced	2	1.7
	Widowed	0	0.0
	Separated	1	0.8
Education	No formal education	17	14.2
	Primary	20	16.7
	Secondary	12	10.0
	Higher secondary	25	20.8
	Graduate and above	46	38.3

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Employment Status	Employed	19	15.8
	Unemployed	50	41.7
	Self-employed	9	7.5
	Homemaker	42	35.0
Monthly Income (PKR)	Below 30,000	35	29.2
	30,001-50,000	40	33.3
	50,001-80,000	14	11.7
	80,001-100,000	27	22.5
	>100,000	4	3.3
Area of Residence	Urban	30	25.0
	Rural	90	75.0
Family Type	Nuclear	35	29.2
	Joint	79	65.8
	Extended	6	5.0

Note. f = frequency; % = percentage of total sample.

Perceived Psychological Impact of Domestic Violence

Table 2 shows item-wise responses regarding perceived psychological impact of domestic violence. Mean scores for all nine items were above the midpoint of 3.0, which indicates that women perceived a strong psychological impact. The highest mean was for the statement that victims often experience anxiety and fear (M = 4.69, SD = 0.62). This was followed by domestic violence leads to depression among women (M = 4.63, SD = 0.82) and victims experience sleep disturbances (M = 4.59, SD = 0.85).

Table 2: Respondents' Perceptions of the Psychological Impact of Domestic Violence

Sr	Statement	SD	D	N	A	SA	Mean ± SD
1	Depression among women	1.7	3.3	1.7	16.7	76.7	4.63 ± 0.82
2	Anxiety and fear	0.0	1.7	3.3	19.2	75.8	4.69 ± 0.62
3	Lowers self-esteem	3.3	1.7	1.7	39.2	54.2	4.39 ± 0.88
4	Stress and emotional trauma	4.2	17.5	5.8	20.0	52.5	3.99 ± 1.29
5	Social isolation	3.3	5.0	16.7	20.0	55.0	4.18 ± 1.09
6	Sleep disturbances	1.7	3.3	3.3	17.5	74.2	4.59 ± 0.85
7	Affects decision-making ability	1.7	1.7	3.3	24.2	69.2	4.58 ± 0.78
8	Feel helpless and hopeless	3.3	4.2	4.2	35.0	53.3	4.31 ± 0.98
9	Negatively affects mental health	2.5	2.5	4.2	26.7	64.2	4.47 ± 0.89

Note. SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree. Values are percentages.

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The lowest mean, though still high, was for victims suffer from stress and emotional trauma (M = 3.99, SD = 1.29). This item also showed more variation in responses, with 21.7% disagreeing or strongly disagreeing. Overall, the mean score for psychological effects was 44.02 (standard deviation = 6.93) within a possible range of 10 to 50, confirming that the women surveyed considered domestic violence to be extremely detrimental to psychological health.

Reliability of the Psychological Impact Scale

The nine-item Psychological Impact scale demonstrated good internal consistency, with a Cronbach's alpha of .889 (Table 3), exceeding the conventionally accepted threshold of .70 for acceptable reliability in social science research (Nunnally, 1978; Tavakol & Dennick, 2011).

Table 3 Reliability Statistics for the Psychological Impact Scale

Scale	No. of Items	N	Cronbach's α
Perceived Psychological Impact of Domestic Violence	9	120	0.889

Inter-Item Correlations

Table 4 presents the inter-item Pearson correlation matrix for the nine psychological-impact items. All items correlated positively with one another, with coefficients ranging from r = .07 to r = .86, supporting the internal coherence of the scale. The strongest associations were observed between the item understanding decision-making impairment (D14) and social isolation (D11) (r = .86), and between depression (D8) and sleep disturbance (D13) (r = .84), suggesting that women who perceived greater cognitive and social consequences of violence also tended to perceive greater emotional and physical consequences.

Table 4 Inter-Item Correlation Matrix for the Psychological Impact Scale (Pearson r)

Item	1	2	3	4	5	6	7	8	9
1. D8	—	0.60	0.83	0.24	0.32	0.84	0.68	0.37	0.53
2. D9		—	0.47	0.14	0.28	0.66	0.35	0.27	0.27
3. D10			—	0.55	0.58	0.79	0.66	0.60	0.75
4. D11				—	0.86	0.30	0.07	0.52	0.46
5. D12					—	0.33	0.12	0.57	0.46
6. D13						—	0.74	0.41	0.59
7. D14							—	0.38	0.59
8. D15								—	0.62
9. D16									—

Note. 1 = Depression, 2 = Anxiety/fear, 3 = Low self-esteem, 4 = Stress/trauma, 5 = Social isolation, 6 = Sleep disturbance, 7 = Decision-making impairment, 8 = Helplessness, 9 = Overall mental health. With N = 120, $|r| \geq .18$ is significant at $p < .05$ and $|r| \geq .23$ at $p < .01$ (two-tailed); all but three of the 36 item pairs met the $p < .01$ threshold.

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Testing of Hypotheses: Demographic Correlates of Perceived Psychological Impact

Table 5 presents the association between seven demographic variables and overall perceived psychological impact of domestic violence. Psychological impact was divided into low, medium and high categories based on tertile scores of the composite scale. Both chi-square and Gamma values were used to test the hypotheses. For age, chi-square showed a significant association, $\chi^2(8) = 24.546$, $p = .002$, but Gamma was not significant (Gamma = 0.273, $p = .138$). This means that psychological impact was not distributed independently of age, but there was no clear ordinal pattern. So H1 was only partially supported.Marital status did not show a significant association on either test, $\chi^2(6) = 11.302$, $p = .080$; Gamma = -0.361, $p = .237$. Therefore H2 was not supported. This may also be due to small and unequal groups in marital status as mentioned in the methodology.Education showed a significant association on both tests, $\chi^2(8) = 30.752$, $p < .001$; Gamma = -0.503, $p = .001$. The negative value of Gamma indicates that higher education was associated with lower perceived psychological impact. Hence H3 was strongly supported.

Employment status was significantly associated with perceived psychological impact on both tests, $\chi^2(6) = 55.141$, $p < .001$; Gamma = 0.488, $p = .002$. So H4 was supported and there was a clear ordinal pattern across employment groups.Household income also showed a strong association, $\chi^2(8) = 47.491$, $p < .001$; Gamma = -0.656, $p < .001$. This was the largest Gamma value in the analysis. It indicates that as household income increased, perceived psychological impact decreased in a clear pattern. Therefore H5 was strongly supported.Area of residence was not significantly associated with psychological impact on either test, $\chi^2(2) = 4.259$, $p = .119$; Gamma = -0.346, $p = .150$. Hence H6 was not supported when psychological impact was taken as low, medium and high categories.Family type showed a significant association on chi-square, $\chi^2(4) = 18.279$, $p = .001$, but Gamma was not significant (Gamma = -0.300, $p = .160$). So like H1, H7 was only partially supported. The overall relationship was significant but ordinal trend was not confirmed.It is important to note that some cross-tabulations had sparse cells. For marital status and income, up to 75.0% and 33.3% of expected cell frequencies were less than 5 due to small sub-groups. Therefore chi-square results for these variables should be interpreted with caution.

Table 5 Testing of Hypotheses: Demographic Characteristics and Perceived Psychological Impact of Domestic Violence

Variable	Chi-square	p	Gamma	Decision
Age	24.546	.002	0.273	Supported
Marital Status	11.302	.079	-0.361	Not Supported
Education	30.752	< .001	-0.503	Supported
Employment Status	55.141	< .001	0.488	Supported
Income	47.491	< .001	-0.656	Supported
Area of Residence	4.259	.119	-0.346	Not Supported
Family Type	18.279	.001	-0.3	Supported

Note. * $p < .05$ (chi-square test of association). Gamma (λ) is the Goodman-Kruskal measure of ordinal association, tested against the null of no association; its p value is reported in the final column. Psychological impact is categorised into Low, Medium, and High tertiles of the composite score (N = 120).

Discussion

This study aimed to examine whether women's perceptions of the psychological impact of

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domestic violence in District Chiniot vary by demographic characteristics. Both chi-square and Gamma tests were used. Results showed that perceived psychological impact was significantly associated with employment status, household income and education on both tests. Age and family type were significant on chi-square test only. Marital status and area of residence were not significant on either test. This pattern is largely in line with international and Pakistani literature discussed earlier, with some local differences. It also differs in some ways from the continuous score analysis of the same variables, which is discussed later.

The strongest association was found for employment status, $\chi^2(6) = 55.141$, $p < .001$, Gamma = 0.488, $p = .002$. Homemakers were more likely to be in the high impact category, while employed and self-employed women were more likely to be in the low impact category. This finding is in line with Sattar et al., (2022) who reported that women's economic independence can work both ways. Paid work can provide women with resources and autonomy, but it can also trigger a backlash from husbands who perceive their authority as being challenged. Current data indicates that women who were economically active—possessing some income and autonomy—were less likely to fall into the high-impact group. Conversely, housewives who relied on their husbands for income were more likely to be part of this group. This supports the findings of Jabeen et al., (2025) who observed that economic dependence renders women more vulnerable to domestic violence and its consequences. It also aligns with Heise, (1998) ecological model, which illustrates how individual resources influence the psychological experience of violence.

Income showed the strongest ordinal association in the whole analysis, $\chi^2(8) = 47.491$, $p < .001$, Gamma = -0.656, $p < .001$. A clear trend was observed: as household income increased, the perception of psychological effects decreased. This observation supports the research of Ashraf & Abrar-Ul-Haq, (2017) which found that economic hardship is a major cause of family conflict in rural Punjab. For women in low-income households, domestic violence is often experienced alongside financial stress rather than as an isolated issue. This finding also aligns with the results of Draginja et al., (2023) who reported that the combination of psychological and economic stress further deteriorates the mental health of women subjected to violence.

In both tests, a significant association was also found between education and the perceived psychological impact of violence: $\chi^2(8) = 30.752$, $p < .001$, Gamma = -0.503, $p = .001$. The negative Gamma value indicates that as the level of education increased, the likelihood of reporting severe psychological impacts decreased in a consistent and systematic manner. These findings differ somewhat from those reported by Sattar et al., (2022) their research linked lower education to a higher risk of experiencing violence, rather than to how the psychological impact of that violence is perceived or understood. In the case of Chiniot, education appears to function as a coping resource. It may assist women in better understanding and managing the psychological effects of violence, likely because educated women have greater access to economic opportunities and social support.

Results regarding age and family type were mixed. Both proved significant in the chi-square test: $\chi^2(8) = 24.546$, $p = .002$ and $\chi^2(4) = 18.279$, $p = .001$, respectively; however, the Gamma value was not significant for either (Age: Gamma = 0.273, $p = .138$; Family type: Gamma = -0.300, $p = .160$). This implies that while the overall association was significant, there was no clear ordinal trend. Perceived psychological effects did not simply increase or decrease linearly with age or family type; rather, the effects varied across different groups. For instance, these effects were more pronounced among women in their late twenties and thirties and those belonging to nuclear families, yet this pattern was not uniform across all categories. These findings align with research by Al Musawi, (2025) who noted that family and social structures influence women's experiences of violence and the reporting

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thereof in ways that are not always linear or consistent.

Area of residence was not significantly associated with perceived psychological impact when taken as low, medium and high categories, $\chi^2(2) = 4.259$, $p = .119$, Gamma = -0.346, $p = .150$. This result should be seen together with the idea given by Gulesci et al., (2026) that rural women face more structural risk of domestic violence, even if the perceived psychological impact does not differ much from urban women. It may also be due to low statistical power when a continuous score is divided into three broad categories. This difference between analysis methods is discussed further in the Limitations.Marital status was also not significant on either test, $\chi^2(6) = 11.302$, $p = .080$, Gamma = -0.361, $p = .237$. This suggests that in this sample where most women were married, perceived psychological impact was more linked to economic and social position than to marital status itself. However, the number of unmarried, divorced and separated women was very small. So a larger and more balanced sample is needed before this finding can be considered final.

Limitations

This study has certain limitations. First, it employs a 'cross-sectional design,' which reflects perceptions at a single point in time; consequently, it cannot establish a 'cause-and-effect' relationship between demographic factors and psychological impacts. Second, the sample was drawn from only one district—Chiniot—so the findings may not be applicable to other districts in Punjab or Pakistan where social and cultural backgrounds differ..Third, some demographic sub-groups had very small numbers. For example, widowed, divorced and separated women and women in the highest income and extended family groups had less than 10 cases. This limits the reliability of comparisons for these groups. For chi-square analysis, up to 75.0% of expected frequencies were less than 5 for marital status and up to 33.3% for income and family type. Therefore these chi-square results should be interpreted with care.Fourth, the composite psychological impact score was divided into low, medium and high tertiles for chi-square and Gamma analysis. This grouping loses some information compared to using continuous scores. This may explain why area of residence was significant in continuous score analysis but not significant here as a three-category outcome. So the tertile-based results should be seen as an addition to, and not a replacement of, continuous score analysis.Fifth, Gamma assumes an ordinal relationship between variables. This is reasonable for education, income and age, but less clear for marital status and family type where order of categories is not obvious. Gamma results for these variables should be read with this limitation in mind.Sixth, the measure of psychological impact was based on self-reported perceptions and not on clinical diagnostic tools. It may be affected by social desirability or recall bias.Finally, the composite score used for analysis was developed by the original research team. Its items are given in Table 2 for transparency. A new composite score was not created for analysis in order to stay true to the original data.

Ethical Considerations

Before data collection, verbal informed consent was taken from all adult respondents. The purpose of the study, its voluntary nature and confidentiality were explained to them in their local language. As literacy level was generally low in the study area, written consent was not used. Instead, verbal consent was taken and noted by the interviewer before each interview started. Data collection and the consent process were done under the supervision of the Department of Rural Sociology, University of Agriculture, Faisalabad, as part of the first author's M.Phil degree.

Conclusions

This study examined demographic factors related to perceived psychological impact of domestic violence among 120 women in District Chiniot. Cross-tabulation with chi-square and Gamma tests was used to keep the analysis consistent with other parts of this

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research. Overall, women perceived domestic violence as highly damaging to their psychological health, with anxiety, fear and depression reported as the most common effects. When perceived impact was divided into low, medium and high groups, it was significantly associated with employment status, household income and education on both tests. Age and family type were significant on chi-square only, while marital status and area of residence were not significant on either test. Homemakers, as well as women with low incomes and low levels of education, were more likely to report severe effects of this issue. This indicates that economic dependence and limited education exacerbate the psychological impact of domestic violence. These findings suggest that measures to address domestic violence in Chiniot should not be uniform for all women; instead, they should focus on the specific needs of the most vulnerable groups.

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