



# Study of Mental Health, Self Esteem and Domestic Violence in Relation to Type of Family and Tenure of Marriage

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## Abstract

This study presents an overview of the pattern of perceived mental health self-esteem and domestic violence in relation to the type of family and tenure of marriage. Domestic violence is a pervasive societal concern with significant implications on victim's mental health and self-esteem. Yet, the impact of the tenure of marriage and the prevalence and severity of domestic violence remained underexplored. This research seeks to address this gap by studying how the type of family and tenure of marriage influence mental health outcomes and domestic violence. The study examined a sample of 210 participants and explored the pattern of domestic violence and mental health in the context of type of family and tenure of marriage. Results indicated that tenure of marriage significantly influenced the pattern of domestic violence. Participants having long and short duration of marriage expressed varied patterns of domestic violence. Preliminary findings suggest that the duration of marriage indeed plays a pivotal role in the dynamics of domestic violence and its consequences on mental health and self-esteem. Factors such as power dynamics, coping mechanisms, and social support networks evolve over time and significantly influence the outcomes for survivors. Furthermore, the study uncovers complex relationships between mental health outcomes and the presence of domestic violence, highlighting the need for tailored interventions at different stages of marriage.

## INTRODUCTION

### Mental Health

Mental health refers to our emotional, psychological, and social well-being. It affects how we think, feel, and act, and it also influences how we handle stressful situations, make decisions, and connect with others. Mental health is not just the absence of mental illness but also the presence of positive qualities such as resilience, self-esteem, and the ability to cope with life's ups and downs. Mental health is using a full potential, fulfilling and meaningful life. It impacts various aspects of our daily functioning, relationships, productivity and overall well-being.

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Mental health is a multifaceted concept that encompasses various dimensions. These dimensions reflect different aspects of mental well-being and contribute to an individual's overall mental health (Galderisi, Heinz et al. 2015). Mental health follows a variety of dimensions:

### **Emotional Aspect**

It indicates the ability to understand, manage, and express emotions in a healthy manner. It involves having a range of emotions, being able to cope with stress, and having a positive outlook on life.

### **Psychological Aspects**

The psychological aspect encompasses the cognitive and intellectual functioning of individuals. It involves having a sense of purpose, positive self-esteem, a sense of personal growth, and the ability to cope with life's challenges. It includes cognitive abilities such as memory, attention, problem-solving, and decision-making. It also involves maintaining mental clarity and the ability to learn and adapt to new situations.

### **Social Aspects**

The social aspect focuses on the quality of an individual's relationships and their ability to engage in meaningful social interactions. It involves having a support system, maintaining healthy relationships, and feeling connected to others.

### **Behavioral Aspects**

It refers to engaging in positive and healthy behaviors that contribute to mental health. This includes practicing self-care, engaging in regular physical activity, maintaining a balanced lifestyle, and avoiding harmful behaviors.

### **Spiritual Aspects**

Spiritual aspects represent a sense of purpose, meaning, and connection to something greater than oneself. It involves having a set of values and beliefs that guide one's life and provide a sense of inner peace and fulfillment.

### **Environmental Aspects**

The environmental aspect relates to the impact

of the physical and social environment on mental health. It includes factors such as access to resources, safety, socioeconomic conditions, and the presence of supportive communities.

### **Self- Esteem**

Rosenberg (1958) defined self-esteem as "a positive or negative attitude toward a particular object, namely the self." In this, self-esteem is a view of one's self-worth. People with high self-esteem believe that they have high self-worth, but people with low self-esteem are more pessimistic regarding their value. Self-esteem is used to describe a person's overall sense of self-worth or personal value. It may involve a variety of beliefs about the self, such as the appraisal of one's own appearance, beliefs, emotions and behaviors (Barden, 1969). Positive links between healthy self-esteem including happiness, humility, resilience and optimism. Low self-esteem is related to stress, depression, anxiety and eating disorders.

### **Domestic Violence**

Any action that is violent, abusive, or threatening towards their partners or spouse can be classified as domestic violence. Domestic abuse is a serious issue pertaining to women's health and human rights that can have negative impacts on both mental and physical health. Increasing domestic violence against women has been a major concern in both developed and developing nations over the past two decades. This particular conduct affects not only human rights but also economic development. The economy of the country where violence occurs suffers from increased health risks, disability, medical costs, and missed wages.

The World Health Organization (WHO) has defined intimate partner violence as "any behavior within an intimate relationship which causes physical, psychological, or sexual harm to those in the relationship. It includes physical aggression, psychological abuse, forced intercourse, and other forms of sexual coercion, as well as other controlling behaviors."

All forms of domestic abuse have one purpose: To gain and maintain control over the victim. Abusers use many tactics to exert power over their spouse or partner as dominance, humiliation, isolation, threats,

intimidation, denial and blame.

## **Physical Abuse**

Physical abuse involves using force to injure or endanger someone. It includes hitting, slapping, punching, kicking, stomping, strangling, shoving, burning, using weapons, and physical restraint. Studying physical abuse in the research will help understand the physical harm experienced by participants and its impact on their mental health.

## **Sexual Abuse and Marital Rape**

Sexual abuse is any non-consensual sexual activity that a partner is forced to endure. Any situation in which unwanted touching, coercion, assault, and any other sexual activity that is forced or without consent comes under sexual abuse. Even if that person is a spouse or intimate partner with whom consensual sex has occurred, is an act of aggression and violence.

## **Emotional Abuse**

Emotional abuse, or psychological abuse, involves behaviors that harm a person's emotional well-being and self-worth. It includes verbal assaults (insults and constant criticism), manipulation (controlling behavior and isolation), intimidation (threats and destructive behavior), rejection (disregarding the person's feelings and opinions), gaslighting (making the person doubt their reality), economic abuse (controlling finances and employment), and emotional blackmail (using fear and guilt for control).

## **Economic Abuse**

Economic abuse is a form of domestic violence where the abuser controls the victim's financial resources, limiting their independence. It includes restricting access to money, withholding financial information, preventing employment, stealing money or belongings, running up debt in the victim's name, and providing inadequate funds for basic needs. Investigating economic abuse in your study will help you understand its impact on participants' mental health and autonomy.

The connection between Domestic abuse and mental health is typically mutually reinforcing. And

it is linked to certain outcomes related to mental health, like post-traumatic stress disorder (PTSD) and depression, substance misuse, suicidality, and worsening psychotic symptoms signs. The literature contains enough evidence to prove that mental health challenges and domestic violence are inextricably linked.

There have been numerous relevant studies conducted on domestic violence. A look at the studies shows that domestic violence against women is increasing day by day in the local and global context and affects women's psychological and physical health.

Alejo Kavita (2014) examined the long-term physical and mental health effects of domestic violence and explained that men or women suffer from more long-term health problems caused by domestic violence by comparing the currently published statistics on the short- and long-term health effect of domestic violence. The results of the study indicate that although men and women face many of the same health issues, women suffer more long-term health problems caused by domestic violence.

Robetiello Gina (2006) observed that domestic violence is one of the main factors that is responsible for post-traumatic stress disorder (PTSD). Researcher supports that Mental health problems, including depression, alcohol or substance abuse, anxiety, personality disorders, post-traumatic stress disorder, sleeping and eating disorders, social dysfunction, and suicide (Abbot & Williamson, 1999; Gerlock, 1999; McCaw et al., 2007) also occur from domestic violence.

In the light of above the present study was planned to address the following objectives.

## **Objectives of the Study**

- To investigate the pattern of domestic violence, mental health and self-esteem of the married women living in nuclear and extended families.
- To investigate the pattern of domestic violence, mental health and self-esteem of married women in relation to duration (short/ long term) of marriage.
- To examine the pattern of relationships between domestic violence, mental health, and self-esteem.

## Hypothesis

- There would be difference in the perception of pattern of domestic violence, mental health and self-esteem as perceived by married women living in nuclear and extended families.
- There would be differences in the perception of patterns of domestic violence, mental health and self-esteem as perceived by married women having short-term or long tenure of marriage.
- There would be interrelationships between domestic violence, mental health and self-esteem as perceived by married women.

## METHODOLOGY

### Sample

A total number of 210 married women of the age between 30 to 50 years were selected to participate in the study. Equal number of participants (N=105) from extended or nuclear families and having short (less than 10 years) and long (more than 10 years) tenure of marriage took part in this research. The data was obtained from the areas of Madhya Pradesh.

### Design

In the present research, a correlational design was used. However, to analyze the data 2 (extended and nuclear type of family) x 2 (short/long tenure of marriage of the participants) factorial design was used.

### Tools

The following tools were used in the study for data collection.

#### Measure of Domestic Violence

Researcher developed a scale (40 items) to assess the level of domestic violence perceived by women. The scale was developed on the basis of reviews of relevant studies, available scales and informal discussions with the women. The scale measured domestic violence on the basis of physical abuse, sexual abuse, emotional abuse, social deprivation abuse and economic abuse-related dimensions. Respondents were supposed to indicate their per-

ceived level of abuse using a 1 (strong disagreement) to 5 (strong agreement) score. The alpha coefficient of the overall scale was found to be 0.96, which demonstrated a higher level of reliability.

#### Mental Health Inventory

The Mental health inventory used in this study was developed by Jagdish & Srivastava (1995). It assesses the level of mental health in six areas-positive self-evaluation, perception of reality, integration of personality, autonomy, group oriented attitudes, and environmental mastery. Respondents gave their responses from 1 (never) to 4 (always) scores. The alpha coefficient of the overall scale was found to be 0.84.

#### Self-Esteem Scale

The scale (10 items) used to assess the self-esteem of the participants was developed by Rosenberg (1958). The scale measured global self-worth by indicating positive and negative feelings about the self. All items were answered using a 4-point Likert scale format ranging from strongly agree (1) to strongly disagree (4).

#### Procedure

The researcher contacted the participants and obtained their consent to participate in the study. The researcher briefly explained the purpose of the research. Participants were also instructed that their responses would be confidential and would be used for academic purposes only. They were informed to ask their queries if any. After that, participants were given the scales (mental health, self-esteem and domestic violence) with a request to indicate their responses on the items of different scales. Participants took 30 to 45 minutes to give their responses by ticking on the appropriate alternatives. Participation in the research was voluntary. After data collection, responses in the form of scales were collected and participants were given thanks for their participation.

## RESULT

The present study examined the pattern of domestic violence, mental health and self-esteem of married

**Table 1:** Mean and Standard Deviation of the scores indicating domestic violence

Type of family	Tenure of marriage	Mean	Std. deviation
Extended	Short	103.31	29.17
	Long	132.51	26.81
	Total	116.38	31.58
Nuclear	Short	101.14	26.57
	Long	102.14	27.53
	Total	117.35	30.70
Total	Short	102.34	27.92
	Long	131.39	27.10
	Total	116.86	31.07

**Table 3:** Mean and standard deviation of the scores indicating mental health

Type of family	Tenure of marriage	Mean	Std. deviation
Extended	Short	151.29	15.46
	Long	147.85	15.03
	Total	149.75	15.29
Nuclear	Short	151.19	16.29
	Long	147.19	14.09
	Total	148.98	15.17
Total	Short	151.24	15.76
	Long	147.48	14.45
	Total	149.36	15.20

**Table 2:** Summary of analysis of variance on domestic violence

Source	Sum of Squares	df	Mean square	F	Level of significance
Type of family	142.09	1	142.09	.18	.67
Tenure of marriage	43889.01	1	43889.01	56.80	.00**
Type of family * Tenure of marriage	9.596	1	9.60	.012	.91
Error	156077.27	202	772.66		
Total	3069894.00	210			

\*\*  $p < .01$

women in relation to type of family and tenure of marriage and interrelationships between these variables. To achieve this, participants gave their responses on the measures of domestic violence, mental health and self-esteem. The scores were coded and tabulated as per the objectives of the study. Descriptive statistics, analysis of variance, and correlational analysis were used to analyze the data.

## Domestic Violence

The mean and standard deviation of the score indicating the pattern of domestic violence are given in Table 1. A summary of the analysis of variance (ANOVA) is given in Table 2. It is evident from the

result that the effect of type of family on domestic violence was not significant,  $F(1,202) = .18, p > .05$ . Effect of tenure of marriage was significant  $F(1,202) = 56.80, p < .01$ . It reflects that participant having long (more than 10 years) tenure of marriage perceived higher level ( $M=131.90$ ) of domestic violence as compared to the participant ( $M = 102.34$ ) having short (less than 10 years) tenure of marriage. Interaction effect due to a type of family \* tenure of marriage was not Significant.

## Mental Health

The mean and standard deviation of the score indicating the status of mental health is given in Table 3. A summary of the analysis of variance (ANOVA) is given in Table 4. It is evident from the result that the effect of type of family on mental health was not significant,  $F(1,202) = .203, p > .05$ . Effect of tenure of marriage was marginally significant  $F(1,202) = 3.08, p < .10$ . Men scores indicated that participants having short tenure of marriage indicated poor mental health ( $M = 151.248$ ) as compared to participants of long tenure ( $M = 147.486$ ) of marriage. Interaction effect due to type of family \* Tenure of marriage was not Significant.

## Self-esteem

Means and standard deviations of the scores indicating the level of self-esteem is given in Table 5. A summary of the analysis of variance (ANOVA) is given

**Table 4:** Summary of analysis of variance on mental health

Source	Sum of squares	df	Mean square	F	Sig.
Type of family	46.305	1	46.305	.203	.653
Tenure of marriage	703.134	1	703.134	3.087	.080
Type of family * Tenure of Marriage	1.944	1	1.944	.009	.926
Error	46003.071	202	227.738		
Total	4733519.000	210			

**Table 5:** Means and standard deviations of the scores indicating self-esteem

Type of family	Tenure of marriage	Mean	Std. deviation	N
Extended	Short	30.08	2.15	58
	Long	30.25	2.60	47
	Total	30.16	2.35	105
Nuclear	Short	30.10	2.63	47
	Long	29.82	2.87	58
	Total	29.95	2.76	105
Total	Short	30.09	2.36	105
	Long	30.01	2.75	105
	Total	30.05	2.56	210

in Table 6. It is clear from the result that the effect of type of family on self-esteem was not significant,  $F(1,202) = .72, p > .05$ . Effect of Tenure of marriage was not significant  $F(1,202) = .003, p > .01$ . Interaction effect due to type of Family X tenure of marriage, was not significant.

### Relationship Between Domestic Violence, Mental Health and Self-esteem

The result shows Table 7 the pattern of relationships between domestic violence, self-esteem, and mental health. The correlation coefficient between domestic violence and self-esteem is not significant. It partially shows a weak negative correlation, indicating that as experiences of domestic violence increase, self-esteem slightly decreases. The correlation coefficient between domestic violence and mental health was significant and negative ( $r = -0.15$ ).

**Table 6:** Summary of analysis of variance on self esteem

Source	Sum of squares	df	Mean square	F	Sig.
Type of family	4.743	1	4.743	.725	.396
Tenure of marriage	.019	1	.019	.003	.957
Type of family * Tenure of Marriage	3.141	1	3.141	.480	.489
Error	1321.910	202	6.544		
Total	191092.000	210			

**Table 7:** Relationship between domestic violence, mental health and self-esteem

	Self-esteem	Mental health
Domestic violence	-.06	-.15*
Self-esteem		-.04

The pattern of negative correlation suggests that higher levels of domestic violence are associated with poorer mental health. The correlation coefficient between Self-esteem and mental health is not significant ( $r = -0.04$ ). This indicates a very weak negative correlation, suggesting that higher self-esteem is associated with slightly better mental health, but the relationship is extremely weak.

## DISCUSSION

The findings of the study provide several critical insights into the relationship between domestic violence, mental health, self-esteem, and the tenure of marriage among married women. The results of the study address the hypotheses and offer a deeper understanding of the factors influencing these variables.

The first hypothesis, which posited a significant difference in the perception of domestic violence, mental health, and self-esteem between married women living in extended and nuclear families, was not accepted. The study revealed no significant difference between these groups. This suggests that the type of family (whether extended or nuclear) does not substantially contribute to women's perceptions of domestic violence or their mental health and self-esteem.

The second hypothesis, which proposed a significant effect of the tenure of marriage on domestic violence, was accepted. The findings demonstrated that the tenure of marriage plays a crucial role in how domestic violence is perceived and experienced. Women with shorter marital tenures may still be adjusting to the dynamics of married life. They might perceive domestic violence differently due to less exposure and experience within the marriage. These women could be more hopeful or optimistic about change, potentially minimizing the severity or frequency of violence they experience or observe, such as physical abuse (hurting, pushing, slapping) and emotional abuse (husbands using abusive language, ignoring their emotional needs).

On the other hand, women with longer tenures of marriage have had more time to experience and recognize patterns of domestic violence. They might have a deeper understanding and awareness of the issue due to prolonged exposure. Over time, the cumulative effect of domestic violence, including physical abuse, emotional abuse, financial control (husbands taking care of women's accounts and money) and coercion in physical relations (forcing methods they do not like), could lead to heightened sensitivity and a more critical perception of its patterns. Societal and familial pressures might also influence their willingness to acknowledge and report domestic violence differently based on their tenure in the marriage. The study's findings are consistent with broader research on marital duration. Rates of ever-experience of violence are expected to rise with marital duration because a longer marriage provides more opportunities for exposure. However, marital duration can also serve as a proxy for compatibility in a marriage, especially in cultures where divorce is legally and socially accepted. In such cases, the experience of violence, both historical and current, is likely to be negatively associated with marital duration. (Kishore, 2004)

The third hypothesis, which stated that married women who do not face domestic violence perceive better mental health compared to those experiencing domestic violence, was accepted. The empirical evidence from the study supports this hypothesis:

Women not experiencing domestic violence reported better mental health outcomes. They were more likely to agree with positive mental health

statements such as "I feel that this world is a place good enough for passing life," "I am satisfied with most of the aspects of my life," and "I am always ready to fight the problems."

Women experiencing domestic violence showed poorer mental health outcomes, resonating with negative statements such as "I feel that I am losing self-respect," "I am not able to take decisions about my next step," "I feel irritation," "I feel insecure," and "I feel depressed." This aligns with previous research indicating that female victims of intimate partner violence (IPV) suffer from poor mental and physical health (Bonomi et al., 2006; Coker, Smith and et al., 2005).

The study also explored the impact of domestic violence on self-esteem, which varied significantly with the tenure of marriage. Women in short tenures of marriage maintained relatively higher levels of self-esteem, possibly retaining a sense of self-worth and hope for change. They were more likely to agree with statements such as "I take a positive attitude toward myself," "I feel that I have good qualities," and "On the whole, I am satisfied with myself."

Women in long tenure of marriage exhibited significantly lower self-esteem due to continuous emotional and physical abuse, financial dependence, and coercion in intimate relationships. They agreed more with negative statements such as "All in all, I am inclined to feel that I am a failure," "I feel I do not have much to be proud of," and "At times, I think I am no good at all."

The study's findings are consistent with broader research on IPV and its impact on women's health and well-being. Domestic violence against women in India is pervasive, deeply rooted in sociocultural values, and cuts across boundaries of caste, class, religion, and region (Bhatti 1990; Daga 1998; Miller 1999; Mitra 1999; Visaria 1999; Vindhya 2000). The consequences are severe, affecting mental health, self-esteem, and overall quality of life.

Studies using the National Violence Against Women Survey found that among victims of domestic violence, females were more likely to report poor mental and physical health outcomes than males, including depressive symptoms, post-traumatic stress disorder (PTSD) symptoms, substance use, and self-reported chronic physical and mental illness (Coker, Weston, Creson, Justice, & Blakeney, 2006).

Low self-esteem has been linked to numerous adverse outcomes such as violence, school dropout rates, teenage pregnancy, suicide, and low academic achievement (Misetich & Delis-Abrams, 2003).

Now, the theme of this year's World Mental Health Day (as of 2023) is "Mental Health is a universal human right." It means everyone has the right to stay mentally healthy. But now, the women who experienced domestic violence are not able to stay in good mental health. Studies show that Domestic violence can have profound and lasting effects on the mental health of victims. The impact of domestic violence on mental health is complex and multifaceted and can manifest in various ways.

## **CONCLUSION**

### **Tenure of Marriage and Domestic Violence**

The study concludes that the duration of marriage significantly influences the pattern of domestic violence. Participants with long tenure of marriage exhibited a different pattern of domestic violence compared to those with short tenure.

### **Effect on Mental Health and Self-esteem**

The study confirms the negative impact of domestic violence on mental health and self-esteem. Women who experienced domestic violence reported poorer mental health and lower self-esteem compared to those who did not experience abuse.

### **Type of Family**

Interestingly, the type of family (Extended or nuclear) did not show a significant effect on domestic violence, mental health, or self-esteem in this study.

Overall, the study provides valuable insights into the complex relationship between domestic violence, mental health, and self-esteem, highlighting the need for comprehensive approaches to address the issue effectively.

### **Implications**

It is important to understand the consequences of domestic violence. Its effect on mental health can

differ from person to person, and the severity of the impacts is interdependent upon a number of circumstances, including the duration and extent of the abuse, the existence of support networks, and the resilience of the individual. It is necessary that victims seek guidance from professionals, such as counseling and therapy, in order to manage the psychological consequences of domestic violence and initiate the healing process.

The present research will be helpful for women to know about the happenings and their consequences that exist across society. With little attention and precautions, the occurrence of domestic violence and its negative consequences can be minimized.

## **Limitations**

The study's sample size of 210 married women from Madhya Pradesh may limit the generalizability of the findings to other populations or regions. A larger and more diverse sample would provide a more representative picture. The paper suggests that future research should explore additional factors that may influence the relationship between domestic violence, mental health, and self-esteem. It also recommends longitudinal studies to understand the long-term effects of domestic violence on mental health and self-esteem.

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