



Social Isolation and Spousal Violence during COVID-19 Pandemic: Moderating Effects of Social Support

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ABSTRACT

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The incidence of spousal violence exhibited a global rise within the COVID-19 pandemic. The rise in numbers can be ascribed to a variety of factors, including the implementation of lockdown measures and restrictions on social mobility, the heightened stress and dissatisfaction resulting from unfavorable socio-economic conditions, high rates of unemployment, and the mandatory closure of firms. Furthermore, it is worth noting that social isolation had a notable surge within the pandemic, while the implementation of preventive measures concurrently resulted in a decline in social support. Therefore, the current study postulated that there exists a positive correlation between social isolation and spousal violence, and that this association is moderated by social support. To examine these hypotheses, the study employed quantitative research methodologies and gathered data from a sample of 384 women. The participants were selected based on specific inclusion criteria using a purposive sampling strategy. The data was gathered utilizing conventional instruments for measuring social isolation, spousal violence, and perceived social support. Subsequently, the acquired data was subjected to analysis using the Statistical Package for the Social Sciences (SPSS). The findings revealed a significant prevalence of domestic violence and increased social isolation among married individuals in Pakistan amidst the COVID-19 pandemic. Furthermore, there was a positive correlation seen between social isolation and spousal violence, indicating that higher levels of social isolation were associated with increased likelihood of experiencing violence within a marital relationship.

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Introduction

In December 2019, an outbreak of pneumonia-like disease (COVID-19) was reported in the city of Wuhan, China. Shortly, the outbreak got attention from scientists, especially virologists, and it was tested in the labs, confirming it was a viral infection (Ciotti et al., 2020). The viral infection multiplied rapidly, emerging as a serious public health issue in China. Within no time, the infection crossed borders and killed hundreds of people around the world (Pokhrel & Chhetri, 2021). Till 2021, 4.5 million deaths worldwide were reported because of COVID-19 (World Health Organization, 2022). Its massive public health consequences, it was declared a pandemic by the WHO many precautionary measures were taken, such as lockdown, frequent hand washing, keeping sanitizers in pockets, social distancing, wearing face masks, and avoiding mass gatherings, as a preventive measure against the pandemic. A complete lockdown was implemented around the globe, including Pakistan, until August 2020 to avoid the spread of viruses (Fauk et al., 2022; Liao et al., 2021; Katusiime et al., 2022).

Lockdown and social distancing strategies increased social isolation and decreased social support among the masses (Jesus et al., 2021; Leal Filho et al., 2021). People were compelled to quarantine within their homes, and this created many challenges that added to the already existing consequences of the pandemic (Li, Taelhagh, & Tan, 2023). During the course of the pandemic, scholarly studies indicated an increase in the level of intimate partners' violence against women across the globe (Agüero, 2021; Peterman et al., 2020; Sabri et al., 2020; Sánchez et al., 2020; Sardinha et al., 2022), making it one of the most pressing public health issues in the world at that time. Out of every three women, about one woman experienced intimate partner violence (IPV), whether psychological, physical, or sexual, during the pandemic (Pereda & Díaz-Faes, 2020).

The increased level of spousal violence was explained by relating it to many factors, i.e., lockdown and restriction of social mobility (Green, Fernandez, & MacPhai, 2021), stress and frustration of poor socio-economic conditions (Mahlangu et al., 2022), joblessness, forced closure of businesses, etc. (Leslie & Wilson, 2020). However, very few studies explain spousal violence with reference to social isolation and spousal violence. Nonetheless, the consequences of spousal violence were negatively affecting the lives of women while impacting their psychological health, i.e., damaging self-esteem and confidence (Goodman & Epstein, 2020; Kuukinen, 2020). It also affected the physical health of the women, i.e., heart attacks, serious physical injuries, miscarriages, and sexually transmitted diseases such as HIV (Fereidooni et al., 2023).

However, very few studies explain increasing trends of spousal violence while linking it with social isolation resulting from restricted social gathering during the pandemic. During the pandemic, social isolation was generated by the lockdown and social distancing strategies adopted across the globe. Minimized social interaction and decreased connectivity increased social isolation and decreased social support during the pandemic (Goodman & Epstein, 2020). Social connectivity and social support are positively associated with mental health and wellbeing and negatively associated with distress (Cheon, 2023; Fredriksen-Goldsen et al., 2023; Johnson & Winter, 2023). Therefore, the researchers deduce the hypotheses that social isolation (lack of social

connectivity) increases spousal violence (positive association) during the pandemic and that the availability of perceived social support has a moderate relationship between both variables.

2.0 Literature Review

Intimate physical violence is defined as any activity occurring within an intimate connection that causes physical, psychological, and/or sexual harm to people in previous or present relationships (Thackeray et al., 2023). Physical violence, includes kicking, slapping and beating; sexual violence, such as enforced sexual intercourse and other forms of sexual bullying; emotional (psychological) abuse, such as abuse, belittling, constant disgrace, threats (e.g., destroying things), threats of harm, and threats to take away children; and controlling behaviour, such as isolating a person from family and friends (Kettrey et al., 2023). IPV can damage anyone, regardless of gender or intimate connection type. Nonetheless, isolation is a critical notion for understanding IPV in various circumstances, among the numerous characteristics that potentially contribute to and alter the experience of IPV (Gilbert et al., 2023). There are various definitions of social isolation, but for the sake of this study, we define it as a "less contact or regular communication with individuals and institutions that represent standard society". The type and amount of social support are frequently used to assess social isolation. For example, in the instance of IPV, social support from those outside the intimate relationship has been identified as an essential defending factor and moderator of the IPV effect (Su et al., 2023).

The COVID-19 pandemic exposed the bleak realities of social isolation and its troubling link to spousal violence. While it is critical to investigate the moderating effects of social support, it is also critical to investigate the structural flaws that aggravate this problem. The power imbalance within abusive relationships was exacerbated by social isolation caused by lockdowns and distancing techniques. Victims were stuck with their abusers, with no way out and no crucial social interactions (Mojahed et al., 2021). It is certainly important to investigate the moderating function of social support. Victims can find solace in their support networks, which include friends, family, and community services. However, expecting support to solve spousal violence on its own ignores the core problems that are deeply embedded in social institutions. Interventions must go beyond bolstering to address this issue comprehensively (Lanier & Maume, 2009).

Women who have support system like friends or family members appear less socially isolated due to their support were better protected from victimization at the hands of their partner than women who do not have such support systems. Furthermore, social isolation contributes significantly to the structural disturbance of minorities and marginalized populations, as well as the unequal allocation of resources (i.e., social capital), which may directly increase the risk of IPV victimization for individuals who face overlapping social discriminations based on race, gender, class, and so on (Mahapatro et al., 2021). Distance to resources such as neighbors, friends, police stations, hospitals or town can also be used to define geographical isolation. Such distance, which can be observed in rural settings, may also suggest sociocultural and psychological isolation, emphasizing social isolation. As a result, social and geographical isolation may have repercussions for exacerbating the concealed character of IPV and undermining efforts to seek and provide support (Howard et al., 2022).

Literature about this hypothesized relation is invisible, especially from Pakistan, making the study one of its own kind in Pakistan. Hence, the present study is one of its own types to offer empirical evidence related to spousal violence during the pandemic in Pakistan. By explaining all these variables, the study provides the connection between social isolation, spousal violence, and social support. This study is expected to add new insights to the literature on spousal violence during COVID-19 in Pakistan while exploring the prevalence of social isolation, perceived social support, and spousal violence across the demographic characteristics of the respondents (women) during the COVID-19 pandemic.

3.0 Methodology

The research was intended to quantify the variables, find out the prevalence, estimate the relationship between the study variables, and calculates the moderating effect too, which made the quantitative research approach suitable for the present study. In addition, a cross-sectional survey research approach was used in the present study to conduct a survey to those women facing spousal violence during the COVID-19 pandemic. The researcher asked the respondents to respond to a survey once and provide single-time data without making comparisons of spousal violence across several time periods. The study was also conducted to provide a snapshot of the existing level of spousal violence; therefore, a cross-sectional survey research design was found to be the most suitable for the present study.

The present study was conducted in Punjab Province, Pakistan. In addition, there are three regions indicating ethnic differences among the people living in the province. Ethnic differences indicate socio-cultural diversity among these three regions, i.e., Central, South, and North Punjab. Socio-cultural differences, demographic profile, and indigenous characteristics made it a very suitable region to study spousal violence in Pakistani society. Central Punjab is one of the highly industrial and modern regions, while South Punjab is a comparatively less industrial and less modern region, and the majority of the people are linked to farming in one way or another. However, North Punjab indicates a mix of both the characteristics of Central and South Punjab. It means that the scope of the study was limited to Punjab, Pakistan.

In quantitative research, sufficient and representative sample selection is inevitable. To ensure enough sample selection, the researcher selected a sufficient sample size while estimating the total sample size with the help of a sampling formula. The researcher used the Cochran proportional sampling technique, which is useful to select a sufficient sample size when the exact population under study is unknown and widely spread over a geographical location. Therefore, the Cochran proportional sampling method was used at a 50% probability of sampling distribution and while using the standard deviation value of normally distributed data 95% margin of error was decided. The result of the estimation produces a sample size of over 384 respondents. However, for the sake of facilitating generalization, the total sample size was equally divided into three regions. In addition, the women were selected using the non-probability sampling technique while employing the purposive sampling technique, which was useful to select specific respondents from the widely spread population. For specifying respondents, an inclusion criterion was used, i.e., married women from the last five years having at least one child.

A total of three scales were used in the present study to collect data from the respondents. The UCLA loneliness scale developed by Russell et al. (1978) was used to measure social isolation perceived by women during the COVID-19 pandemic. It is a five-point Likert scale, including 17 items. The other scale used to measure spousal violence faced by women during the pandemic was Revised Conflict Tactics Scale developed by Straus et al. (1996) was used. It is a 27-item scale including three dimensions, i.e., psychological violence, physical violence, and sexual violence. On the other hand, the Multidimensional Scale of Perceived Social Support prepared by Zimet et al. (1988) was used, which is a 12-item scale rated on a 7-point Likert scale from very strongly disagree to very strongly agree, including three dimensions, i.e., social support by family, friends, and significant others.

For collecting data from the respondents, the researcher used an online poll survey, in which a link to the tool of data collection was shared with the respondents. First of all, the researcher prepared a Google Form of the scales, and the link to the form was shared with the potential respondents meeting the inclusion criteria. Although the topic under investigation was very sensitive (spousal violence) and the face-to-face mode of data collection was more suitable, it was not possible to conduct face-to-face interviews during the pandemic. The links were shared with potential respondents to the study via WhatsApp and Facebook, and in some cases, the link was shared at the respondents' email addresses after their confirmation to participate in the study. The links were shared in the last quarter of 2020, when the country was facing strict lockdown because of the pandemic. The World Health Organization's (WHO) recommendations regarding the ethical conduct of spousal violence research (2001) were followed in the present study, including respondents' safety, confidentiality, informed consent regarding participation and location of the interviews, and anonymity of the data collected from the respondents.

4.0 Results

Table1 Socio-demographic characteristics n=384

Variables	<i>F</i>	%
Age		
Less than 25 Years	69	18.0
26-33 Years	133	34.6
34-41 Years	134	34.9
42 Years and Above	48	12.5
Wife' education		
Illiterate	152	39.6
Literate	232	60.4
Partner's education		
Illiterate	147	38.3
Literate	237	61.7
Years of marriage		
1-4 Years	40	10.4
5-10 Years	253	65.9
10Years+	91	23.7
Family system		

Joint	242	63.0
Nuclear	142	37.0
Job status		
Employed	145	37.8
Unemployed	239	62.2
Salary use		
Herself	63	16.4
Someone Else	46	12.0
Both of partners	99	25.8
NA	176	45.8
Husband's income		
≤35k	234	60.9
36k - 60k	98	25.5
≥60k	52	13.5
SES		
Middle	60	15.6
Lower Middle	95	24.7
Lower	229	59.6
Dependent family members		
≤ 4 members	114	29.7
5-6 members	152	39.6
≥ 7 members	118	30.7
City		
Lahore	128	33.3
Multan	128	33.3
Rawalpindi	128	33.3

Table 1 included Socio-demographic characteristics of the women who contributed in the poll survey. Results indicate that the majority of the women who contributed in the survey were 26-41 years of age (69.5%). In addition, 18% of the women were less than 25 years and 12.5% were 42 and more than 42 years of age. It shows that the greater part of the women who contributed in the survey were in their middle but reproductive age group. About 40% of the women were illiterate and 60% were literature. Moreover, about 38% of the women claimed that their partners were illiterate and 62% of the women reported their partners literate. When discussing the term of marriage, the majority of female respondents indicated a period of more than five years (66%), while 24% stated a duration of more than ten years. Furthermore, it is noteworthy that 63 percent of the female participants reside within a joint family system. Additionally, the findings of the study indicate that a significant majority of these women were unemployed, accounting for 62 percent of the sample. A mere 16% of employed women were found to utilize their earned income for personal expenditures, while 12% indicated that their monthly wage was being utilized by someone else. Approximately 26% of the female participants indicated that the decision regarding the utilization of the woman's wage was made jointly by both partners. A significant proportion of the female participants said that their husbands' monthly salaries were below 35,000 (61%). In a similar vein, the majority of the female participants belonged to the lower socio-economic class, comprising 60% of the sample. The remaining participants were distributed between the lower middle socio-economic class (25%) and the middle socio-economic class (16%). Approximately 40% of the female participants indicated that they had between 5 and 6 family members that were reliant on them, while 31% reported having more than 7 dependent family members. Furthermore,

it was found that 30% of the female participants indicated having less than four dependent family members. Nevertheless, an equitable distribution of women participants was ensured across all regions, namely Lahore, Multan, and Rawalpindi, with each region accounting for 33.3% of the total sample (Table 1).

Tables 2 and 3 display the average disparity in study variables, namely social isolation, social support, and spousal violence, in relation to the demographic features of the respondents. The purpose of these tables is to determine the prevalence of these variables across the various demographic characteristics of the women. Table 2 represents the results of independent sample t-test between wife’ education, partners’ education, job status and family system and social isolation, social support and spousal violence. On the contrary, table 3 presents mean differences of social isolation, social support and spousal violence across different categories of age, salary use, socio-economic status, number of dependent family members, , husbands’ monthly income and cities of residence.

Social Isolation

The results indicate a non-significant mean difference of social isolation between literature and illiterate women during COVID-19 pandemic. However, a significant means difference at 99% confidence interval (CI) was found between literature and illiterate partners indicating more social isolation among women reporting illiterate and less social isolation among the women reporting literature partners. On the other hand, mean difference of social isolation was also non-significant between joint and nuclear family system. However, social isolation was higher among employed women as compared to unemployed women and a significant mean difference was noticed at 99% CI (Table 2).

Results also indicated a non-significant mean difference of social isolation among different categories of respondents’ age, years of marriage (marriage duration), salary use and number of dependent family members. However, a significant means difference of social isolation was observed across the categories of husbands’ monthly income at 99% CI indicating lowest level of social isolation among the women who reported their husbands’ monthly income 36-60 thousand and it was found highest among the women reported their husbands’ monthly income ≤35 thousands. Similarly, social isolation significantly differs across socio-economic classes at 99% CI and it was highest among lower socio-economic class (32.76) and the lowest among lower middle class (20.66). Results further indicated that social isolation was the highest in Rawalpindi (33.29) and the lowest in Multan (23.94) and the mean difference across the cities were statistically significant at 99% CI (Table 3).

Table 2 Mean difference of social isolation, social support and spousal violence across education, family system and employment

Variables	Social Isolation		Social Support		Spousal Violence	
	Mean (SD)	t	Mean (SD)	t	Mean (SD)	t
Wife’ education						
Illiterate	30.72 (16.62)	1.62	48.68 (19.52)	-3.54**	47.78 (41.40)	2.57*
Literate	27.90 (16.61)		55.29 (16.40)		37.05 (39.01)	
Partner’s education						
Illiterate	30.72 (16.67)	3.07**	48.79 (20.07)	-3.30**	50.18 (42.06)	3.45**
Literate	26.98 (16.39)		55.05 (16.06)		35.78 (38.17)	
Family system						

Joint	29.52 (16.46)		52.73 (17.74)	.113	43.40 (40.57)	1.34
Nuclear	28.15 (17.06)	.779	52.52 (19.02)		37.70 (39.69)	
Job status						
Employed	32.70 (16.43)		48.13 (19.39)	-3.85**	50.61 (43.01)	3.58**
Unemployed	26.79 (16.46)	3.417**	55.40 (17.02)		35.65 (37.41)	

** : Significant at 99% CI, * : Significant at 95% CI

Perceived social support

Results indicate that means difference of perceived social support was significantly different between illiterate (55.29) and literature (48.68) women at 99% CI. In addition, mean difference of perceived social support was also significantly different between literature partners (55.05) and illiterate partners (48.79) at 99% CI. It was also noticed that mean difference of perceived social support was statistically significant at 99% CI among employed (48.13) and unemployed women (55.40). On the contrary, mean difference of perceived social support was non-significant between nuclear and joint family system (Table 2).

Mean difference of perceived social support was not statistically significant across the categories of respondents’ age, number of dependent family members. In addition, mean difference of perceived social support was significant at 99% CI. Mean difference of perceived social support was also found statistically significant at 95% CI across the categories of salary use indicating the highest level of perceived social support among those who were not earning and the lowest among those women who involved their husbands in the decision of salary use. A significant mean difference of perceived social support was found across the categories of husbands’ monthly income and socio-economic class at 99% CI. Perceived social support was found the highest among lower middle socio-economic class (61.53) and the lowest among lower socio-economic class (48.76). Perceived social support was found the highest among the respondents from Multan (56.46) and the lowest among the respondents from Rawalpindi (50.11) and this mean difference across the cities was statistically significant at 95% CI (Table 3).

Table 3 Mean difference of social isolation, social support and spousal violence across age, years of marriage, salary use, husbands’ monthly income, socio-economic status, number of dependent family members and city of residence

	Social Isolation		Social Support		Spousal Violence	
	Mean (SD)	F	Mean (SD)	F	Mean (SD)	F
Age						
Less than 25 Years	29.05 (18.28)	1.00	51.36 (18.85)	1.31	39.53 (41.44)	.457
26-33 Years	27.28 (17.55)		54.91 (17.96)		41.47 (41.03)	
34-41 Years	29.74 (15.17)		52.23 (17.49)		43.80 (41.08)	
42 Years and Above	31.79 (15.74)		49.43 (20.16)		36.35 (34.27)	
Years of marriage						
1-4 Years	25.30 (14.08)	1.11	60.20 (16.43)	4.76**	18.75 (29.54)	8.73**
5-10 Years	29.47 (17.75)		52.56 (17.80)		46.09 (41.77)	
10Years+	29.40 (14.43)		49.61 (19.57)		37.87 (36.15)	
Salary use						
Herself	28.31 (17.32)	.237	49.84 (20.82)	3.73*	44.38 (42.68)	1.324
SomeoneElse	30.52 (16.17)		50.52 (18.24)		49.50 (39.75)	
Both of partners	29.56 (16.07)		49.50 (17.13)		42.38 (41.43)	
NA	28.57 (17.00)		56.00 (17.40)		37.44 (38.70)	
Husband’s income						
≤35k	32.17 (16.05)	15.47**	49.52 (18.50)	14.92**	44.60 (41.68)	2.23
36k - 60k	21.41 (16.52)		61.02 (15.55)		37.67 (38.92)	
≥60k	29.13 (15.33)		51.00 (17.35)		33.26 (36.79)	
SES						

Middle	27.95 (15.91)	19.56**	53.36 (17.12)	18.05**	31.55 (33.49)	4.32*
Lower Middle	20.66 (16.12)		61.58 (14.90)		35.83 (37.13)	
Lower	32.76 (15.84)		48.76 (18.57)		46.12 (42.47)	
Dependent family members						
≤ 4 members	27.59 (16.18)	1.87	53.80 (17.46)	.425	38.83 (39.79)	.712
5-6 members	28.19 (16.38)		52.62 (18.48)		40.38 (41.48)	
≥ 7 members	31.45 (31.45)		51.59 (18.83)		44.85 (39.37)	
City						
Lahore	29.82 (13.45)	10.81**	51.39 (16.49)	4.40*	39.28 (37.54)	4.45*
Multan	23.94 (16.36)		56.46 (20.67)		35.08 (36.14)	
Rawalpindi	33.29 (18.57)		50.11 (16.87)		49.53 (45.41)	

** : Significant at 99% CI, * : Significant at 95% CI

Spousal violence

Mean difference of spousal violence among literature (37.05) and illiterate (47.78) women was statistically significant at 95% CI. In addition, mean difference of spousal violence was statically significant at 99% CI and the higher level of spousal violence was observed among illiterate partners (50.18). Means score of spousal violence was noticed higher among employed women (50.61) as compared to unemployed women (35.65 and it was significantly different at 95% CI. A non-significant mean difference of spousal violence was noticed between nuclear and joint family system (Table 2).

Women who are married from 5 to 10 years of marriage duration experienced more spousal violence (46.09) as compare to those who was married from 1-4 years of marriage duration experienced less violence (18.75) and mean difference of spousal violence across the categories of marriage duration was statistically significant at 99% CI. Mean difference of spousal violence was also statistically significant across the categories of socio-economic classes at 95% CI indicated the lowest level among middle class respondents (31.55) and the highest level among the women from lower socio-economic class (46.12). Similarly, mean difference of spousal violence was also statistically significant across the cities of residence at 95% CI and the highest level of spousal violence was observed in Rawalpindi (49.53) and the lowest level was noticed in Multan (35.08). However, mean difference of spousal violence was not statistically significant across the categories of respondents’ age, salary use, husbands’ monthly income and number of dependent family members.

Table 4. Relationship between spousal violence and social isolation

Model	Model Summary		ANOVA	UC	Std. Error	Sig.
	R	R-Square	F	B		
Constant	.398	.159	72.07**	13.384	3.791	.000
SI				.962	.113	.000

Table 4 presents an analysis of the correlation between social isolation and spousal violence among women in the Punjab region during the COVID-19 epidemic. The findings indicate a moderate connection (r = .398) between social isolation and spousal violence. Furthermore, it is worth noting that around 16% of the observed variability in spousal violence can be accounted for by the factor of social isolation experienced by women during the epidemic. Nevertheless, a single unit increment in the degree of social isolation will have a substantial impact on the outcome. During the pandemic, a total of 962 incidents of domestic abuse among women were reported,

with a confidence interval of 99%. The data presented in Table 4 indicates a positive correlation between the escalation of social isolation and the occurrence of spousal violence among women in the context of the pandemic.

Moderating effect of perceived social support

Table 5 Moderating effect of perceived social support

Moderator	F	Coefficients	SE	Sig.
Social support	32.49**			
Social Isolation		.345	.052	.000
Social Support		-.198	.055	.047
Interaction (SI*SF)	2.93*	.171	.043	.000

The findings of this study suggest that the perceived level of social support plays a moderating role in the association between social isolation and marital violence. The process study conducted by Andrew Hayes involved the utilization of SPSS software to examine the moderating influence of social support. The findings of the analysis revealed a statistically significant association between social isolation and spousal violence, with a confidence level of 99%. In contrast, the coefficient value indicating the association between social support and spousal violence is -0.198, which is statistically significant at a 95% confidence interval. Nevertheless, the coefficient value representing the association between the interaction of social isolation and social support exhibited a decline to .171, yet it remained statistically significant at a confidence interval of 99%. The findings indicate that a one-unit rise in social isolation is associated with a corresponding increase of 0.345 units in spousal violence among women. Additionally, the results underscore the significance of social support, as a one-unit increase in social support is linked to a drop of 0.198 units in violence against women. Nevertheless, a single unit increase in the interaction variable (social isolation multiplied by social support) is associated with a 0.171 unit increase in spousal violence. The current study revealed that social support functions as a moderator, influencing the association between social isolation and spousal violence (refer to Table 5).

5.0 Discussion

The present study strengthens the findings of the previous scholarly studies by indicating an increase in spousal violence against women in the COVID-19 pandemic (Amir, Noreen, & Mushtaq, 2023; Agüero, 2021; Hussain et al., 2017; Rehman et al., 2023; Peterman et al., 2020; Sabri et al., 2020; Usher et al., 2020). It also confirmed a high level of psychological violence against women by their partners. In addition, physical violence against women was also reported to be high, which strengthened already existing empirical studies (Sánchez et al., 2020; Sabri et al., 2020; Sardinha et al., 2022). The level of spousal violence differs among illiterate women and their partners. Illiterate women and their patterns were more likely to face and commit violence (Ali et al., 2014). In addition, employed women were also more likely to face spousal violence as contrasted to unemployed women during the pandemic (Hussain et al., 2017; Zhang, 2022). Similarly, it was also higher among the women who were in their middle years of marriage

duration and among the women from lower socio-economic classes (Hussain et al., 2017; Vieira et al., 2020; Zhang, 2020).

Spousal violence, therefore, may be lessened by increasing the literacy rate among women and by uplifting their socio-economic status. However, a higher level of spousal violence among employed women may be attributed to their ability to challenge the patriarchal authority of their male partners (Hussain et al., 2017; Rehman et al., 2023; Usher et al., 2020).

The study also included social isolation as an independent variable. The results of the study found more social isolation during the pandemic lockdown and social distancing strategies (Clair et al., 2021; Pokhrel & Chhetri, 2021; Williams et al., 2020). However, social isolation was higher among illiterate women and illiterate partners. It was also higher among employed women during the pandemic (Başkan & Alkan, 2023; Hussain et al., 2017; Sánchez et al., 2020). These are new additions to the literate, as none of the studies, as per the best of the researchers' understanding, investigated the differentiated prevalence of social isolation among women during the pandemic, generally around the world and especially in Pakistan. Moreover, social isolation was also found to be higher among women from lower socio-economic classes. Hence, social isolation may decrease even during pandemics by increasing the literacy rate and uplifting the socio-economic class of women.

Scholarly studies indicated that perceived social support decreased during the pandemic because of the lockdown strategy and social distancing measures taken by governments to avoid the rapidly spreading virus (Bardoshet al., 2023; Rehman et al., 2023). The findings of the present study also replicated those studies that suggested a lower level of perceived social support during the pandemic (Mahlangu et al., 2022; Toghroli et al., 2023). The decrease in social support may be attributed to the unavailability of face-to-face social interaction with family, friends, and even significant others. Those living in other towns and cities were unable to travel because of restricted mobility during the pandemic (Ferber et al., 2022; Liao et al., 2021; Mojahed et al., 2021). However, the study added some new insights into the literacy of social support by highlighting a higher level of perceived social support among women in their early years of marriage and lower middle socio-economic class. It was also found to be higher among literate and employed women. Although lockdown strategies and social distancing decreased the spread of viruses, they added to social isolation, which in turn gave birth to more spousal violence (Boserup, McKenney, & Elkbuli, 2020; Johnson & Winter, 2023; Katusiime et al., 2022; Mahlangu et al., 2022).

Scholars claimed that social isolation was caused by a lack of social support during the pandemic, which is also supported by the present study by indicating a negative relationship between social isolation and social support (Kaukinen, 2020; Leal Filho et al., 2021; Moore & Lucas, 2021). With the increase in social support, social isolation decreased. The current study also examined the moderating influence of perceived social support on the association between social isolation and spousal violence. The moderating effect of perceived social support on the association between social isolation and marital violence was shown to be statistically significant, as evidenced by studies conducted by Kaukinen (2020), Mojahed et al. (2021), and Zhang (2022). Moreover, the inclusion of perceived social support in the analysis resulted in a reduction in the

predictive capacity of social isolation. Therefore, it can be argued that the presence of perceived social support among women, even in times of limited freedom, may have a positive impact in reducing incidents of marital violence.

Conclusion

The main aim of this study was to investigate the occurrence of social isolation, social support, and spousal violence across different demographic categories. The selection of participants for this study was based on a pre-established inclusion criterion, with a specific focus on women. The data was collected throughout the period of lockdown utilizing established questionnaires for assessing spousal violence, social isolation, and perceived social support. Subsequently, the data was subjected to analysis employing the Statistical Package for the Social Sciences (SPSS). The findings revealed a significant prevalence of domestic violence and social isolation experienced by women during the period of pandemic-induced lockdown. Furthermore, there was a positive association observed between social isolation and the occurrence of spousal abuse. Furthermore, there exists a robust association between social support and the connection between social isolation and spousal violence, with social support playing a large moderating role. Therefore, it is advisable to mitigate spousal violence by enhancing social support among women and reducing social isolation.

Rabbia Khan: Problem Identification and Model Development, Literature search, Methodology
Rubeena Zakar: Supervision and Drafting

Conflict of Interests/Disclosures

The authors declared no potential conflicts of interest in this article's research, authorship, and/or publication.

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