



# Karolinska Institutet

From the The Division of Global Health (IHCAR), Department Of Public Health Sciences  
Karolinska Institutet

## **Living with violence in the home:**

### **Exposure and experiences among married women, residing in urban Karachi, Pakistan**

#### ACADEMIC THESIS

The public defence for the degree of Doctor OF Philosophy at Karolinska Institutet, SE – 171 77 Stockholm,  
Sweden

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At Rockefeller lecture hall, Nobels väg 11

Tazeen Saeed Ali

#### **Main Supervisor**

Gunilla Krantz MD, PhD  
Professor  
Dept of Community Medicine and Public Health  
The Sahlgrenska Academy at University of Gothenburg,  
Göteborg, Sweden

#### **Co-supervisors**

Eva Johansson RN, PhD  
Professor  
Dept of Public Health Sciences, Div of Global Health  
(IHCAR), Karolinska Institutet, Stockholm & Nordic  
School of Public Health, Gothenburg Sweden

Ingrid Mogren MD, PhD  
Associate Professor  
Dept.of Clinical Science Obs & Gyne  
Umeå University, Umeå, Sweden

Nargis Asad BSc- Psychology, PhD  
Associate Professor  
Dept of Psychiatry  
Aga Khan University, Karachi, Pakistan

#### **Opponent**

Berit Schei, PhD  
Professor  
University of Bergen,  
Bergen, Norway

#### **Examination Board**

Peter Allebeck PhD  
Professor  
Karolinska Institute,  
Stockholm  
Sweden

Katarina Hjelm PhD  
Professor  
Linné University  
Växjö, Sweden

Bitte Modin PhD  
Associate Professor  
Stockholm University and Karolinska Institute  
Stockholm, Sweden

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## **ABSTRACT**

**AIM:** A study was conducted in urban Karachi, Pakistan to investigate prevalence, frequency, risk factors, and mental health effects of husbands' violence against their wife. It also explores current gender roles in urban Karachi, Pakistan, how these are reproduced and maintained, and their influence on life circumstances for both men and women. Further, it explores the women's perceptions of situations which create conflicts and potentially lead to different forms of violence and the immediate consequences of violence exposure.

**METHOD:** The research collected quantitative and qualitative data. The quantitative part used a questionnaire developed by the World Health Organization (WHO) for violence research for data collection among 759 married women living in lower and middle income areas of Karachi city. For the qualitative part, five focus group discussions were carried through, in which 28 women were included, representing employed, unemployed, educated and uneducated women from different socioeconomic strata. Analysis of the focus group discussions was conducted by applying manifest and latent content analyses.

**FINDINGS:** The quantitative studies indicate that violence against women is a common phenomenon within family life among low and middle income groups in Karachi, whether it is exercised as physical, sexual or psychological violence. Further, overlapping between the different forms of violence was huge and most women were exposed to two or all three forms of violence. Risk factors for physical violence related mainly to the husband, his low educational attainment and his being an unskilled worker, as well as there being five or more family members living in one household. For sexual violence, the risk factors were the respondent's low education, low socio-economic status of the family and there being five or more family members living in one household. For psychological violence, the risk factors were the husband's being an unskilled worker and the low socio-economic status of the family. The mental health effects as an outcome of the violence were serious. Suicidal thoughts showed associations with all three forms of violence. Through qualitative studies with manifest and latent content analysis, three major themes emerged: 1) 'Reiteration of gender roles', 2) 'Agents of change' and 3) 'Family violence through the eyes of females'. The first theme included perceptions of traditional gender roles and how these preserve women's subordination. The power gradient, where men given a superior position in relation to women, distinctive features in the culture and the role of the extended family were considered to interact to suppress women. The second theme included agents of change, where the role of education was prominent, as well as the role of mass media. It was further emphasised that the younger generation was more positive to modernisation of gender roles than the elder generation. The third theme describes the circumstances that provoke and sustain violence, situations evoking suicidal thoughts and actions, and how violence can be avoided through women's awareness and actions.

**CONCLUSION:** This study reveals serious gender inequalities and human rights violations against women within marriage, in her extended family and within Pakistani society. The unequal gender roles were perceived as static and enforced by structures imbedded in society. The female victims of abuse are trapped in a society where violence, from a partner or other family members, is viewed as acceptable, where divorce is a largely unavailable option for the majority, and where societal support directed at women is sparse. Women routinely face serious restrictions and limitations of autonomy, which contribute to the development of multiple forms of psychological stress and serious mental health problems. However, attainment of higher levels of education, especially for women but also for men, was viewed as an agent towards change. Further, mass media was perceived as having a positive role to play in supporting women's empowerment. Reliable health surveillance system and healthcare services are needed to serve abused women.

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