

Risk Factors for Intimate Partner Violence (IPV) During Pregnancy - Review from Pakistan

By

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Abstract

The stimulus to do this research is to identify the factors Intimate Partner Violence (IPV) that influence the pregnancy among woman in Pakistan. IPV during pregnancy is an important risk factor for adverse health outcomes for women and their offspring. However, the prevalence of IPV during pregnancy is not well understood in Pakistan. The study uses a systematic literature review (SLR) technique and in this regard, high-quality journal papers, and journal articles from the databases of Web of Science, JSTOR, Taylor and Francis, Emerald, Elsevier, and Springer are reviewed. Moreover, the study also uses the published books on this topic to identify the role of IPV factors on women during pregnancy in Pakistan. The research utilized the IPV model proposed by the Centers for Disease Control and Prevention. This study also applied patriarchal theory on violence during pregnancy among women in Pakistan. The SLR process yielded a substantial pool of 2219 studies, of which 24 studies were deemed relevant to this research topic. This selection comprises a balanced mix of quantitative and qualitative studies, allowing for a comprehensive examination of the risk factors associated with IPV during pregnancy in Pakistan. Findings from the review of articles indicate that unplanned pregnancy and the number of children is two major outcomes for experiencing IPV during pregnancy among Pakistan woman. The findings from this study will contribute to the existing body of knowledge by identifying the risk factors associated with IPV during pregnancy in the Pakistani context. The results can inform the development of targeted interventions, policies, and programs aimed at reducing the prevalence of IPV during pregnancy and mitigating its adverse health effects on women and their children. Ultimately, this research strives to promote the well-being and safety of pregnant women in Pakistan and empower them to make informed choices about their reproductive health.

Keywords: *Intimate Partner Violence (IPV), Pregnancy, Pakistan, Women*

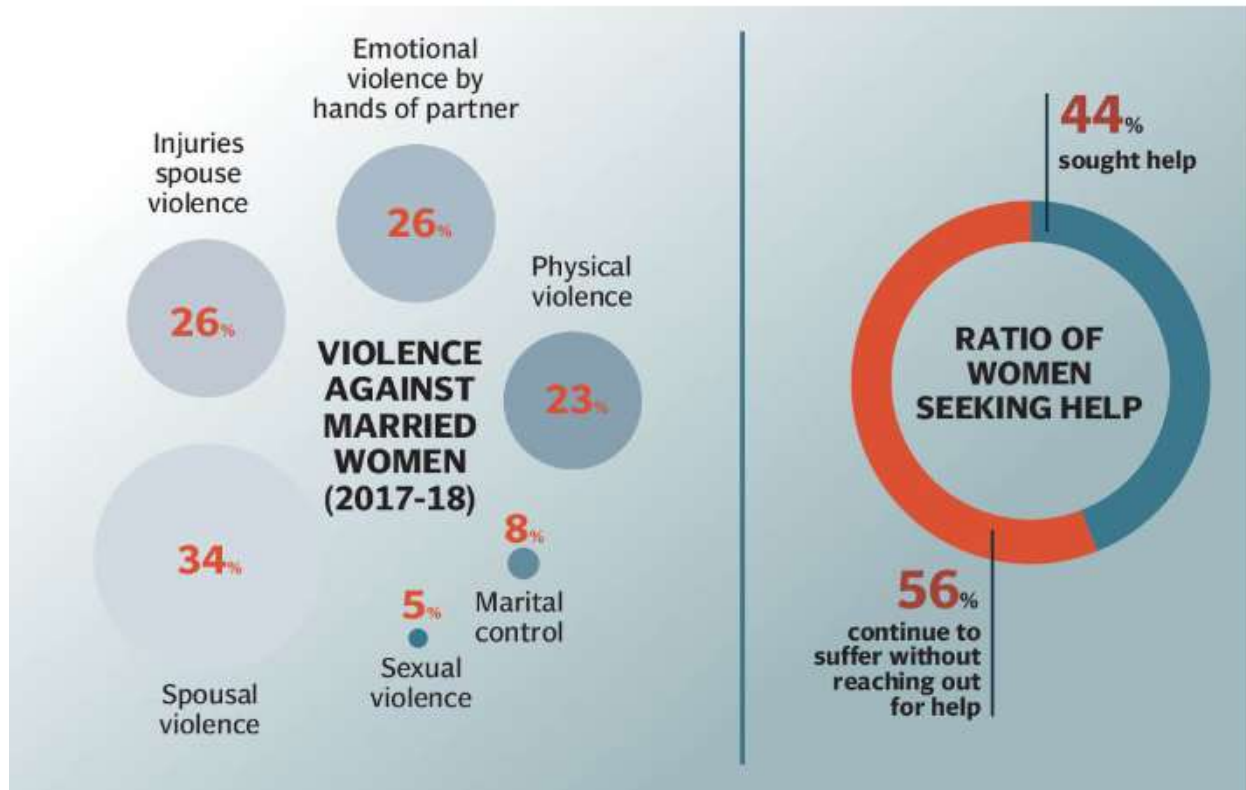
Introduction

Intimate Partner Violence (IPV) during pregnancy is a significant global public health issue, with detrimental effects on the well-being of women and their offspring. It encompasses various forms of physical, sexual, and psychological abuse perpetrated by an intimate partner. According to Wang (2017) the consequences of IPV during pregnancy can extend beyond the immediate harm to the mother, affecting the health and development of the unborn child. Understanding the risk factors associated with IPV during pregnancy is crucial for effective intervention and prevention strategies. This research aims to explore the risk factors for Intimate Partner Violence during pregnancy specifically within the context of Pakistan. Despite the growing recognition of IPV as a critical issue, its prevalence and determinants in Pakistan remain poorly understood. Pakistan, a South Asian country with a complex sociocultural fabric, presents a unique setting for studying the factors contributing to IPV during pregnancy.

Background and Context

Intimate Partner Violence (IPV) during pregnancy poses significant health risks to women and their unborn children. It encompasses physical, sexual, and psychological abuse perpetrated by an intimate partner, and its consequences can be far-reaching (CDC violence prevention, 2023). Adverse outcomes include maternal injuries, poor mental health, complications during pregnancy, low birth weight, preterm birth, and long-term developmental and behavioral problems for the child.

Conroy (2023) stated that while the global burden of IPV during pregnancy is well-documented, its prevalence and associated risk factors in the context of Pakistan remain relatively unknown. Pakistan, located in South Asia, is a country with a diverse sociocultural landscape, influenced by traditional gender roles, patriarchy, and socioeconomic disparities. Such factors can potentially contribute to the perpetration and perpetuation of IPV during pregnancy. According to a report by Humans Right Watch (2022), in Pakistan below statistics indicates that 23% of married women faced physical violence, 26% of married women faced emotional violence by hands of partner, 26% of married women faced injuries source violence and 34% of married women faced spousal violence. However, only 44% women seek help from family and peers, and 56% of married women in Pakistan continue to suffer without reaching out for help.



Source – (Humans Right Watch Pakistan, 2022)

Understanding the specific risk factors for IPV during pregnancy in Pakistan is crucial for effective intervention and prevention strategies tailored to the local context. By investigating the existing literature and conducting a systematic review, this research aims to identify and analyze the factors influencing IPV during pregnancy among women in Pakistan.

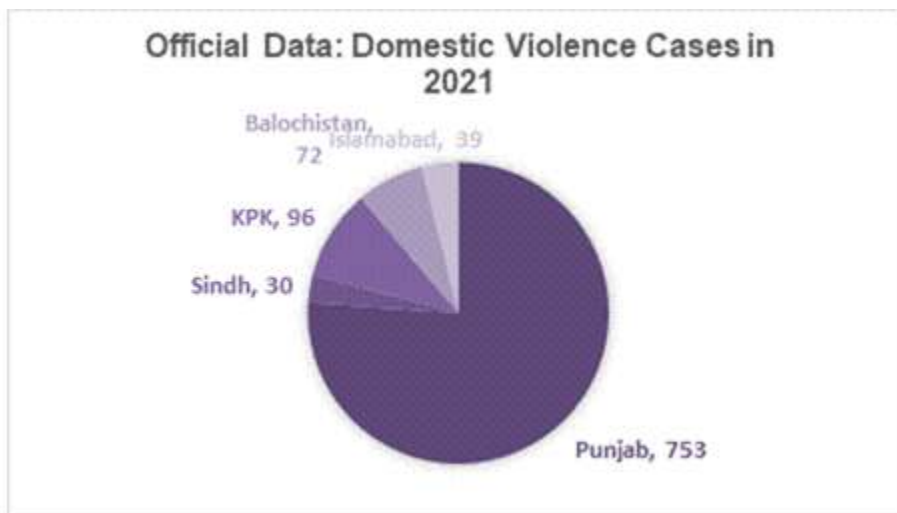
To provide a comprehensive understanding of the topic, the research utilizes the IPV model proposed by the Centers for Disease Control and Prevention (CDC). According to the CDC (2023), there are four major risk factors associated with IPV: Individual Risk Factors, Relationship Factors, Community Factors, and Societal Factors. By examining these domains, the study seeks to uncover the intricate interplay of factors that contribute to IPV during pregnancy in Pakistan.

To highlight the urgency of this research, it is important to consider real statistics and figures related to IPV during pregnancy in Pakistan. While specific data on IPV during pregnancy in the country is limited, available studies indicate a significant prevalence of IPV in general. According to a national survey conducted by Sattar (2022) Pakistan Demographic and Health Survey, approximately 30% of married women in Pakistan reported experiencing some form of spousal violence, including physical, sexual, or emotional abuse. These alarming figures highlight the urgent need to investigate IPV during pregnancy and its impact on the well-being of women and their unborn children.



Source – (Murshid, 2020)

According to a research report by Murshid (2020), 90% of women in Pakistan have experienced some form of domestic violence, at the hands of their husbands or families. These forms include punching, kicking, pushing, threatening, slapping and shouting or yelling. Same report indicates that 50% of women report that violence either increase or does not change when they are pregnant. Similarly, 47% of married women have experienced sexual abuse, particularly domestic rape. On the other hand, only 0.4% of women take their cases to courts.



Source – (Pakistan country policy and information notes, 2023)

Furthermore, another report by (Pakistan country policy and information notes (2023) illustrate statistics in above graph that only in year 2021, there are 753 cases of domestic violence in Punjab, 753 cases of

domestic violence in Punjab, 39 cases of domestic violence in Islamabad, 71 cases of domestic violence in Baluchistan, 96 cases of domestic violence in KPK and 30 cases of domestic violence in Sindh, Pakistan.

Additionally, anecdotal evidence and small-scale studies suggest that the prevalence of IPV during pregnancy in Pakistan might be higher than the overall rates of spousal violence. The unique dynamics and cultural factors surrounding pregnancy can exacerbate the risk of violence within intimate relationships. However, a comprehensive understanding of the specific risk factors associated with IPV during pregnancy in Pakistan is still lacking.

Problem

Intimate Partner Violence (IPV) during pregnancy is a pressing issue with significant implications for the health and well-being of women and their unborn children (Da Thi Tran, 2022). According to Gilliam (2022) while IPV during pregnancy is recognized as a risk factor for adverse outcomes, such as maternal injuries and poor child development, the prevalence and specific risk factors associated with IPV during pregnancy in Pakistan remain poorly understood. This knowledge gap hinders the development of targeted interventions and policies to address this critical public health concern.

The existing research on IPV during pregnancy in Pakistan is limited and fragmented, leaving a practical problem that needs to be addressed. As per Wood et al., (2022) despite anecdotal evidence and small-scale studies suggesting a higher prevalence of IPV during pregnancy compared to overall rates of spousal violence, a comprehensive understanding of the factors contributing to IPV during pregnancy is lacking. The research problem lies in the need to identify and analyze the risk factors associated with IPV during pregnancy among women in Pakistan (Drexler, 2022). By addressing this research gap, this study can gain insight into the specific factors that influence IPV during pregnancy and develop evidence-based strategies to prevent and address this form of violence. As per Liyew (2022) understanding the practical problem within the context of Pakistan is crucial for formulating effective interventions that consider the cultural, social, and structural factors that contribute to IPV during pregnancy.

Therefore, this research aims to conduct a systematic review to identify the risk factors for IPV during pregnancy in Pakistan. By synthesizing existing literature from high-quality journal papers, articles from reputable databases, and relevant published books, the study seeks to provide a comprehensive understanding of the factors contributing to IPV during pregnancy. This research will contribute to the development of targeted interventions and policies that can effectively address IPV during pregnancy and improve the health and well-being of women and their children in Pakistan.

Research questions

Following are research questions:

RQ1 – How Intimate Partner Violence (IPV) influence women during pregnancy in Pakistan?

- RQ1a – How individual risk factor of IPV influence women during pregnancy in Pakistan
- RQ2a – How relational risk factor of IPV influence women during pregnancy in Pakistan
- RQ3a – How community risk factor of IPV influence women during pregnancy in Pakistan
- RQ4a – How societal risk factor of IPV influence women during pregnancy in Pakistan

Significance of the study

This research holds significant importance in addressing the issue of Intimate Partner Violence (IPV) during pregnancy in Pakistan. Understanding the risk factors associated with IPV during pregnancy is crucial for several reasons:

Protection of Women's Health: IPV during pregnancy poses serious threats to the health and well-being of women. By identifying the factors that contribute to IPV during pregnancy, this research can provide

valuable insights for healthcare professionals, policymakers, and support organizations to develop targeted interventions and support systems to protect women's health during this vulnerable period.

Improved Maternal and Child Outcomes: IPV during pregnancy not only affects the well-being of women but also has adverse consequences for their offspring. By uncovering the risk factors associated with IPV during pregnancy, this research can contribute to the development of preventive measures that promote positive maternal and child health outcomes.

Informed Policy Development: Research findings on IPV during pregnancy can inform the formulation and implementation of policies and guidelines aimed at preventing and addressing this issue. The identification of risk factors can guide policymakers in developing comprehensive strategies to reduce the prevalence of IPV during pregnancy, protect victims, and hold perpetrators accountable.

Enhanced Healthcare Practices: Healthcare providers play a crucial role in identifying and addressing IPV during pregnancy. By understanding the risk factors associated with IPV, healthcare professionals can be better equipped to screen for violence, offer appropriate support, and refer women to relevant resources. This research can contribute to the improvement of healthcare practices and the integration of IPV screening and intervention protocols within the healthcare system.

Cultural and Contextual Understanding: Pakistan, with its unique sociocultural context, requires research specific to the local setting. This research aims to fill the knowledge gap regarding IPV during pregnancy in Pakistan and take into account the cultural, social, and structural factors that contribute to this issue. By recognizing the context-specific risk factors, interventions can be tailored to effectively address the problem within the Pakistani cultural framework.

Empowerment and Awareness: By shedding light on the factors associated with IPV during pregnancy, this research can raise awareness about the issue and empower women to recognize and address their experiences of violence. Increased awareness can lead to reduced stigma, improved support systems, and increased reporting of IPV during pregnancy.

Literature review

This section includes substantive literature review on the constructs of IPV, individual risk factors, relational risk factors, community risk factors and societal risk factors. Also, this section meta-analysis of pregnancy among women in Pakistan and domestic violence among pregnant women in Pakistan. The review of literature includes books, journal articles, research papers, conference papers, published reports and research articles.

Several studies by Lin (2023) and Chan (2022) have highlighted the prevalence of IPV during pregnancy globally. A meta-analysis conducted by Yonga (2022) estimated the worldwide prevalence of physical or sexual IPV during pregnancy to be around 13%. However, the prevalence rates vary across countries and settings. In the context of Pakistan, limited research has been conducted on the prevalence of IPV during pregnancy specifically. Available studies suggest a higher prevalence of IPV during pregnancy compared to the overall rates of spousal violence in the country (Flaathen, 2022).

Risk Factors Associated with IPV during Pregnancy:

According to Cao (2023) there are socioeconomic factors such as low socioeconomic status, including poverty, unemployment, and lack of education, has been identified as a risk factor for IPV during pregnancy. In Pakistan, where socioeconomic disparities are prevalent, women from marginalized backgrounds may be at a higher risk of experiencing IPV during pregnancy. A study found that economics and politics also play key role in working relationship of intimate partner violence (IPV) in Pakistan (Ilyas, 2023).

As per Eikemo (2023) previous History of Violence in which women who have experienced IPV before pregnancy are at an increased risk of experiencing violence during pregnancy. The cyclical nature of violence suggests that a history of IPV may persist or escalate during pregnancy. Similarly, as per Raponi (2023) cultural and gender norms such as cultural beliefs and gender norms play a significant role in shaping the dynamics of IPV during pregnancy. Traditional gender roles and patriarchal social structures in Pakistan may contribute to power imbalances and control within intimate relationships, increasing the risk of IPV during pregnancy (Gebrekristos, 2023). Similarly, as per Ilyas (2023), the IPV can be controlled by leadership skills which can resolve such matters. Furthermore, findings of another study indicates that responsible leadership can play a vital role in controlling IPV (Ilyas, 2023).

As per Smith (2023) limited social support networks and weak community response to IPV can exacerbate the vulnerability of pregnant women to violence. Studies have indicated that a lack of social support, both from family and community, is associated with an increased risk of IPV during pregnancy (Utaile, 2023). Understanding the social support networks available to pregnant women in Pakistan and their impact on IPV is an important area for future research.

Unplanned Pregnancy and Reproductive Control: Unplanned or unwanted pregnancies have been identified as potential risk factors for IPV during pregnancy. Some studies suggest that IPV may be used as a means of reproductive control or coercion (Huber-Krum, 2023).

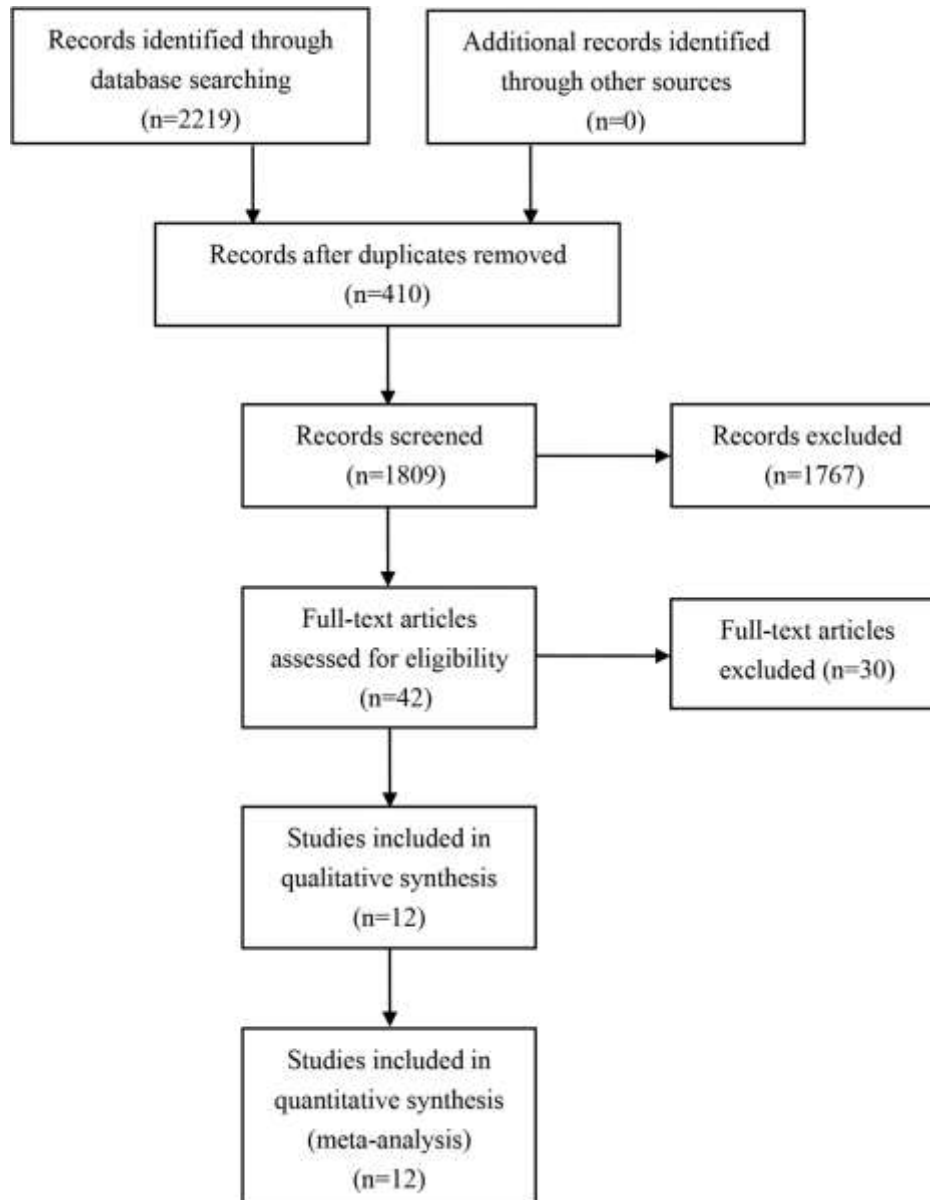
Methodology

This research conducted a systematic literature review (SLR) using a meta-analysis approach to identify and analyze the risk factors associated with Intimate Partner Violence (IPV) during pregnancy in Pakistan. The SLR technique involved a comprehensive search of high-quality journal papers, journal articles from reputable databases, and published books. The databases used for the search included Web of Science, JSTOR, Taylor and Francis, Emerald, Elsevier, and Springer.

The initial search yielded a total of 2,219 records from the databases. Additionally, no additional records were identified through other sources. After removing duplicate records, 410 unique records remained for further screening. These records were assessed based on their relevance to the research topic and inclusion criteria.

The screening process involved reviewing the titles and abstracts of the 1,809 records to identify potentially eligible studies. Based on the inclusion criteria, 1,767 records were excluded as they did not meet the research requirements. Subsequently, 42 full-text articles were assessed for eligibility, considering their relevance to the research topic and data availability.

Out of the 42 full-text articles assessed, 30 were excluded as they did not meet the inclusion criteria or lacked relevant data. Finally, a total of 12 quantitative-based studies and 12 qualitative-based studies were included in the shortlisted studies, resulting in a total of 24 studies.



The selected studies encompass a diverse range of methodologies, providing a comprehensive examination of the risk factors associated with IPV during pregnancy in Pakistan. The quantitative studies employ statistical analyses to investigate the prevalence and associations between various risk factors, while the qualitative studies offer in-depth insights into the experiences and perspectives of women affected by IPV during pregnancy.

The data extracted from the shortlisted studies will be synthesized and analyzed using appropriate statistical methods for the meta-analysis. The findings from this analysis will contribute to a comprehensive understanding of the risk factors associated with IPV during pregnancy in Pakistan, allowing for the identification of patterns, trends, and potential factors that contribute to the occurrence of IPV during pregnancy.

According to Guo (2023) by employing the SLR technique and conducting a meta-analysis, this research aims to provide a robust and evidence-based analysis of the risk factors associated with IPV during pregnancy in Pakistan. The combination of quantitative and qualitative studies will enhance the

understanding of this complex issue and inform the development of targeted interventions, policies, and programs to address and prevent IPV during pregnancy, ultimately promoting the well-being and safety of pregnant women in Pakistan.

Discussion

This section includes key results from received from the meta-analysis and the discussion on these key results. Risk factors for Intimate Partner Violence (IPV) and pregnancy.

According to Centers for Disease Control and Prevention (CDC, 2023) there are four major risk factors which are associated with partner violence (IPV). These factors are Individual Risk Factors, Relationship Factors, Community factors and societal factors.



Source – (CDC violence prevention, 2023)

Individual Risk Factors

Intimate Partner Violence (IPV) is a complex issue influenced by various individual, relationship, community, and societal factors. This literature review focuses on the individual risk factors associated with IPV, specifically low self-esteem, low education, low income, alcohol use, and pregnancy.

Cheung (2023) argued that low self-esteem has been identified as a risk factor for IPV. Individuals with low self-esteem may have a diminished sense of self-worth and a higher likelihood of tolerating abusive behaviors within their intimate relationships (Nishigori, 2020). A study by Richmond (2023) found that women with low self-esteem were more likely to experience IPV, as they may perceive themselves as undeserving of respectful and non-violent relationships.

Low educational attainment is another individual risk factor associated with IPV. Research suggests that individuals with lower levels of education are more vulnerable to experiencing IPV (Testa, 2023). Limited education can limit access to employment opportunities and financial independence, making individuals more dependent on their partners and potentially more susceptible to abusive relationships.

Low income has also been identified as a risk factor for IPV. Financial stress and economic instability can contribute to relationship dynamics that increase the risk of violence (Howard, 2023). The power imbalances arising from economic disparities may exacerbate tensions and contribute to abusive behaviors within intimate partnerships.

Alcohol use is strongly associated with IPV. Alcohol impairs judgment, reduces inhibitions, and increases aggression, all of which can contribute to the escalation of conflicts and violent behaviors (Nwafor, 2023). Alcohol use by either the perpetrator or the victim can significantly increase the likelihood of IPV incidents occurring (Abrahams, 2023).

Pregnancy is a unique period in which the risk of IPV may be heightened. Studies have shown that pregnancy can be a risk factor for experiencing violence within intimate relationships (D'Angelo, 2023). Factors such as changes in dynamics, increased stress, and the potential for increased economic strain during pregnancy may contribute to an elevated risk of IPV. Additionally, pregnancy may trigger feelings of jealousy, possessiveness, and control in the perpetrator, leading to increased violence (Hayes, 2023).

Relationship Factors

Intimate Partner Violence (IPV) during pregnancy is influenced by various relationship factors that contribute to the occurrence and severity of abuse. This section will present a literature review and discussion of the research findings on relationship factors associated with IPV during pregnancy in Pakistan, specifically focusing on the outcomes of unplanned pregnancy and the number of children.

According to Rao (2023) unplanned pregnancy has been identified as a significant risk factor for experiencing IPV during pregnancy among Pakistani women. Several studies have explored the association between unplanned pregnancies and IPV, highlighting the complex interplay between reproductive control, power dynamics, and intimate partner violence. A study by Kozhimannil (2023) found that unplanned pregnancies were associated with a higher likelihood of IPV in Pakistan. Women who reported unplanned pregnancies were more vulnerable to abuse, as partners may use violence to exert control over reproductive decisions and exert power dynamics within the relationship.

According to Muñoz (2023) the number of children has also emerged as a crucial factor contributing to IPV during pregnancy in Pakistan. Research has indicated that an increased number of children can exacerbate stress within a relationship, leading to an elevated risk of violence. A study conducted by Fujiwara (2023) in Pakistan revealed that women with a higher number of children were more likely to experience IPV during pregnancy. The demands of childcare, financial pressures, and limited support systems can contribute to strained relationships and increased violence.

Mayanja (2023) argued that the association between relationship factors and IPV during pregnancy can be understood through a power and control framework. Gender inequities and patriarchal norms prevalent in Pakistani society can perpetuate violence within intimate partnerships. Studies have highlighted the influence of male dominance, control, and the expectation of obedience as significant contributors to IPV during pregnancy (McNeil, 2023). These dynamics can create an environment where women's agency and decision-making power are undermined, leading to increased vulnerability to abuse.

Furthermore, as per Zapata-Calvante (2023) the social and cultural norms surrounding gender roles and expectations in Pakistan can impact the occurrence of IPV during pregnancy. Traditional beliefs and societal attitudes that reinforce male authority and female submissiveness contribute to power imbalances and the perpetuation of violence. A study by Mojahed (2022) emphasized the influence of cultural norms, such as preserving family honor and maintaining silence about marital problems, which hinder women's ability to seek help or disclose experiences of abuse.

The findings from the literature review highlight the complex relationship factors associated with IPV during pregnancy in Pakistan. Unplanned pregnancy and the number of children are significant outcomes that are linked to a higher risk of experiencing violence. These factors are intertwined with broader socio-cultural contexts, patriarchal norms, and power imbalances within relationships.

According to Stubbs (2022) by understanding these relationship factors is crucial for developing effective interventions and policies aimed at preventing and addressing IPV during pregnancy in Pakistan. It is essential to promote gender equality, challenge harmful gender norms, and provide support systems for women experiencing violence. This can include implementing educational programs on reproductive rights, enhancing access to family planning services, and strengthening support networks for pregnant women.

Community Factors

Community factors play a significant role in shaping the risk of Intimate Partner Violence (IPV) during pregnancy (Stiller, 2022). This section provides a literature review and discussion of the research findings on community factors associated with IPV during pregnancy in Pakistan, with a focus on communities with easy access to drugs and alcohol, communities where neighbors don't know or look out for each other, and low community involvement among residents.

As per Biftu (2022) communities with easy access to drugs and alcohol have been identified as a risk factor for IPV during pregnancy in Pakistan. Substance abuse, particularly alcohol consumption, has been consistently linked to increased aggression and violence within intimate relationships. A study by Dehingia (2022) found that alcohol use by the male partner was significantly associated with higher rates of IPV during pregnancy in Pakistan. The availability of drugs and alcohol within the community exacerbates the risk of violence, as substance use can impair judgment, increase aggression, and intensify existing conflicts.

According to Shwartz (2022) the lack of community cohesion, where neighbors don't know or look out for each other, has also been implicated as a risk factor for IPV during pregnancy. Communities characterized by social isolation and weak social networks provide fewer opportunities for social support and intervention. A study conducted by Stamatakis (2022) highlighted that woman residing in neighborhoods with low social capital, defined by weak social ties and limited community support, were more vulnerable to IPV during pregnancy in Pakistan. The absence of community connections and protective networks increases the likelihood of violence going unnoticed and unaddressed.

As per Ankerstjerne (2022) low community involvement among residents has been identified as another community factor contributing to IPV during pregnancy in Pakistan. Limited community engagement and a lack of awareness about the prevalence and consequences of IPV hinder efforts to address the issue effectively. A study by Sayrs (2022) found that communities with lower levels of collective efficacy, defined as shared expectations of social control and action, were associated with higher rates of IPV during pregnancy in Pakistan. Insufficient community involvement and a lack of collective action impede the implementation of community-based interventions and support mechanisms for women experiencing violence.

These community factors operate within the broader sociocultural context of Pakistan, where gender inequality and traditional norms prevail. Societal attitudes that condone or normalize violence against women further contribute to the impact of community factors on IPV during pregnancy. The interplay between community factors, sociocultural norms, and individual characteristics creates a complex web of influences on the occurrence and severity of IPV during pregnancy in Pakistan.

Societal Factors

As per Yaya (2021) societal factors, including traditional gender norms and gender inequality, as well as weak health, educational, economic, and social policies or laws, have been identified as significant risk factors for Intimate Partner Violence (IPV) during pregnancy in Pakistan. This section provides a literature review and discussion of the research findings on these societal factors and their association with IPV during pregnancy.

According to Islam (2021) traditional gender norms and gender inequality play a central role in shaping the dynamics of IPV during pregnancy in Pakistan. Societal expectations that prescribe specific roles and behaviors for women and men contribute to power imbalances within relationships and perpetuate violence against women. Research by Muldoon (2021) indicated that adherence to traditional gender norms, including the belief that women should stay at home, not enter the workforce, and be submissive, was significantly associated with higher rates of IPV during pregnancy in Pakistan. These norms reinforce patriarchal structures and may justify control and abusive behaviors towards pregnant women.

According to Mthembu (2021) gender inequality, rooted in traditional norms, is a key societal factor contributing to IPV during pregnancy. Women's subordinate status in society, limited decision-making power, and restricted access to resources and opportunities increase their vulnerability to violence. A study conducted by Clare (2021) found that gender inequality, measured through indicators such as women's limited autonomy and economic dependence, was significantly associated with higher rates of IPV during pregnancy in Pakistan. The societal context of unequal power relations between women and men perpetuates violence and inhibits women's ability to protect themselves during pregnancy.

According to Goldstein (2021) weak health, educational, economic, and social policies or laws also contribute to the risk of IPV during pregnancy in Pakistan. Inadequate policies and laws related to women's rights, domestic violence, and gender-based violence create an environment where perpetrators face minimal consequences for their actions. A study by Campbell (2021) highlighted the importance of strong legal frameworks and policies in protecting women from IPV during pregnancy. Weak enforcement of existing laws, limited access to justice, and insufficient resources for support services undermine efforts to prevent and address violence against pregnant women.

As per Jatta (2021) the lack of comprehensive health, educational, and economic policies hinders the support available to women experiencing IPV during pregnancy. Limited access to healthcare services, including prenatal care, counseling, and mental health support, reduces opportunities for early detection and intervention. Educational and economic disparities further contribute to women's vulnerability, as they may lack the resources and support networks necessary to leave abusive relationships. A study by Hower (2021) highlighted the need for comprehensive policies that address the intersecting factors contributing to IPV during pregnancy and promote women's empowerment and well-being.

Conclusion

This research aimed to identify the risk factors associated with Intimate Partner Violence (IPV) during pregnancy among women in Pakistan. IPV during pregnancy poses significant risks to the health and well-being of women and their offspring. However, the prevalence of IPV during pregnancy in Pakistan remains poorly understood. Through a systematic literature review (SLR) process, this study reviewed high-quality journal papers, articles from reputable databases, and relevant books to explore the role of IPV factors on women during pregnancy in Pakistan. The research employed the IPV model proposed by the Centers for Disease Control and Prevention and applied the patriarchal theory to understand violence during pregnancy in the context of Pakistan.

By identifying the risk factors associated with IPV during pregnancy in the Pakistani context, this research contributes to the existing body of knowledge in the field. The results of this study have implications for the development of evidence-based interventions, policies, and programs aimed at reducing the prevalence of IPV during pregnancy and mitigating its adverse health effects on women and their children. The findings emphasize the importance of addressing unplanned pregnancies and providing support for women with multiple children, as these factors significantly increase the risk of experiencing IPV during pregnancy.

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