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Exploring the Impact of Emotional Abuse on Married Women Psychological Problems. A Quantitative Study

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Abstract

This study investigated the impact of partner emotional abuse on the psychological problems of married women. A descriptive comparative research design was employed, and a sample of (N=200) married women was purposively recruited. The sample was divided into two groups: (n= 100) women who had experienced partner psychological abuse and (n =100) women who had not. Two standardized scales, the Emotional Abuse Scale and the General Mental Health Scale, were used for data collection. The results revealed a significant difference in the psychological well-being of women who had experienced partner psychological abuse compared to those who had not. The findings indicated that partner psychological abuse is a significant predictor of mental health problems among women, with implications for the fields of women's psychology, clinical psychology, counseling psychology, community psychology, and health psychology.

Key words: Mental health, depression, anxiety, somatic symptoms and psychological abuse

Introduction

Intimate partner violence has emerged as a significant global public health concern. The World Health Organization reports that women worldwide have encountered various forms of intimate partner violence. This issue has garnered the attention of international organizations, researchers, and governments alike. Notably, 30 percent of women who have been in intimate relationships have experienced some form of violence from a spouse or partner (World Health Organization [WHO], 2013).

Intimate partner violence encompasses behaviors and attitudes within a relationship that inflict psychological, social, and physical harm on one partner. This includes acts of physical aggression, psychological abuse, controlling behaviors, and social coercion (Tanka et al., 2016). While individuals of all genders can be victims of intimate partner violence, women are disproportionately affected (Cui et al., 2013).

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Psychological abuse is one of the most prevalent forms of intimate partner violence (Hayes et al., 2019). According to Follingstand and Dehart (2000), it involves the systematic undermining of an individual's self-esteem and sense of safety, often occurring in relationships characterized by imbalances of power and control. This form of abuse can manifest through humiliation, isolation, threats of harm, abandonment, and other psychological tactics. The National Coalition Against Domestic Violence (2018) reports that 48.4 percent of women in intimate relationships have experienced psychological aggression from their partners. Additionally, four out of ten women have faced some form of coercive control from a romantic partner. On a global scale, 17.9 percent of women have reported experiencing threats of physical harm from an intimate partner (NCADV, 2019). A study by Henning and Kludges (2003) indicates that 95 percent of men who physically abuse their romantic partners also engage in other forms of abuse them emotionally. Women who earn 65 percent or more of their family income will more likely be abuse than women who earn less than that figure (Ties man, Gurkha, Konda, Cobden & Amanda, 2012).

Psychological abuse takes the form of verbal assault control, dominance, and the use of intimate information to degrade a partner (Follingstad, Coyer, & Gambon, 2005). Psychological abuse in intimate partner relationship is aimed or targeted at the psychological and psychological wellbeing of victims and it is most times the precursor of physical abuse (Kara Kurt & Silver, 2013). Psychological abuse can equally be detrimental to the health of a victim as physical abuse (Crozier,2017). Response to psychological abuse and physical abuse is often similar, but psychological abuse can be difficult to detect and even to escape and people who suffer from psychological abuse get little support to leave the partner abusing them as a result of lack of evidence (Crozier, 2017). With lack of evidence, victims of psychological abuse start to normalize their intimate partner behavior therefore creating a circle of which it is difficult to escape their abusers. Psychological abuse has been associated with a member of mental health disorder (Afifi,2007; Heyse, Ellsberg & Gottmoella, 2002).

Existing studies have provided evidence of the correlation between psychological abuse and mental health such as mood swing, depression etc. (Zaidi, Firth, Ekistrian & Naked, 2016, Maun & Fujiwara, 2007). In Nigeria, the institution of marriage is seen as sacred and a great deal of stigmais attached to a divorcee or anyone separated from their marriage. When it comes to domestic violence, there is a powerful social and institutional stigma attach to anyone reporting violence or worst still, leaving her marriage as a result of domestic violence. In local communities, domestic violence in marriages are mostly perceived as the rights of men who want to bring his wife toorder, a woman who disobeys or want to put herself above her husbands (Women for women international, 2017; Odobong,2018).

Available data revealed that up to third of all women in marriages have suffered from one form of abuse in their marriages (demography and Health Survey, 2018; Ojong, Iji & Angioha, 2019; Ukwayi, Angioha & Ojong-Ejoh,2018). The report also maintains that 43 percent of women believe that men are justified in beating their wives

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(DHS,2018). The Lagos state domestic and sexual violence response team in their report maintain that women who report domestic violence only want it to stop and don't want to leave their marriages (Udo bang, 2018). This is because the Nigerian conservative religious and traditional doctrine reinforce patriarchal practices that supports or intimate partner violence has become a major global public health issue.

The National coalition against Domestic violence (2018) argued 48.4 percent of women in an intimate partner relationship have suffered once in such relationship, psychological aggressive behavior by an intimate partner. 4 from every 10 women have experienced in an intimate relationship one form of coercive control from a romantic partner.

The Lagos state domestic and sexual violence response team in their report maintain that women who report domestic violence only want it to stop and don't want to leave their marriages (Udo bang, 2018). Studies have been carried out to examine the correlation between psychological abuse and mental health. Ackers et al. (2013) carried out a review of publish studies on psychological abuse and its correlation with psychosis. A comprehensive search of studies on the topic was conducted on three peer review data bases. Findings from the review of literature revealed that there is a statistical relationship between psychological abuse and psychosis.

Tiwari et al. (2008) examined the impact of psychological abuse committee by an intimate partner of the mental health of pregnant women in Hong Kong. The survey method was used to collect data from 3245 pregnant women who visit antenatal clinic in seven public hospitals in Hong Kong using abuse assessment screen questionnaire. Findings from the analysis of data revealed that psychological abuse has a significant impact on the mental health of women post-delivery.

The terms verbal, emotional, and psychological abuse all imply different types of abuse tactics or strategies. The interchangeable use of these terms in research has created a construct validity problem for researchers and clinicians who are interested in determining the unique effects of psychological abuse on an individual and/or in determining empirically supported interventions for those who have experienced psychological abuse in intimate relationships. The frequent use of these terms as interchangeable within psychological research is not only unclear to consumers of IPV literature, but it reflects the uncertainty among researchers as how to best conceptualize and assess this form of abuse in intimate partner relationships (dehart, Follingstad, & Fields, 2010; Follingstad, 2007; James & Mackinnon, 2010).

Follingstad (2011) suggested that psychologically abusive behaviors should qualify as extreme violations of relationship behavior that surpass psychological aggression and problematic relationship interactions. Harmful intent, frequency of a behavior (or a pattern of behavior), perception of harm, and the severity of an individual act have been proposed as indicators that a relationship interaction has shifted into the realm of psychological abuse (Jordan, Campbell, & Follingstad, 2010).

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Many researchers hypothesize that rates of psychological abuse in romantic relationships may even be greater than rates of physical abuse because psychological abuse can occur on its own (without

the presence of other abusive relationship behaviors), and it almost always occurs in the presence of physical abuse (Henning's & Kludges, 2003).

However, neither the Follingstad and Rogers (2014) nor NISVS (2017) indicated in their samples the rates at which psychological abuse occurred without the presence of other forms of abuse (psychological abuse alone) (Smith et al., 2017). Despite the likelihood of psychological abuse occurring outside of the context of other forms of relationship abuse (e.g., physical and sexual), the prevalence and experiences of individuals who have suffered psychological abuse only by a romantic partner has not been well studied. Therefore, it seems prudent for IPV researchers to understand how common this experience is in romantic partnerships and investigate the potential distinctive mental health impact associated it.

Dutton et al. (2001) showed similar results, in a study of African-American women. They found that when the experience of psychological abuse was controlled, the relationship between physical abuse, sexual abuse, and injury no longer significantly predicted depression (Dutton, Goodman, & Bennett, 2001). Taken in concert, these studies suggest that there may be a connection between the experience of psychological abuse in a romantic partnership and subsequent symptoms of depression beyond the impact of other forms of abuse, such as physical violence.

Literature Review

Aikau et al. (2021) employed a purposive sampling technique to select four communities from the designated wards. Within these communities, the same sampling method was utilized to identify 30 married women from each community. Prior to participation, consent was obtained from the participants, who were thoroughly informed about the study's objectives and the content of the questionnaire. Their confidentiality was guaranteed. The data gathered from the field was analyzed using descriptive statistics, and multiple regression analysis was conducted to explore the relationships between the variables at a significance level of 0.05. Out of the 600 questionnaires distributed, 594 were returned intact and complete, which were then used for the analysis.

Psychological violence is recognized as the most prevalent form of intimate partner violence (IPV). However, research examining the independent impact of psychological violence on mental health remains limited. Additionally, the absence of a clear and consistent definition of psychological violence complicates the comparability of findings. Consequently, this study seeks to enhance understanding of psychological violence by performing a systematic review and random-effects meta-analysis to investigate the relationship between psychological violence and mental health issues, while controlling for other forms of violence (such as physical and sexual) and considering the severity, frequency, and duration of psychological violence.

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The objective of the study is to assess the predictability of common health issues among married women in Sikkim based on marital adjustment, partner abuse, and social support. A sample of 160 married women was selected from the eastern and southern districts of Sikkim. The psychological assessments utilized include the Community Composite Abuse Scale (Loxton et al., 2013), the Revised Dyadic Adjustment Scale (Busby et al., 1995), and the Multidimensional Scale of Perceived Social Support (Zimet et al., 1988) and General Health Questionnaire-12 (GHQ-12: Goldberg, et al, 1997 the experience of psychological abuse predicted increased common mental health problems. Finally, the social support from family and friends significantly predicted better general health or lower levels of common mental health problems, regardless of psychological abuse experienced (Subba, 2022).

Previous research documents increased health problems, somatic complaints, and negative health behaviors among victims of physical and sexual violence. This study extended existing literature by examining the unique effects of partner psychological abuse on physical health and the moderating effects of approach and avoidance coping strategies. Psychological abuse was positively related to illegal drug use, physical and role limitations, negative health perceptions, and cognitive impairment in college women even after controlling for physical victimization. Psychological abuse was not related to sleep hygiene, exercise, problem drinking, or smoking. Approach coping moderated the effects of partner psychological abuse on binge drinking and health perceptions. Low approach coping was associated with more binge drinking and negative health perceptions as abuse increased; high approach coping did not show a significant relationship with binge drinking or health perceptions across levels of abuse. Avoidance coping showed only a trend as a moderator of illegal drugs (Straight et al., 2003).

This research investigates the occurrence of domestic violence, mental health repercussions, and help-seeking behaviors among a diverse group of 155 South Asians who took part in an anonymous survey. The results reveal that 31% of the respondents encountered some type of domestic violence, including physical, emotional, financial, or sexual abuse, with approximately 88% of those abused experiencing psychological abuse. The findings indicate that the individuals who suffered abuse reported mental health issues such as insomnia, frequent episodes of crying, panic attacks, feelings of helplessness and hopelessness, elevated stress levels, uncontrollable anger, and loneliness. These results highlight the necessity for culturally sensitive services that address both domestic violence and mental health issues, which should be made available and accessible to South Asians residing in the United States (Bhandari et al., 2022).

In Nigeria, to fulfill the aims of this study, a cross-sectional research design was employed. Data was gathered from a sample of 600 married women aged 18 and older in Gwagwalada through a self-structured questionnaire. The sample was selected using stratified and purposive sampling techniques. The findings indicated that 93.8% of the participants experienced psychological distress due to psychological abuse from their spouses. Correlational analysis demonstrated a significant relationship between psychological abuse and mental health issues among married women. Consequently, the study concludes that psychological abuse adversely impacts the mental health of married

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women in Gwagwalada, Federal Capital Territory, Nigeria, and calls for enhanced support services for individuals in abusive relationships (Adikwu et al., 2021).

Chen, Qiu, Deng, Tan, and Li (2017) investigated the link between psychological abuse and mental disorders among women in a province of China. Utilizing a web-based survey, the researchers gathered data from 747 married women through a nine-item patient health questionnaire. The findings indicated that 244 women, or 27.2 percent of those surveyed, reported experiencing emotional abuse from their partners. Among these, 141 women were found to suffer from anxiety, while 162 reported varying degrees of depression. Regression analysis demonstrated a significant correlation between psychological abuse and both anxiety and depression. Similarly, Chi, Hahn, and Gammeltoft (2018) explored the effects of psychological violence on the mental health of married women in Hanoi, Vietnam.

In another study, Bhandari et al. (2022) assessed the prevalence of domestic violence, mental health outcomes, and help-seeking behaviors among a diverse group of 155 South Asians who participated in an anonymous survey. The results revealed that 31% of participants had experienced some form of domestic violence, including physical, emotional, financial, or sexual abuse, with approximately 88% of those abused reporting psychological abuse. The findings highlighted that the affected individuals exhibited mental health symptoms such as insomnia, frequent crying, panic attacks, feelings of helplessness and hopelessness, elevated stress levels, uncontrollable anger, and loneliness. The study underscores the necessity for culturally sensitive services that address both domestic violence and mental health issues, ensuring they are accessible to South Asians in the United States.

In Nigeria, this study employed a cross-sectional research design to fulfill its objectives. Data was gathered from a sample of 600 married women aged 18 and older in Gwagwalada through a self-structured questionnaire. The sample was selected using stratified and purposive sampling techniques. The findings indicated that 93.8 percent of the participants experienced psychological distress due to psychological abuse from their spouses. Correlational analysis demonstrated a strong and significant relationship between psychological abuse and mental health issues among married women. Consequently, the study concludes that psychological abuse adversely impacts the mental health of married women in Gwagwalada, Federal Capital Territory, Nigeria. It advocates for enhanced support services for individuals in abusive relationships (Adikwu et al., 2021).

In a related study, Chen, Qiu, Deng, Tan, and Li (2017) investigated the link between psychological abuse and mental disorders among women in a province of China. Utilizing a web-based survey method, data was collected from 747 married women through a nine-item patient health questionnaire. The results revealed that 244 women, or 27.2 percent, reported experiencing emotional abuse from their spouses. Among these, 141 women suffered from anxiety, while 162 experienced varying degrees of depression. Regression analyses indicated a significant correlation between psychological abuse and both anxiety and depression. Additionally, Chi, Hahn, and Gammeltoft (2018) explored

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the effects of psychological violence on the mental health of married women in Hanoi, Vietnam. The objective of the current study was to investigate the predictive influence of psychological abuse on the development of mental health issues among married individuals, as well as its effect on their quality of life. This research employed a quantitative correlational survey design, positing that a significant relationship exists between psychological abuse and the emergence of mental health problems in married individuals, along with its repercussions on their quality of life. A purposive convenient sampling method was utilized to recruit 230 married participants aged between 18 and 40 years from various regions of Karachi, Pakistan. The study utilized the Gottman Psychological Abuse Questionnaire (EAQ), the Mental Health Inventory (MHI-18), and the Quality of Life Scale (QOLS) for assessment. Data analysis was conducted using the Statistical Package for Social Sciences (SPSS version 22), with internal consistency evaluated through Cronbach's alpha. Pearson correlation was employed to analyze the relationships between variables, while the significance of demographic factors was assessed using independent sampling (t-test). The results revealed a significant strong negative correlation between psychological abuse and mental health. The findings underscored notable differences in psychological abuse, mental health issues, and quality of life. The outcomes of this study may contribute to raising awareness about the impact of psychological abuse and the importance of preventing such abuse to sustain healthy relationships (Qasim et al., 2012).

Method

Problem

Exploring the association between emotional abuse and mental health outcomes in married women: A critical analysis

Variables

There are these variables of the current study psychological abuse, general health, familysystem, region.

Operational definitions Psychological abuse

Psychological abuse, often called emotional abuse, is a form of abuse characterized by a person subjecting or exposing another person to a behavior that may result in psychological trauma, including anxiety, chronic depression, or post-traumatic stress disorder. On the base of attaining scores of the partner psychological abuse will determine the level of mental health amongmarriedwomen. (Iwaniec 1977)

General Mental health

Mental health includes our emotional, psychological, and social well-being.it contains four elements such as somatic symptoms, depression, anxiety, social dysfunctioning. It affects how wethink, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. On the base of getting scores of the

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women in mental health scale under influence of partner psychological abuse will determine the level of mental health among women (William Switzer 1983).

Family system

A family system is a household of people who not only live together but also depend on each otherfor basic needs and psychological support and share a common history. Family system will impact the psychological abuse of partner on mental health of the current study population. On the base of attaining scores of women in mental health scale under influence of partner psychological abuse will determine the mental health status family system wise (Madan 1920)

Nuclear family This is composed of a couple raising children together in one household single family will impact the psychological abuse of partner on mental health of the current study population. On the base of attaining scores of the nuclear family system women in mental health scale under influence of partner psychological abuse will determine the mental health status (Merriam Webster 1924)

Joint family system Joint family, family in which members of a unilateral descent group a groupin which descent through either the female or the male line is emphasized live together with their spouses and offspring in one homestead and under the authority of one of the members. Joint family system will impact psychological abuse of partner on mental health of the current study population. On the base of attaining scores of the joint family system women in mental health scaleunder influence of partner psychological abuse will determine the mental health status (Iravati Karvae 1925)

Participants

The populations of 200 psychologically abused and non-abused married women purposefully were recruited from city center Haripur, TIP, KTS, khanpur and Naseem twon. The sample was comprised on (N=200) sample size and partner abused victimized women were (n=100) & non victimized partner abused women were (n=100)

Research method

The current study research utilized survey method for data collection purpose.

Research design

The present study applied research design was descriptive comparative

Instruments

Emotional abuse scale

The Emotional Abuse Scale, created by Neil Jacobson and John Gottman, comprises 28 items. Scoring is as follows: assign 1 point for "never," 2 points for "rarely," 4 points for "occasionally," and 5 points for "very often." Sum these points to determine your total score. A score between 73 and 94 indicates that you are experiencing emotional abuse, while a score exceeding 95 suggests that you are enduring more severe abuse than the average victim of domestic violence (Jacobson & Gottman, 1998).

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The General Health Questionnaire (GHQ) is a self-administered screening tool designed to detect minor psychiatric disorders within community populations. This questionnaire also consists of 28 items and is structured into four subscales, each containing seven items: somatic symptoms (items 1-7), anxiety/insomnia (items 8-14), social dysfunction (items 15-21), and severe depression (items 22-28). It is appropriate for individuals aged 12 and older. The GHQ evaluates the respondent's current mental state and compares it to their usual state, making it effective for identifying short-term psychiatric issues rather than chronic conditions. The focus is primarily on new and distressing experiences (Sterling, 2011).

Procedure

A cross-sectional survey design was employed for data collection in this study. Two standardized scales, the Partner Psychological Abuse Scale (PPAS) and the General Mental Health Scale (GMHS), were utilized to assess the experiences of psychologically abused women and non-victims of psychological abuse. Two standardized scales, the Partner Psychological Abuse Scale (PPAS) and the General Mental Health Scale (GMHS), were utilized to assess the experiences of psychologically abused women and non-victims of psychological abuse. Participants were recruited from residential areas, and a personal-administered survey method was used for data collection. Prior to data collection, informed consent was obtained from each participant, ensuring their voluntary participation and confidentiality. Participants were provided with the questionnaire, and on-site assistance was offered to address any language barriers, comprehension, or understanding issues. Following data collection, participants were thanked for their time, and the data was edited, organized, and managed before being fed into SPSS for statistical analysis. Descriptive statistics and independent t-tests were employed to analyze the data, examining the differences in mental health outcomes between psychologically abused women and non-victims.

Results

Table 1: Comparison of Mental Health Outcomes among Partner Emotionally Abused Women and None Abused Women

		EVW	NPVW			
Var	ables	М	M	SD	t (198)	P
	nolog buse	25.40	14.46	2.731	-13.748	.000
Som	atic symptoms	40.58	25.60	5.116	6.651	.000

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Anxiety	39.33	26.83	6.019	7.141	.000
Social dysfunction	39.83	25.72	1.430	6.895	.000
Depression	39.25	26.20	4.216	6.878	.000

Note: P<.0.1, M= Mean, SD= Standard Deviation, PVW= psychological abused victim women, NPVW= non psychological abused victim women

Table results are illustrating higher level of psychological abuse women mental health was lower non victim of psychological abused women mental health was good then counterpart. In opposite to non-victeraim of psychological abused women mental health was good. Sub domains of the genl mental health somatic symptoms, anxiety, social dysfunction and severe depression were higher among emotionally abused women then counterpart group.

Table 2: Comparison of Mental Health Outcomes among Partner Emotionally Abused Women Across Different Region Wise

	Urban		Rural			
Variables						
	M	SD	M	SD	p	t (198)
Psychologi cal abuse	25.41	1.498	17.32	5.361	.000	12.14
Anxiety	39.60	3.93	29.51	7.69	.000	10.01

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Social dysfunction	40.21	4.38	29.11	6.73	.000	12.16
Somaticsymptoms	41.31	4.60	29.08	7.59	.000	12.035
Depression	38.78	2.73	29.73	7.22	.000	9.83

Note: P<.0001, M= Mean, SD= Standard Deviation

Table is indicating among rural residing women psychological abuseness from partners were lower with statically values than counterpart and mental health was higher. In Sub domains of the generalmental health level somatic symptoms, anxiety, social dysfunction and severe depression were higher among urban resident psychologically abused women then counterpart group.

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Table 3: Comparison of Mental Health Outcomes among Partner Emotionally Abused Women Across Different Family Systems

	Joint family		Nuclear	r family		
	M	SD	M	S	t (198)]
Partner abuse	25.40	1.4 89	16.50	4.966	15.286	. (
Somatic symptoms	41.12	4.6 9	28.11	6.98	14.43	. (
Anxiety	39.55	3.8 5	28.64	7.36	12.01	. (
Social dysfunction	40.00	4.3 6	28.26	6.23	14.44	. (
Severe Depression	38.80	2.6 7	28.86	6.88	12.18	,

Note: P<.0001, M= Mean, SD= Standard Deviation

Table results are illustrating higher level of psychological abuse among joint family residing women then single family living women with mean values than counterpart. In opposite to joint family system living women among single family system women level of partner abuse ness was lower. Sub domains of the general mental health level somatic symptoms, anxiety, social dysfunction and severe depression were higher among joint family system emotionally abused women then counterpart group

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Table 4: Pearson Correlation within Study Variables

Variables	1	2	3	4	5	7
1.Psychological abuse	-					
2.Mental health	.10 5	-				
3. somatic symptoms	.39 9* *	.094	-			
4.Anxiety	.47 9* *	.121 *	.733* *	-		
6.Social dysfunction	- .10 4	- .093	.168* *	.199 **	.076	
Depression	.65 1	087	-078	- .089	- .076	

Note: **. Correlation is significant at the 0.01 level (2-tailed). *. Correlation is significant at the 0.05 level (2-tailed)

Table illustrates that psychological abuse have indirect correlation with mental health.

There was a significant relationship within the study variables.

Table 5: Psychometric Properties within Study Variables

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Measures	M	SD	R Min imu	Max imu	Skew ness	Kurtosis
Davahalagiaa		0	m	m	_	01.659
Psychologica l abuse	2	8	11	49	.0128	-01.658
Tabuse	О	•			.0126	
	•	0				
	7	6				
	7	2				
Mental	8	9	74	186	_	.0945
health	1		/ I		03.3	7 7 10
		6			32	
	2	3			J	
	3	6				
	3	Ü				
Somatic	4	1.4	14	49	-	.045
symptoms	.'	2	•		02.3	
V 1	5	_			23	
	4				_	
	•					
Anxiety	5	2	20	40	-	.0264
					03.3	
		0			43	
	3 8					
		$\frac{3}{3}$				
		Ü				
Social	4	1.7	21	48	-	.0343
dysfunction	•	3			01.23	
	5	O			2	
	4					
	•					
Depression	5	1.7	3	7	-	.0278
	•	6			02.3	
	1				45	_
	6					

Note: M = mean, SD = standard deviation.

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Results of table shows psychometric properties of all the study variables. The values of skewness and kurtosis for all variables are less than 1 which indicates that data was normally distributed and suited for parametric statistical techniques for statistical analysis.

Table 6: Alpha Reliability Coefficients of GHO (28) and EAS (28) (N=200)

Source	n	A	
GHQ28	28	.77	
EAQ28	28	.88	

Note: N = Item no, α = Alpha coefficient

The study variables describes alpha reliability and internal consistency.

Discussion

This research focused on married women to assess the impact of psychological abuse on mental health. The study involved 200 participants, with 100 women identified as victims of psychological abuse by their partners and 100 women who were not victims. Data was collected through a personally administered survey.

Several hypotheses were tested and confirmed by the study's findings. It was posited that psychological abuse serves as a significant predictor of mental health issues, particularly in relation to specific aspects of mental health, including somatic symptoms, social dysfunction, anxiety, and severe depression among women.

The study revealed an inverse relationship between psychological abuse and mental health, indicating that as the level of psychological abuse increases, mental health deteriorates. This decline is attributed to the stress, anxiety, and depression that psychological abuse inflicts on women, which serves as a risk factor for declining mental health. When a woman experiences psychological abuse from her partner, she may begin to overthink her circumstances, leading to heightened sensitivity. This can result in increased self-possessiveness and negativity, ultimately causing various psychological issues. Therefore, psychological abuse from a partner is a significant risk factor for deteriorating mental health among women. Previous research, such as that by Sobia et al. (2018), supports these findings, highlighting the detrimental effects of spousal violence

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and psychological abuse on women's mental health. One hypothesis posited that there is a variation in the impact of psychological abuse by spouses on women's mental health across different regions, considering all subdomains. It was observed that psychological abuse was more prevalent among women in urban areas compared to those in rural settings, while the mental health of women residing in rural areas was found to be superior to that of their urban counterparts. Women who are victims of spousal violence, whether emotional or physical, experience a decline in their mental health quality. Previous research, including a study by Bhandari, has corroborated these findings. The results highlight the necessity for culturally sensitive services that address both domestic violence and mental health issues, particularly for South Asians living in the United States, especially in underdeveloped regions (Bhandari et al., 2022).

Another hypothesis suggested that psychological abuse from partners adversely affects women's mental health, with respect to family systems. This hypothesis was validated by the findings of the current study. In Asian and collectivist cultures, the joint family system has been shown to contribute negatively to psychological abuse, stemming from unsatisfactory marital relationships, family conflicts, and increased familial responsibilities. In such systems, partners often neglect each other, failing to meet each other's psychological and biological needs. Consequently, this neglect leads to conflicts in the spousal relationship, heightening the risk of psychological abuse and deteriorating mental health. Research has demonstrated that family functioning, in the context of family systems, plays a crucial role, with social support from family and friends significantly predicting better overall health and lower levels of common mental health issues, irrespective of the psychological abuse experienced (Subba, 2022).

Recommendations

- 1. The issue of study can be mitigated through awareness initiatives implemented by government agencies, women's empowerment regulatory bodies, and non-governmental organizations across various communities.
- 2. The extensive literature produced by scholars on women's rights, including educational dramas, novels, and books, can effectively address the issues identified in the study.
- 3. Programs aimed at preventing spousal violence can help reduce psychological abuse against women in our society.
- 4. A strong religious connection and a deeper understanding of life challenges, as informed by Islamic teachings, can help diminish verbal abuse between spouses.
- 5. Additionally, future research should aim to assess a broader range of factors related to women's mental health and the risk factors associated with psychological abuse.

Conclusion

The research demonstrates that psychological abuse inflicted by partners has a

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profound negative effect on women's mental health, leading to increased anxiety, depression, and social dysfunction. The results reveal that women in urban areas face higher rates of abuse, whereas their rural counterparts tend to have better mental health outcomes. Furthermore, family dynamics, especially in collectivist societies, play a significant role in shaping the effects of psychological abuse, with joint family arrangements intensifying marital disputes and neglect. These findings highlight the necessity for culturally informed interventions that tackle both psychological abuse and mental health challenges, particularly for at-risk groups.

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