

Intimate Partner Violence: An Analysis of Socio-cultural Barriers to Women in Accessing Legal Help in District Khairpur Mirs

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Abstract

Intimate Partner Violence (IPV) remains a pervasive issue within the rural landscape of Pakistan, where entrenched socio-cultural norms continue to undermine women's pursuit of legal justice. This study explores the multifaceted barriers that inhibit women's access to legal assistance in District Khairpur Mirs, with a particular focus on the role of societal attitudes, economic dependency, fear of retaliation, and limited legal awareness. Despite the presence of statutory protections, the responsiveness of law enforcement agencies often reflects prevailing cultural biases, thereby discouraging survivors from seeking help. Employing a quantitative research design, data were collected from 450 women through structured questionnaires and interviews. Statistical analyses, including cross-tabulations and Chi-square tests conducted via SPSS Version 25, were used to determine the association between socio-cultural variables and the nature of police responses. The findings reveal a statistically significant relationship between police engagement and cultural constraints, indicating that stigma, financial insecurity, and systemic silence significantly deter reporting. This study underscores the urgent need for culturally informed legal reforms and community-level sensitization to enhance access to justice for women facing IPV in rural Pakistan.

Keywords: Intimate partner violence, police responses, socio-cultural barriers, women & legal help

Introduction

Intimate Partner Violence (IPV) is a widespread global concern that continues to severely impact the physical and psychological well-being of women and their children, both in the short and long term (Sardinha et al., 2022). IPV refers to abusive conduct by a current or former partner,

encompassing physical, sexual, and emotional harm. This includes acts such as physical assault, sexual coercion, and various controlling behaviors aimed at dominating women (World Health Organization [WHO], 2021). Globally, approximately 641 million women and girls have experienced some form of violence at the hands of intimate partners (WHO, 2022). Research indicates that nearly one-third of all women worldwide have endured intimate partner violence at some point in their lives (WHO, 2021). In Asia alone, an estimated 20,000 women were reportedly killed by intimate partners or family members in the year 2017 (UNODC, 2018). The data further reveals that women and girls across all global regions are vulnerable to this form of gender-based violence, with Asia recording one of the highest victim counts, totaling around 18,600 individuals (UNODC, 2021).

IPV is closely linked to a wide range of physical and psychological health consequences. These include physical injuries such as battering, acute trauma, and traumatic brain injuries (TBI), as well as psychological disorders like post-traumatic stress disorder (PTSD). IPV can also lead to unintended pregnancies and chronic health conditions such as persistent headaches, sleep disturbances, pelvic pain, sexual dysfunction, irritable bowel syndrome, anxiety, and depression (Lutgendorf, 2019). Violence against women significantly undermines their physical, mental, sexual, and reproductive well-being and, in certain contexts, may heighten the risk of HIV infection (WHO, 2021). Survivors of IPV often endure long-term psychological distress, including increased susceptibility to depression and anxiety. However, the deeply interconnected and often devastating relationship between gender-based violence and mental health has historically received limited attention (WHO, 2022).

Beyond the individual level, IPV severely hampers women's capacity to participate in social and economic development (Gedikli et al., 2023). Its impacts are far-reaching, destabilizing not only personal and family life but also broader community and societal structures. The economic implications are considerable, encompassing direct costs such as healthcare and legal services, as well as indirect costs like reduced productivity, lost income for survivors and their families, and negative effects on the development of future human capital (Duvvury et al., 2013).

Globally, IPV is one of the grave form of violence against women which impacted the lives of around 641 million girls and women (WHO, 2022). Alarmingly, in 2020 alone, approximately 47,000 women and girls were killed by intimate partners or family members—translating to one death every eleven minutes (UNODC, 2021). In South Asia, the prevalence of lifetime intimate partner violence is approximately 35% higher than the global average (World Bank, 2022). In Pakistan, where patriarchal norms, poverty, illiteracy, and social taboos remain deeply rooted, around 93% of women are reported to have experienced sexual violence at least once in their lives (Agha & Nawaz, 2018).

A multitude of interrelated factors contribute to the increasing incidence of IPV globally. In the South Asian context, existing research indicates that complex socio-economic structures, entrenched patriarchal ideologies, and culturally sanctioned gender norms significantly reinforce and sustain such violence (World Bank, 2022). Women often encounter persistent social and cultural obstacles when attempting to access legal solution which consequently compel many women to live in such a terrible relationship. These barriers include fear of reprisal, financial dependence, concerns regarding the welfare of their children, lack of familial or social support, fear of social stigma or losing custody in the event of divorce, and emotional attachment coupled with the hope for change in their partner's behavior (WHO, 2010).

Violence directed at women and girls is deeply embedded in systemic gender discrimination and societal norms that tolerate abuse and perpetuate harmful gender stereotypes. Although Pakistan has committed to the United Nations Sustainable Development Goals (SDGs), which advocate for the eradication of all forms of violence against women and girls, the prevalence of IPV remains alarmingly high. Initiatives led by UNDP, UNFPA, and UN Women have aimed to provide evidence-based policy recommendations and preventive strategies. Nevertheless, the trend of violence continues to escalate. This study seeks to examine the severity and dynamics of intimate partner violence within District Khairpur Mirs, Sindh, Pakistan. The findings underscore the ways in which women endure or adapt to life within violent domestic environments, often negotiating their survival in the face of persistent abuse.

Literature Review

IPV has emerged as a critical public health concern across the globe, demanding urgent intervention and comprehensive policy responses (Ali et al., 2020). According to the World Health Organization (WHO), IPV encompasses any act of physical, emotional, or sexual harm perpetrated by a current or former intimate partner within the context of a relationship (Ahinkorah, 2020). It stands as one of the most widespread forms of violence experienced by women, including during vulnerable periods such as pregnancy (Agarwal et al., 2023). Alarmingly, intimate partners are responsible for nearly 38% of all femicides worldwide. Additionally, 6% of women globally have reported experiencing sexual violence by someone other than a partner (WHO, 2021).

IPV transcends geographic, cultural, socioeconomic, and religious boundaries. However, its prevalence and intensity tend to be higher in low- and middle-income countries, where socio-cultural norms often reinforce patriarchal power structures and normalize violence (Coll et al., 2021). Worldwide, IPV affects an estimated 641 million women and girls, making it the most prevalent form of violence against women (WHO, 2022). Its

psychological toll is immense, frequently leading to mental health issues such as anxiety, depression, and post-traumatic stress. Despite its severity, the relationship between IPV and mental health remains insufficiently explored in policy discourse and healthcare systems (WHO, 2022).

Current data suggest that one in three women globally have suffered from physical or sexual violence, most often at the hands of a current or former male partner. Research also shows that two out of three women either personally know someone or have themselves experienced such abuse (WHO, 2021). In many parts of the world, particularly in Southeast Asia, approximately 33% of partnered women aged 15–49 report having experienced physical or sexual violence from a current or former partner, while 17% report such experiences occurring within the past year (WHO, 2021).

Despite the magnitude of this issue, underreporting remains a persistent challenge. Many women choose not to disclose incidents of sexual or physical abuse due to fear of retaliation, societal rejection, victim-blaming, or social stigma (Sardinha et al., 2022). These barriers continue to silence survivors and perpetuate the cycle of violence.

IPV is recognized as the most prevalent form of violence against women globally. Statistics reveal that approximately 29% of women aged 15 to 49 have experienced physical and/or sexual abuse by a current or former intimate partner at some point in their lives, with significant variation in prevalence across regions and countries (Peterman et al., 2017). In many societies, familial pressure compels women to remain in abusive relationships, often under the guise of preserving family honor or stability. This issue is particularly pronounced in low-income areas and informal settlements, where poverty, limited educational opportunities, and the systemic subordination of women exacerbate the risks of abuse.

Drawing upon power theory, several factors contribute to women's increased vulnerability to IPV. These include low levels of education, economic hardship, alcohol abuse, early sexual experiences, adherence to rigid traditional norms, and deeply entrenched gender roles (Cools & Kotsadam, 2017). Furthermore, additional risk factors specific to younger women involve early sexual initiation, lack of income or financial independence, limited access to personal resources, and substantial age disparities between partners (Onanubi et al., 2017).

The 1993 United Nations Declaration on the Elimination of Violence against Women defines such violence as any act of gender-based harm that results in, or is likely to result in, physical, sexual, or psychological injury to women. This includes threats, coercion, or arbitrary denial of freedom, whether occurring in public or private domains. Women are particularly at risk in conflict and post-conflict environments, where they may face violence within their communities, as displaced individuals, or as refugees in foreign lands (Koning, 2024).

Cultural Norms and Gender Roles

Cultural norms in many societies assign rigid gender roles where men are expected to be dominant and women submissive. These norms are deeply ingrained and passed down through generations, shaping the belief that men have authority over women in both private and public spaces. In such environments, women are socialized to endure abuse and are discouraged from speaking out, as domestic matters are considered private and not to be exposed publicly (Sokoloff & Dupont, 2005). In conservative and rural communities, this cultural belief is even stronger. The idea that a husband is the head of the family discourages women from challenging his actions, even when abusive. Studies confirm that these norms make women internalize the notion that tolerating abuse is part of their marital duty (Jewkes, 2002; Heise, 1998).

Stigma and Fear of Social Shame

In many traditional societies, reporting IPV is seen not as an act of seeking justice but as an act of betrayal. Women who speak out are often blamed for disrupting the family or bringing dishonor. The stigma associated with being a victim of domestic violence or filing legal complaints makes women reluctant to seek help. They fear being labeled as immoral, rebellious, or unfit as wives and mothers (Peters & Wolper, 1995). This is particularly evident in honor-based cultures where a woman's behavior is directly linked to the family's reputation. The fear of being ostracized by relatives and neighbors silences many victims, even in life-threatening situations (Koenig et al., 2006; Gelles, 2007).

Lack of Family and Community Support

Support systems are critical for women facing IPV. Unfortunately, in many cultures, family and community support is minimal or entirely absent. Parents, relatives, and religious leaders often advise women to remain in abusive relationships for the sake of family unity. Some families fear social backlash if a daughter leaves her husband or seeks legal help, so they pressure her to tolerate the abuse (Yount & Carrera, 2006). Community leaders may also discourage women from involving law enforcement, preferring reconciliation over legal action. This collective mentality prioritizes peace and honor over justice and safety (Ali et al., 2011).

Financial Dependence on the Abuser

Economic dependency is a major reason why women do not pursue legal remedies. Many women, especially in low-income and rural settings, are financially reliant on their husbands for basic necessities such as food, shelter, and healthcare. This dependence makes it extremely difficult to consider leaving or reporting an abusive partner (Renzetti, 2009). Even if women want to seek justice, the financial costs of legal proceedings, including lawyer fees, transportation, and time away from unpaid domestic labor, are unaffordable. Women with children often face the added fear of losing custody or not being able to provide for them if they leave the abuser (Kishor & Johnson, 2004; Garcia-Moreno et al., 2005).

Limited Awareness and Education

Educational limitations play a significant role in preventing women from accessing legal support. In many regions, especially in developing countries, women have low literacy levels and minimal knowledge about their legal rights. Many do not know that IPV is illegal or that help is available through police, women's shelters, and NGOs (Kishor & Johnson, 2004). Even when legal information is available, it is often presented in complex legal language that women with little or no formal education find hard to understand. This lack of awareness contributes to a cycle of silence and victimization (Heise & Garcia-Moreno, 2002; WHO, 2013).

Fear of Retaliation and Safety Concerns

The fear of retaliation from the abuser is a powerful deterrent. Many women fear that if they report abuse, the violence will escalate. Abusers often use threats to maintain control, including threats to harm the woman, her children, or her relatives. In areas where law enforcement is weak or corrupt, women feel unprotected, making the risk of seeking legal help greater than the abuse itself (Ellsberg & Heise, 2005). This fear is heightened when the abuser has influence or social standing, leading victims to believe that no one will believe them or that justice will not be served (UN Women, 2011; Bott et al., 2005).

Weak Legal Infrastructure

In many countries, especially those with under-resourced judicial systems, legal institutions are not equipped to handle IPV cases effectively. Police officers may lack training, display insensitivity, or demand bribes before taking action. Victims may face rude behavior, skepticism, or even victim-blaming from legal authorities (UN Women, 2011). Additionally, court procedures can be lengthy, complicated, and expensive. For many women, the process of seeking justice is so discouraging that they prefer to stay silent rather than deal with institutional barriers (Pallitto et al., 2013; CEDAW, 2010).

Traditional Beliefs and Religious Teachings

In some societies, religious or cultural beliefs serve to reinforce the idea that women should endure hardships in marriage. Forgiveness, patience, and obedience are emphasized over justice and safety. These teachings are often interpreted in a way that justifies the woman's suffering and discourages divorce or legal intervention (Naved et al., 2006). Community and religious leaders may actively counsel women against taking legal action, portraying it as sinful or shameful. These deeply rooted beliefs leave women feeling powerless and bound to remain in abusive relationships for the sake of faith, tradition, or social acceptance (Haj-Yahia, 2002; Abu-Ras, 2007).

Methodology

In this research we explored how legal help or responses of police to IPV and the socio-cultural barriers that hinder women from seeking legal assistance in District Khairpur Mirs, Pakistan. A quantitative research design

was adopted to systematically assess the influence of socio-cultural variables such as social stigma, economic dependence, fear of retaliation, and lack of awareness on the willingness of women to report IPV and the corresponding responses from law enforcement agencies.

The research involved 450 women survivors of IPV, selected through convenience sampling to ensure a diverse representation of socio-economic backgrounds within the district. Structured surveys and in-depth interviews were used to gather detailed data on respondents' personal experiences with IPV, the nature of police engagement, and the challenges they encountered in accessing legal support. Additional insights were collected from law enforcement officers and legal professionals, enabling a multi-dimensional understanding of IPV case handling in the region.

Data analysis was performed using SPSS software (Version 25). Cross-tabulation was employed to visually examine the distribution of police responses in relation to various socio-cultural barriers. This technique facilitated the identification of recurring patterns and trends across different demographic and social contexts. Subsequently, the Chi-square test of independence was applied to determine whether a statistically significant association exists between the identified socio-cultural factors and the type of police response received. The Chi-square test assessed the deviation between observed and expected frequencies under the assumption of no association. A p-value less than 0.05 was considered statistically significant, indicating that socio-cultural barriers do indeed influence police behavior in IPV cases. The use of SPSS ensured the reliability and precision of the statistical results.

This methodology aims to generate evidence-based insights into how social and cultural constructs impact women's experiences of IPV and their interaction with the legal system. The findings are expected to contribute to policy development, improve institutional responses, and inform community-based interventions that support survivors and promote equitable access to justice in District Khairpur Mirs.

Figure No 1: Age of the respondents

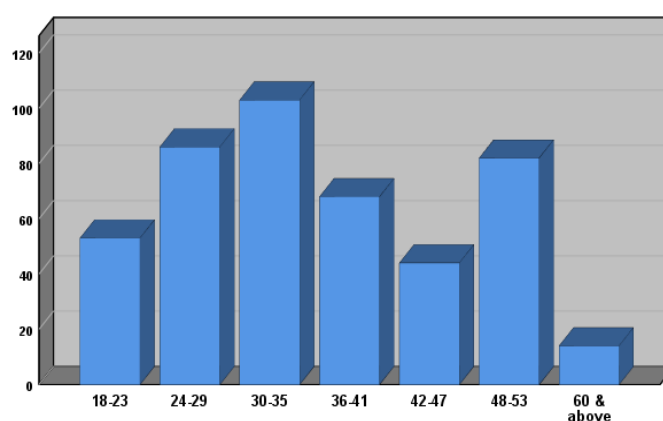


Figure 1 shows the distribution of the respondents' ages, with a significant number of individuals falling within the 30-35 age group (22.9%) and the 24-29 age group (19.1%). The 18-23 age group follows closely with 11.8% of respondents, while those in the 48-53 age group make up 18.2% of the total. Smaller proportions of respondents belong to the 36-41 (15.1%), 42-47 (9.8%), and 60 & above (3.1%) age groups.

Table No. 1

		Cultural norms and values restrict women to report IPV					Total
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
IPV	Strongly disagree	28	14	7	5	12	66
	Disagree	5	21	2	10	9	47
	Neutral	27	16	24	17	14	98
	Agree	2	32	9	37	42	122
	Strongly agree	2	9	38	45	23	117
Total		64	92	80	114	100	450

Table No. 2**Chi-Square Tests**

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	126.044 ^a	16	.002
Likelihood Ratio	149.625	16	.001
Linear-by-Linear Association	51.752	1	.002
N of Valid Cases	450		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 6.48.

Table No.3

		Lack of social support					Total
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
IPV	Strongly disagree	26	8	10	6	16	66
	Disagree	10	18	6	4	9	47
	Neutral	28	11	23	12	24	98
	Agree	10	42	17	31	22	122
	Strongly agree	13	6	18	42	38	117
Total		87	85	74	95	109	450

Table No. 4**Chi-Square Tests**

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	132.377 ^a	16	.001
Likelihood Ratio	138.588	16	.003
Linear-by-Linear Association	54.945	1	.001
N of Valid Cases	450		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 7.94.

Discussions

In the context of IPV, age emerges as a significant variable influencing women's capacity to seek legal assistance, particularly in the face of prevailing socio-cultural barriers. The majority of respondents in this study belonged to the younger age bracket (18–35 years), indicating either a higher prevalence of IPV among younger women or a heightened sensitivity to social pressures that inhibit reporting. Younger women are often more vulnerable to stigma, familial dishonor, and cultural expectations that discourage public disclosure of domestic abuse (Stephens & Eaton, 2020). These barriers may prevent them from approaching law enforcement agencies for help.

Women aged 42 and above may have endured prolonged exposure to entrenched patriarchal norms and may experience greater social isolation (Pathak et al., 2019). This group often internalizes traditional values that normalize IPV or lack sufficient awareness of their legal rights, further diminishing their likelihood of reporting violence. Their study further reveals that older women may feel resigned to their circumstances due to a lifetime of societal reinforcement that frames IPV as a private, familial issue (Pathak et al., 2019).

Therefore, the age of survivors significantly shapes their perceptions of IPV and their interactions with the justice system. Addressing these disparities requires targeted interventions that incorporate age-specific strategies. For younger women, awareness campaigns and peer-based support networks may empower them to recognize abuse and seek help. For older women, community outreach and legal literacy programs are essential in breaking the silence around IPV. Moreover, broader cultural transformation aimed at dismantling stigma and reshaping attitudes toward gender-based violence is critical for improving police responsiveness and enabling women of all ages to access justice (Murvarian et al., 2023).

The data presented in the table number 1 highlights the significant impact of cultural norms and values on women's likelihood to report IPV and access legal help. It is evident that women who experience IPV tend to perceive cultural norms as major barriers to reporting their abuse. For instance, among those who strongly agree or agree that IPV occurs, a considerable number also agree or strongly agree that cultural restrictions prevent them from

seeking help. Green et al. (2024), also found in their study that cultural norms have greater impact on women's lives. This suggests that women facing IPV often feel constrained by traditional beliefs, stigma, and social expectations that discourage them from coming forward. Conversely, women who strongly disagree that cultural norms restrict reporting tend to report lower levels of IPV, indicating a possible correlation between fewer perceived cultural barriers and reduced IPV or greater willingness to report it. The neutral responses, scattered across different IPV experiences, indicate some uncertainty or ambivalence regarding the impact of cultural norms. Overall, the data emphasizes that socio-cultural barriers significantly limit women's access to legal assistance in IPV cases, underscoring the urgent need for interventions that challenge harmful cultural values and promote supportive environments where women feel safe and empowered to report violence and seek justice.

Table 2 presents the results of the Chi-Square test, which evaluates the relationship between IPV and cultural norms and values within the analyzed dataset. The Pearson Chi-Square statistic is reported as 164.685 with 16 degrees of freedom, and the associated two-sided asymptotic significance (p-value) is 0.000. This test examines whether there is a significant association between the categorical variables of IPV occurrence and the cultural norms and values upheld by individuals or communities. Given that the p-value is far below the conventional threshold of 0.05, it provides strong evidence to reject the null hypothesis of no association. This indicates that differences in cultural norms and values correspond to significant variations in the likelihood of experiencing IPV. The notably large Chi-Square value (164.685) further reinforces the conclusion that the observed association is substantial and unlikely to be a product of random variation.

Additionally, the table includes results from the Likelihood Ratio test, which offers an alternative method for assessing the strength of association between IPV and cultural norms. Here, the Likelihood Ratio value is 168.025 with 16 degrees of freedom and a p-value of 0.000. This test corroborates the findings of the Pearson Chi-Square, affirming a statistically significant and robust relationship between the two variables. Such convergence of evidence strengthens the validity of the conclusion that cultural norms and values play a crucial role in shaping the prevalence of IPV.

The analysis also considers the Linear-by-Linear Association test, which assesses whether there is a consistent, linear trend in the relationship between IPV and cultural norms and values. The test statistic for this association is 53.558 with 1 degree of freedom, accompanied by a p-value of 0.000. This indicates a strong linear relationship, suggesting that as cultural norms and values shift progressively in a certain direction, there is a predictable and corresponding increase or decrease in the likelihood of IPV. This linear pattern highlights that the influence of cultural factors on IPV is not only significant but also follows a systematic and directional trend.

Furthermore, the validity of these statistical tests is supported by the distribution of expected counts in the contingency table. Notably, no cells have an expected frequency below 5, which meets the assumption required for the Chi-Square test's reliability. The rule of thumb stipulates that no more than 20% of the cells should have expected counts less than 5 to avoid bias from small sample sizes. The absence of such low counts ensures that the statistical results are robust and credible. The findings from Table 1 clearly demonstrate a strong and statistically significant association between IPV and cultural norms and values. This relationship is confirmed by multiple complementary statistical tests, indicating that cultural contexts significantly influence the prevalence and patterns of IPV in the studied population.

The Chi-Square test results reveal a strong and statistically significant association between IPV and cultural norms and values. This indicates that cultural norms and values considerably influence the occurrence or absence of IPV within communities. Specifically, certain cultural beliefs and values may either contribute to an increased risk of IPV or act as protective factors that reduce its likelihood. Furthermore, these norms shape community perceptions and responses to IPV, potentially affecting whether victims seek help or how IPV is tolerated or condemned. The significant and linear nature of this association underscores the importance of understanding cultural contexts when addressing IPV. Consequently, policymakers, social workers, and advocacy groups could benefit from incorporating culturally sensitive approaches in their efforts. Designing interventions aimed at transforming harmful cultural norms or promoting positive cultural shifts may be critical steps toward preventing IPV in affected communities.

The table 3 highlights a significant relationship between the experience of IPV and the perceived lack of social support, which serves as a crucial social and cultural barrier hindering women's access to legal help. Women who strongly agree or agree that they have experienced IPV are more likely to also report a lack of social support, as seen by the higher numbers in these categories. This lack of social support can manifest in various ways, such as limited encouragement from family and community, fear of social stigma, or absence of networks that could assist victims in navigating the legal system. Such social isolation compounds the challenges women face, making it difficult for them to report abuse or seek legal recourse. The data suggests that without adequate social backing, women are less likely to feel empowered to confront their abusers or engage with law enforcement agencies, which may be perceived as unsympathetic or influenced by the same cultural norms that discourage reporting.

Conversely, women who strongly disagree with experiencing IPV often report stronger social support, indicating that social networks can play a protective role. However, the sizable number of neutral responses points to a complex and nuanced reality where some women may be uncertain about the availability or quality of their support systems. Overall, the findings

emphasize that social support is not merely a personal resource but also a critical cultural factor influencing women's willingness and ability to seek justice. In many communities, cultural norms may discourage women from speaking out, while a lack of social support further isolates them, reinforcing a cycle of silence and impunity. To break this cycle, interventions must focus on strengthening social networks, community support mechanisms, and culturally sensitive outreach programs that empower women to access legal help confidently and safely.

In a related analysis, Table 4 presents the results of Chi-Square tests examining the relationship between IPV and cultural norms and values, based on data derived from cross-tabulation analysis. The Pearson Chi-Square statistic is reported as 126.044 with 16 degrees of freedom, and its two-sided asymptotic significance value is 0.000. This test evaluates the overall association between IPV and the variable measuring social support deficiency. Since the p-value is well below the conventional threshold of 0.05, the results indicate a statistically significant relationship between IPV and a lack of social support. In other words, individuals experiencing IPV are more likely to face inadequate social support networks.

The magnitude of the Chi-Square value (126.044) alongside the extremely low p-value suggests that the observed relationship is unlikely to have occurred by chance. Moreover, the Likelihood Ratio test, which serves as an alternative measure to the Pearson Chi-Square, also yields a p-value of 0.000. This further strengthens the evidence for a significant and robust association between IPV and social support deficiency. Together, these findings highlight the critical role social support plays in the context of IPV, emphasizing the need for interventions that enhance social networks and support systems to mitigate IPV risks.

The Linear-by-Linear Association test yielded a statistic of 51.752 with 1 degree of freedom, accompanied by an asymptotic significance (p-value) of 0.000. This test specifically evaluates whether there is a linear trend or relationship between two ordinal variables in this case, the lack of social support and the occurrence of IPV. The highly significant p-value indicates a strong linear association, meaning that as the level of social support decreases, the likelihood of experiencing IPV increases in a predictable and consistent manner, or conversely, as social support improves, the chances of IPV occurrence tend to decrease. This direct correlation underscores the critical influence social support networks have on IPV dynamics. The study of Ogbe et al (2020) also supports this study that social support is key factor which increase the likelihood of reduction of IPV and also help women to access help or report IPV. Their study also found that social support system can also help to reduce anxiety and is vital for mental health. (Ogbe et al., 2020).

Furthermore, the data satisfy a key assumption required for the validity of the Chi-Square test: none of the cells in the contingency table have expected counts below 5. This is important because Chi-Square tests generally require

that no more than 20% of cells have expected frequencies less than 5 to ensure robust and reliable results. In this case, with 0% of cells falling below this threshold, the test outcomes are statistically sound and not biased by small sample sizes within any category.

Taken together, the Chi-Square test results provide compelling evidence of a statistically significant and meaningful association between IPV and lack of social support. This implies that individuals subjected to IPV are more likely to experience inadequate social support, and this connection follows a clear linear pattern. These findings carry important practical implications: policymakers, social service providers, and community organizations should consider strengthening social support mechanisms as part of comprehensive strategies to reduce IPV. Enhancing social networks, fostering community connections, and creating accessible support services may be key interventions to mitigate IPV risks and improve the well-being of vulnerable populations.

Conclusion

This study provides a comprehensive examination of the profound impact that socio-cultural barriers have on women's ability to access legal assistance and on the responsiveness of the police in cases of IPV within District Khairpur Mirs. The findings reveal that deeply rooted social and cultural norms significantly impede women from reporting incidents of IPV or seeking formal legal recourse. Among the most critical obstacles identified are the pervasive influence of traditional gender roles and expectations, which often dictate women's behavior and discourage them from speaking out. In addition, the lack of social support whether from family, community, or institutional structures further isolates victims, leaving them vulnerable and reluctant to pursue justice. The fear of retaliation, both from the abusive partner and from the wider community, intensifies this reluctance, as women worry about potential social stigma, loss of family honor, or even physical harm should they seek help.

Moreover, the study highlights that these socio-cultural barriers extend their influence beyond the victims themselves, affecting how law enforcement agencies respond to IPV cases. Police officers frequently operate within the same cultural context and may share prevailing attitudes that minimize the seriousness of IPV or view it as a private family matter rather than a criminal offense. As a result, police responses are often inadequate, characterized by delayed action, superficial investigation, or outright dismissal of complaints. Victims who do overcome the barriers to report their abuse may still face institutional neglect or indifference, which can discourage further reporting and perpetuate a cycle of violence and impunity.

The research underscores the critical need for systemic changes to address these intertwined challenges. There is a pressing requirement for gender-sensitive training programs tailored for law enforcement personnel, aimed at

raising awareness of IPV as a serious violation of human rights and equipping officers with the skills necessary to respond effectively and empathetically. Parallel to reforms within the police force, community-wide awareness initiatives are essential to challenge harmful cultural stereotypes and to make men and women to know about the rights of victims. Legal reforms must also be pursued to close gaps in legislation and ensure that laws protecting women from IPV are enforced rigorously and uniformly.

To bring about meaningful progress in combating IPV in District Khairpur Mirs, a coordinated and multifaceted approach is essential. This requires collaboration among law enforcement agencies, policymakers, local leaders, civil society organizations, and the community at large. Together, these stakeholders can work to dismantle the cultural constraints that hinder women's access to justice and create a more enabling environment where victims feel safe, supported, and empowered to seek help. Only by addressing both the socio-cultural and legal dimensions of IPV can effective protection mechanisms be established, paving the way for greater justice and security for women in the district.

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