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A Study of Coping Mechanisms among Women Subjected to Intimate Partner Violence in the Urban Context of Faisalabad

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Abstract

Intimate partner violence (IPV), that remains to be a terrible and widespread issue that damages women mentally as well as physically and encourages violent practices, affects many women worldwide. In Pakistan's urban areas of District Faisalabad, assault by intimate partners poses a serious risk to women's safety and welfare in close relationships. The objective of this qualitative study is to explore the coping techniques that women in this urban context who were victims of violence in intimate relationships have used in order to deal with the trauma they have experienced. It is important to comprehend the coping strategies used by women in the face of IPV for a number of reasons. The metropolitan region of District Faisalabad is the site of this study. Purposive sampling is the sample technique employed in this investigation. Twenty-five women who had experienced domestic abuse were selected by the researcher, who carried out a qualitative investigation. Key informant interviews, focus groups, and in-person interviews are used to gather data. Women who had been in a close relationship for a year or more and were among between the ages of 18 and 40. This research outlines a variety of psychosocial elements linked to coping methods and feminine mistreatment in the city. This research outlines a variety of psychosocial elements linked to coping methods and feminine mistreatment in the city. Generally speaking, the accounts of women who have been exploited show that while violence is common for many reasons (economic, cultural, and societal), some women are skilled at it and are introverted. The stress and hardships that victims of violence face may be greatly reduced by using management strategies include setting priorities, keeping an optimistic outlook, asking for help from non-religious groups and official agencies, and talking to informal networks about problems. Victims of abuse can get rid of these problems by using these general ways to cope and ways that are specific to the social situation.

Keywords: Violent behavior, Physical Abuse, Intimate Partner Violence, Coping Mechanisms, Consciousness, Community Support

Introduction

Intimate partner violence (IPV) remains a prevalent and distressing issue that affects countless women worldwide, causing physical and emotional harm while perpetuating cycles of abuse. Intimate partner violence also called "domestic violence" or "domestic abuse" can be describe as a series of behavior in any association that is used to gain or uphold power and control over an intimate partner. IPV often encompasses a variety of abusive actions. This include threats and instances of physical violence, sexual assault, mental abuse, economic constraints, and other dominating behaviors. Numerous survivors of intimate partner violence assert that physical abuse is not particularly detrimental; rather, it is the incessant psychological maltreatment that inflicts enduring negative consequences (Campbell, 2002). Violence between intimate partners directed at women represents a significant social issue that can lead to detrimental consequences for those affected (Coker 2002).

Prevailing situation of Intimate partner violence

Globally, about one-third (30%) of all women who have been in a marriage have encountered either sexual or physical assault from their partner of intimacy (Devries et al., 2013). Within the African continent, 36 percent of women have been victims of violence at by means of an intimate partner. Due to gender preconceptions that have been around for generations and allow women to be oppressed, this prevalence of domestic violence is higher than the rate of domestic violence that women experience anywhere in the world (McCloskey et al., 2016). Victims of domestic assault and IPV in Malaysia often face mental health challenges and may resort to various negative behaviors, including substance abuse, sex work, and involvement in criminal activities (Mardiyati, 2015).

A study conducted in South Africa found that 63% of all violent behaviors are perpetrated by spouses, with a significant number of men admitting to such behavior towards women (Rees et al., 2014). An investigation conducted in Karachi in 2007 found that 97.5% of women experienced verbal assault from their partners, while 97.0% faced similar abuse from their family members. Regarding physical abuse, 80.0% of women reported being beaten by their husbands, and 57.5% indicated they experienced physical abuse by their in-laws (Ali and Bustamante-Gavino 2011).

Psychosocial and Physical consequences of Intimate partner violence

The lifelong exposure of women to intimate partner violence (IPV) is linked to several health effects. Systematic reviews of longitudinal data indicate that women who have experienced physical and/or sexual abuse by their partner at any point in their lives are twice as likely to undergo an abortion, twice as likely to experience depression, and in certain regions, 1.5 times more likely to contract HIV compared to women who have not encountered (IPV). Unsurprisingly, because to its significant incidence and detrimental health consequences, lifelong exposure to IPV is projected to impose a substantial disease burden. Intimate partner violence is the second most prevalent risk factor for disability-adjusted life years worldwide among women aged 20 to 24 years (Mokdad et al., 2016). The most common mental health consequences of intimate partner violence for female victims include depression, anxiety, posttraumatic stress disorder (PTSD), and substance use (Golding 1999; Hegarty 2004; Rees 2011). Additionally, women frequently experience low self-esteem and feelings of hopelessness (Campbell 2002). Both suicide and attempted suicide are linked to intimate partner violence in countries across different levels of industrialization (Golding 1999). Women who have experienced abuse frequently face a range of persistent health issues, such as ongoing pain and symptoms related to the central nervous system (Campbell 2002).

Women suffered from the violent behavior reported the cardiovascular problems, digestive problems, and functional gastrointestinal disorders (Coker 2000). One of the most frequent causes of harm for women is IPV, which also includes oral-maxillofacial trauma that is treated in emergency rooms, dentistry offices, and surgical facilities (Schuler et al., 1996). Intimate partner violence often has detrimental repercussions on the emotional and social health of the whole family, as well as on parenting abilities, educational attainment, and career achievements. Behavioral and emotional issues in children from IPV lead to the early school dropout, youth offending, and early pregnancy (Anda et al., 2001).

Literature Review

Intimate partner violence

Taft et al. (2007) said that different types of violence against women that happen in the home include assaults, sexual misconduct of women in domestic settings, aggression related to dowries, marriage rape, and female genital cutting. A society based on greed only encourages horrible crimes, domestic abuse, and attacks on women. Ahmad's (2016) research shows that more than a third of women in rural Uttar Pradesh have been abused or violent in some way. For example, some of their husbands have beaten them or sexually abused them at home. The poll also found that almost 40% of women have been physically abused while they were pregnant. During pregnancy, things can go wrong, and this violence can make things worse. It can also make it hard to get proper care after giving birth. According to the study, 37% of women had been a victim of gender-based violence in the past year. Of these women, 31% had been emotionally abused, 28% had been physically abused, and 6% had been sexually abused. Ahmadi, (2017) said that socio-demographic factors also seem to influence the prevalence of IPV. Global research suggests that women are at greater risk of IPV due to their lower education. This low level of education may be related to the existing socioeconomic disadvantage, the culturally persistent belief that women do not need education because their job is to stay at home and care for the home, including raising offspring, and the lack of education.

Nasseh (2012) noted that domestic violence in developed countries is less common in middle- or higher-educated families, and more common among poorer women. It is said that the higher education of both spouses is a protective factor against violence. It appears that the man's increased education level causes him to conduct more compassionately toward his partner and less violently towards her. This may be attributed to his increased awareness of the social and familial responsibilities that men have. Violence is also closely associated with the degree of education of women. Findings from several studies suggest that higher education, better socioeconomic status, and formal marriages are factors that reduce domestic violence against women, while alcohol use, younger age, lower social support, and premarital and extramarital relationships further contribute to domestic violence. The correlation between domestic violence and poor economic position and past experiences of depression in women. Additionally, she finds that domestic violence is negatively connected to the educational and job level of the husband, marital satisfaction, and social support system. The negative consequences and damages of domestic violence are more severe in civilizations that put social limitations on women and create unfavorable socio-economic circumstances for them. This is because these societies do not enable women to regulate the harms that they are subjected to. There is a greater incidence of domestic violence against women in certain developing nations, such as Pakistan, and there is also gender discrimination in sectors such as education, health, and employment.

Copping strategies

Folkman (2011) pointed out that Problem-oriented, emotion-oriented, and problem evaluationoriented are the three broad categories used to describe coping mechanisms for IPV. The first type of strategy is used to describe efforts made to reduce or get rid of stressors through finding solutions. Relationships typically benefit more from this activity. The second type involves making an effort to control ones emotions in a certain circumstance, but it has worse outcomes. The third approach priorities changing the initial evaluation of the circumstance, which leads to re-evaluate the problem. Obayemi (2020) reveals that the foremost common kinds of cope are non-secular or religious cope, resisting the wrongdoer, phantasy, attempting to become a lot of freelance, maintaining relationships with others, reprimand others, and effort the wrongdoer. Less common responses were misuse, disapproval, legal support, and looking for formal Assistance (police, remedial, human resources support, or counselors). Respondents during the study additionally felt that the foremost usually used cope measures were a lot of useful than the less usually used. Not like the utility assessments found within the assessments represented, analysis associate degreed specialists agree that seeking facilitate from each formal and informal sources is a reconciling cope strategy. Moreover, aspiration, religiousness, and absurdity seem to be reconciling cope responses. Conversely, misuse is taken into account a mal adjusted response that may result in poor personal health. Alternative maladjusted cope responses embody mental detachment, rejection, and dodging.

Latta & Goodman (2011) found that the majority IPV survivors initial intercommunicates personal header mechanisms like turning away, phantasy, praying, hoping for improvement, or making an attempt to speak to a partner. Because the violence intensifies, survivors usually ask for outside facilitate. Ansara & Hindin, (2010) argued that majority of women believe that family and friends area unit the most points of contact for ladies in abusive relationships. Panaghi et al. (2013) stated that one of the most essential and well-studied components of domestic abuse are coping. In order to deal with abuse, women rely on a number of approaches, which might involve acquiring medication religious faith, quiet and reserved, not responding, leaving the spouse permanently or temporarily, Submission, and appeasing the person who is abusing them.

Research Objectives

- 1. To examine the reasons of violence between intimate partners
- 2. To explore the reasons women choose to leave a relationship following experiences of violence.
- 3. To explore the range of coping strategies employed by women in urban settings following experiences of intimate partner violence.

Significance of the Study

The amount of information that has been released on the incidence of violence towards women in Pakistan, as well as the causes of this violence and the variables that contribute to it, is very limited. In households, both in rural and urban sections of the nation, violence against women is exploding at an alarming rate. Most Pakistani women prefer not to end their violent and unhappy marriages in order to preserve the respect of their families and the stigma associated with divorce (Tahir, 2013). In the urban areas of District Faisalabad, Pakistan, IPV poses a significant challenge to the safety and well-being of women within intimate relationships. This qualitative research aims to investigate the coping methods that women who have suffered intimate partner abuse in this particular metropolitan setting have used in order to deal with the trauma they have endured.

Inclusion Criteria

- Women who are willing to participate and provided verbal agreement.
- Women between the ages of 18 and 40 who had been in an intimate relationship for at least a year.
- Women whose cases are listed with the center for violence against women.

Exclusion Criteria

- Women who were unable to be questioned due to illness.
- Women accompanied by an intimate partner.

Research Methodology

For the purpose of separating social issues from the standpoint of observation, methodological techniques are considered to be vital. Both the establishment of the chain of knowledge and the observational confirmation of the theory are significantly dependent on a technique that will be effective. The study is based on the concept of developing one-of-a-kind instruments, which may also be employed in the process of carrying out the test. The comprehensive strategy is a plan consisting of clear models and structures that serves as the basis for research and as a standard for determining the needs for learning. . (Neuman and Celano, 2001), As a result of the fact that the objective of this study was to "explore coping methods to live in abusive relationships," the universe that was being investigated was the District Faisalabad in the province of Punjab in Pakistan. The urban regions of the Faisalabad District are included in the conduct of this study. For the purpose of doing qualitative study, the researcher selected twenty-five women who have been victims of domestic abuse. Face-to-face interactions are used to gather data. Participants were women who were between the ages of 18 and 40 and had been in a committed relationship for a period of at least one year. The purposeful sampling approach was used in the collection of samples for this investigation. The term "purposeful sampling" refers to a group of nonprobability sampling procedures that enables you to pick units depending on the characteristics that you wish to include in your sample. To put it another way, purposive sampling incorporates the "on purpose" selection of units. Twenty-five women who have been victims of domestic abuse are selected for the qualitative study that is being undertaken by the researcher. Face-to-face interviews, focus group discussions, and interviews with key informants are the methods that are used to gather data collection. Following a study of the relevant literature, an interview guide was prepared in order to conduct interviews. A number of distinct closed-ended questions are included in the interview guide in order to get correct replies from the respondents in a methodical manner. Throughout the questionnaire, English is the language that is used. The case study is a method of doing research that involves the analysis of data and is widely used in the fields of social and life sciences. The primary purpose of a case study is to conduct an in-depth investigation of a particular occurrence. Researcher chose 25 women for who have been faced domestic violence. Thematic analysis used for analyze the data. Thematic analysis is cast-off to understand what participants frequently discuss and how those aspects may be connected. Thematic analysis is applied to sets of texts, such as interviews or transcripts.

Conclusion

The findings of this research provide an overview of a wide range of psychological and social elements that are linked to the mistreatment of women in urban areas, as well as coping techniques. In general, the testimony of women who have been exploited reveal that although if violence is ubiquitous for a number of reasons (economic, cultural, and societal), there are those females who are skilled at it and demonstrate introversion. On the other hand, some people who

are square measure are taking preventative actions against violence and offering help inside their families or communities as an alternative to seeking sanctuary. A considerable reduction in the stress and problems that victims of violence suffer may be achieved by the use of management strategies such as prioritizing activities, keeping a positive mentality, seeking help from non-religious groups and official services, and addressing concerns with informal systems. The victims of violence should be emancipated from these difficulties by applying these generic coping strategies as well as aspects that are particular to the social setting when they are used. The findings of this investigation demonstrate that formal social services are effective in resolving the multiple obstacles that victims face inside their communities.

The primary objective of interventions should be to educate victims about the inherent rights that they possess as persons. This will allow victims to settle disputes in a more effective manner, which will ultimately lead to improvements in social functioning and well-being accomplished via social change. At the individual level, social workers were able to investigate the patterns of behavior that were related with stresses in order to ascertain whether or not the individuals displayed conduct that was particular to their emotions or behavior that was problematic. Through the use of this analysis, social workers are able to concentrate on the emotional and psychological characteristics of the beliefs that they have in order to instigate positive behaviors that discourage victims from reconciling with their partners. This is often possible when social workers adhere to human rights standards and provide victims with the chance to freely address their problems while also providing assistance with action plans via cluster and individual interventions. The victim's engagement is duplicated in the setting of an intervention that takes place during a cluster via the use of shared concerns, experiences, emotional support, goals, and actions. Support from friends and family is essential for women who are coping with intimate partner violence (IPV). Nevertheless, it is possible that older women may continue to face obstacles when it comes to confiding in friends and family members about intimate partner violence (IPV). It might be difficult to diagnose intimate partner violence (IPV) in older women because they are more fragile and experience increasing exhaustion as they age. The development of the capacity to detect symptoms of psychological and emotional intimate partner violence (IPV) among women and the provision of sympathetic assistance may have a transforming influence on the women's sense of self-worth and their overall viewpoint. Not only is it important to provide social and emotional support in person, but it is also important to do so via online platforms. Through active participation in face-to-face social interactions, women are able to transcend the conditions of their immediate environment.

Recommendations

- 1. Enhancing healthcare facilities and educating hospital personnel to recognize instances of domestic violence, alongside establishing support groups and accessible helplines, can facilitate women's ability to seek assistance without fear of repercussions, thereby contributing to the long-term prevention of intimate partner violence (IPV).
- 2. Significant groups and organizations enhance assistance offerings via cross-sectoral collaboration and coordination, while also increasing awareness of these resources by disseminating appropriate details to community members, particularly abused women.
- 3. Community awareness initiatives are essential, with the media positioned to assume a prominent role.
- 4. It is essential to focus on social support networks and gender support seminars.
- 5. Organizational consultative encouragement, advocacy, and mass media are essential for addressing this issue.
- 6. The media may highlight effective coping strategies and inform women on managing the

situation. The coping strategies employed by women represent a relatively underexplored area of research.

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