# Variation in Domestic Violence in India across Women Empowerment Indicators: An Analytical Study

### Dr. Baharul Alom Laskar

Assistant Professor & Head, Department of Economics, Govt. Model College Borkhola, Cachar, Assam

#### **Abstract**

This study primarily focuses on investigating and analyzingthe extent of different forms of domestic violence like physical, sexual and emotionalamong the married women both in the regional context of Indiaand the country as a whole. Methodology of the study is basically analytical and the variation in domestic violence across the selected women empowerment indicators like educational attainment, employment status and participation in familial decision takinghas been analyzed using t:Test and ANOVA. Based on the National Family Health Survey (NFHS) reports published by the Ministry of Health and Family Welfare, Government of India the study found that, women are the most victims of domestic violence in Karnataka and least victims in Nagaland. Significant variation in the domestic violence has been observed in the North Eastern, Northern, Southern and Central regions of India. Domestic violence has been found to be negatively associated with variation in educational attainment and participation of women in familial decision taking. Based on the findings of the study, policy suggestions are forwarded.

Keywords: Emotional Violence, Physical Violence, Sexual Violence, Women Empowerment

### 1. Introduction

Domestic violence is considered as a serious and vital public health issue across the globe violating the human rights of women. Worldwide 1 out of 3 or 30 percent of women have been the victims of intimate partner violence in their life time (WHO, 2021). The term domestic violence can be defined as the violence or abuse especially in the form of mental, physical and sexual abuse in the context of a domestic set up. The domestic set up implies the co-living in household context among interrelated and interdependent persons like husbands and wives. Spousal violence against women who are married is an emerging issue in developing countries and it is now beginning to be recognized as a widespread socio familial issue across the country. Domestic violence against women impacts negatively the physical, mental and reproductive health of women. Gender neutral human rights offer the opportunity of fearless and peaceful living for both men and women. The fear of violence experienced by women is a barrier on the free mobility of women across society and other platforms which lead to denial of basic opportunities in life of women. When a men or women becomes the victims of domestic violence, it naturally violates his her right as a human being to survive in civilized society. Violence in the household context is mostly spousal violence or intimate partner violence in other words. Violence of any form is harmful for the women in the greater sense of familial instability and reproductive health. Spousal violence can negatively affects women's physical and mental health thereby resulting in various risk factors like low level of education, child maltreatment, familial violence, use of alcohol, low employment and empowerment of women. Several ill outcomes resulting from spousal violence are widespread across the country like suicide, injury, abortion, depression, post-traumatic stress, sleeping disorders, eating disorders etc. At the household level, the occurrence of spousal violence not only disturbs the familial peace and harmony rather it affects the women empowerment to materialize their potentialities and overall growth. It is common to realize that, threats of violence when occurs within intimate relationship, it leads to fear and insecurity in the lives of women which

Vol. 44 No. 6 (2023)

is an obstacle to the achievement of equality in the sphere of education and employment. It is quite natural to observe that women victims of domestic violence are mostly having low educational attainment, unemployed and non-participant in familial decision making. The importance and significance of the study is quite relevant in the sense that, the analysis of domestic violence in in its various forms provides the scope of investigation in the prolonged and long held issue and policy makers and social agents can design the strategies to reduce the occurrence of such violence. The socio economic development of any country depends on the quality of human resource which in turn depends on the equal participation and contribution of both men and women in the socio-economic aspects. The reduction in the occurrence of domestic violence will improve the familial stability, peace and harmony which are certainly driving forces behind socio economic development in India. So far as the previous studies are concerned there is hardly any study which focused on the issue of analyzing domestic violence in the context of indicators of women empowerment. To fill up this research gap, the present study investigates the extent of domestic violence in terms of physical, sexual and emotional violence and its occurrence and variation across the selected women empowerment indicators like Women's educational attainment, employment status and participation in the familial decision making.

### 2. Objectives of the Study

- (i) To investigate the current status of state wise victims of domestic violence in India among married women in the age group of 18 to 49 years.
- (ii) To analyse the extent and variation in domestic violence among the married women in the age group of 18 to 49 years across Indian Regions.
- (iii) To analyse the extent and variation in domestic violence in India among married women in the age group of 18 to 49 years across the selected women empowerment indicators.

### 3. Review of Literature

In Indian context, it has been reported about lifetime experience of women about spousal violence during their pregnancy period in terms of various cruel actions by their husbands in the form of slapping, hitting, biting, kicking and even using weapon to physically torture married (Peedicayil& Abraham et al. 2004). In the perspective of human rights, Violence against women is regarded as an important public health problem. Though violence is a concept that changes with time and socio-cultural context, it has become one of the most vital issues in the world in recent years. (Muluneh M. D. et al., 2020, Aksakal FNB et al. 2015, .Fedina L. et al. 2019). It is recognized that there are numerous studies on violence against women, primarily focusing on physical violence, and it is acknowledged that there is a need for more in-depth research on verbal and psychological violence against women, depending on various factors ( Aizpurua E et al., 2020, Zerihun T. et al. 2021, Svetlana B. et al. 2021). A strong association between domestic spousal violence and poor mental health of husbands has been found (Kumar, Shuba., et al. 2005). Married women whose husbands regularly consumed alcohol experienced spousal violence in the form of dowry harassment (Jeyaseelan, L., et Al., 2007). Other studies reported that women with lower levels of education are likelier to encounter verbal and psychological violence (Dickson K.S., 2020). In India, the factors which were found responsible for spousal violence are socio economic status and good social support in familial and societal context (Jeyaseelan & others, 2007). Both rural and urban women reported about emotional violence by their husbands in the study area (Naved, 2008).In urban south India, about 27 percent of married women reported to have experienced violence in the past 6 months of the survey conducted for the study (Rocca, Corinne H., et al. 2009). About 56 percent Indian women reported that Physical violence involved kicking, beating and grabbing, but emotional abuse usually included belittling, insult, humiliation, infidelity etc (Chandra, Prabha S., et al. 2009). In Tehran, spouse abused women especially of the category physical and sexual violence leads to poor mental and physical of women (Ghahari& others, 2009). The major types of violence like emotional physical and sexual revealed a negative correlation with percentage of men and women who attained 10 or more years of schooling and exposed to mass media (Kavitha, 2012). A national level study in India, found that, the factors responsible for spousal violence were found to be low level of income, illiteracy, backward caste, drinking alcohol by husbands (Mahapatro& others, 2012). Indian married women who have experienced spousal violence posses more probability of suffering from different types of socio-psychological disorders like, anxiety, depression, post-traumatic stress disorder, suicide, somatic pain syndromes, phobias and panic disorder etc (Charlette, Stephen Lena., et al. 2012). In urban slums of Mumbai, India, the spousal violence increases risk for higher gravidity and frequent alcohol use of husbands increases the risk for induced abortion among married women (Nair, Saritha., et al. 2013). In urban slum area of Mumbai, 36.9 percent women had experienced some type of domestic violence and the most common form of domestic violence observed in case of 86.1 percent women followed by physical violence of 63.4 percent women and sexual violence of 23.8 percent (Shrivastava, Prateek S. & S. R. Shrivastava, 2013). Violence of any nature like physical, sexual or emotional has been found to be prevalent in the ranges from 30.5 percent in Nigeria to 43.4% in Zimbabwe (Bamiwuye&Odimegwu, 2014). NFHS data revealed that decision making ability and opportunity of women has improved over the past decade (Dwivedi, L. K., et al., 2014). In urban slums area of Mumbai it is found that, 21.2 percent women have ever experienced domestic violence (Shahina& others, 2015). In the context of slum area of Kolkata, west Bengal, 32.9 percent women reported some form of domestic violence (Dasgupta, Aparajita et al. 2015). In low and middle income countries, approximately 28 percent of adolescent and 29 percent of young adult women reported lifetime physical or sexual spousal violence (Latimore, D., et al. 2015). In the literature, it is emphasized that there are studies with contradictory findings regarding whether an increase in the education level of women reduces the likelihood of being exposed to violence, but it is emphasized that the expected situation is that a higher education level can reduce the likelihood of exposure to violence (Weitzman A., 2018). In Philippines, the The significant factors behind spousal physical violence has been foud to be the age of the woman at first cohabitation, husband's drunkenness frequency and the length of cohabitation of the couple (Mercado, Joseph., et al. 2015). In West Bengal, the factors which have been found impact on beating of wife were education of women, education of husbands, Wealth Index and Work status of women (Subba, Dipika., 2015). In Ethiopia, majority of women experienced violence during pregnancy time and domestic spousal violence against women significantly associated with alcohol consumption, family history of violence, occupation, religion, educational status, residence and decision making power of women (Semahegn, Agumasie&BezatuMengistie 2015).Domestic violence is wide Spread in India, deeply emerged and has severe influence on women's health and well-being. The cost of such violence though appears to be individual but it has enormous impact on family as well society (Vidushy, Vimal& G. Sethi 2016). In south Indian context, 51.3 percent reported psychological violence whereas, 40 percent of them reported physical violence and only 13.5 percent women reported sexual violencem (George, Jismary et al. 2016). In rural Bangladesdh, Domestic spousal violence of different nature occurs in all aspect of married life of women within the household and in all cases committed by the husbands (A, Hossain 2016). In Ghana, 33.6 percent married women experienced domestic violence. In India, men's belief is that women are made to suffer in various stages and in various ways by family members and husbands. (Sharma, A., 2016). To reduce spousal violence, women empowerment and change of the mindset of the people is utmost necessary (Bagchi, Lopamudra& N. D. Karamchandani, 2016). In Zambia, wealth status, marital duration, and place of residence had been found to be significantly related to the violence of the said nature (Kusanthan, Thankian., et al. 2016). According to the literature, women exposed to sexual violence are likelier to experience verbal and psychological violence (Fedina L., et al. 2019, Dessie S., 2019). In India, Domestic violence includes violence from the husband as well as the in-law family members (Bhandari, Shreya &J. C. Hughes, 2017). In India, less than one fourth of women who were married, separated, divorced or widowed had experienced some form of physical or sexual spousal violence had sought help (Leonardsson& Sebastian, 2017). In southern context of rural India, it has been found that, Consumption of alcohol by the husband and education status women has been found significantly related to the likelihood of spousal violence (Chauhan, Pooja et al. 2018). In India, spousal violence in life time context had been found to be significantly and positively correlated with several diseases like, asthma, genital discharge, genital sores or ulcers etc (Pengpid, Supa&Karl Peltzer, 2018). In the state Haryana in India, violence of all types except the sexual violence had been found to be significantly more prevalent in the rural area compared to its urban counterpart (Nadda A., et al. (2018). In Nigeria, the factors associated with spousal violence found significant are family size, ethnicity, wealth, education and drinking alcohol by husbands (Adebowale, 2018). Less educational attainment of husbands of women in slums area of Pune experienced spousal violence (Kaloke& others, 2018). In the context of rural south India, the significant factors associated with violence were found to be alcohol consumption by husbands, controlling behavior of family members and women's employment status. (Ram & others, 2019). Although most studies have analyzed the prevalence and consequences of physical and sexual violence, women often think that psychological or

emotional abuse may be even more harmful (Heise L., 2019). Intimate partner violence is prevalent in Bangalore India and Women whose husbands ever consumed alcohol were found to have six times more risk of having physical violence by husbands (Mathew & others, 2019). In Myanmar, it has been found that residence and employment status of married women had a significant impact on decision-making ability but age group and empowerment of women had an association with domestic spousal violence (Kabir, Russell et al. 2019). In the slum areas of Kathmandu of Nepal, it has been found that, consumption of alcohol, education level and occupation was significantly associated with spousal violence (Paudel, Manusha ,2019). In Uttar Pradesh, 42 percent women reported the reproductive coercion by husbands only, 48 percent women reported the same by husband's family members (Silverman Jay G., et al., 2019). In India, 11 percent of women had reported that they had experienced any adverse pregnancy outcome like miscarriage, spontaneous abortions, and stillbirths on account of spousal violence against them by their husbands (Goli, Srinivas et al. 2020). In Indian context, mothers who faced physical, emotiona or sexual violence by their husbands, the prevalence of morbidity and mortality has been found to be higher among their children than those who did not encounter any violence (Paul, Pintu& D. Mondal, 2020). In less developed countries, Gender-based violence (GBV) against women and girls is pervasive and has negative consequences for sexual and reproductive health (Grose, Rose Grace., 2020). The prevalence of psychological, physical, sexual, physical, or sexual violence and any form of violence was very high. A quarter of the women (25.3%) reported unhealthy mental status (>8 score) in the past 4 weeks. Women who had experienced DV showed poor mental health status and more suicidal tendencies when compared with women who had not experienced violence (Sharma, K. K., 2019).

## 4. Data and Research Methodology

This study has been conducted in the context of India covering all the states. Data analysis in the study is purely secondary source based mainly taken from National Family Health Survey (NFHS-5), 2019-2021reports published by the Ministry of Health & family welfare, Government of India. For specific objective based data analysis and the to gather information about different aspects of domestic violence data from other secondary sources used in this study are- Annual Health Survey Fact Sheet- 2012-13 of eight North Eastern states published by office of the Registrar General & Census commissioner, India, and Handbook on Social Welfare Statistics-2016 published by Ministry of Social Justice & Empowerment, Government of India. The methodology of the study is basically descriptive statistics oriented like tabular and diagrammatic presentation. Further, in order to measure the extent and the variation in the different forms of domestic violence across Indian regions and selected women empowerment indicators, ANOVA and t: Test: has been used in the study.

### 5. Results and Discussion

# 5.1: Current Status of Victims of Domestic Violence in India among Married Women in the Age Group of 18 to 49 Years- A State Level Analysis

The current status of state wise victims of domestic violence ever experienced by married women in India in the age group of 18 to 49 years committed by their husbands is presented in figure 1.

Vol. 44 No. 6 (2023)

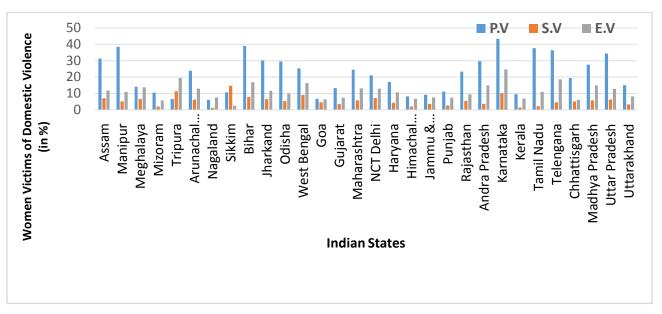


Figure: 1. Current Status of Domestic Violence in India

Source: Drawn on the basis of data derived from the NFHS-5 Report 2019-2021

P.V- Physical Violence, S.V- Sexual Violence, E.V- Emotional Violence

Figure 1 depicts that, domestic violence is widespread across the states in India. It has been found and evident from the figure that, in Karnataka the highest percentage of married women found to be the victims of physical violence (43.5%) and the lowest percentage of married women victims (6%) of the said form of violence has been found in Nagaland. It clearly indicates that, married women in Karnataka are the worst sufferer of physical violence followed by the subsequent descending position of the states like Bihar, Manipur, Tamilnadu, Telengana, Uttar Pradesh, Assam etc. The married women in Nagaland are the least sufferer in the said violence category. Again, Women in Nagaland are the least sufferer of physical violence followed by the ascending position of the states like Tripura, Goa, Himachal Pradesh, Jammu &Kasmir, Kerala, Mizoram etc in the category of Physical violence. It is also found that, in case of sexual violence Sikkim is in the top most position with the highest percentage (14.77%) of married women ever experienced the said violence and again Nagaland is in the bottom most position with the lowest percentage (1.2%) of married women ever experienced the sexual violence. A part from Sikkim married women in other states like Tripura, Karnataka and West Bengal are the worst sufferer of the sexual violence. It is surprised to found again Karnataka is in the top most position with the highest percentage (24.7%) of married women ever experienced emotional violence and Sikkim with the lowest percentage (2.5%) of married women ever experienced the said category of violence. States like Tripura, Telengana and West Bengal again found to reveal higher percentage of women experienced emotional violence.

# 5.2: Extent and Variation in Domestic Violence in India among Married Women in the Age Group of 18 to 49 Years- A Regional Level Analysis

Regional level analysis of extent and variation in the domestic violence ever experienced by married women in the age group of 18 to 49 years is presented in the table 1.

Region of **Domestic** Mean SD F value **Types** Violence Physical 17.68 12.16 North Eastern 6.73 4.50 3.79\*\* Sexual **Emotional** 10.58 5.24

Table 1: Regional Variation in Domestic Violence in India

	Physical	31.08	5.79	
Eastern	Sexual	7.18	1.64	38.08
	Emotional	13.68	3.45	
Western	Physical	14.8	9.01	
	Sexual	4.57	1.49	2.49
	Emotional	8.9	3.59	
Northern	Physical	14.95	6.41	
	Sexual	4.17	1.93	10.40*
	Emotional	9.1	2.38	
Southern	Physical	31.38	13.18	
	Sexual	4.4	3.45	11.88*
	Emotional	15.18	6.88	
Central	Physical	24.1	8.63	
	Sexual	5.05	1.31	12.51**
	Emotional	10.45	4.04	

Source: NFHS-5 Reports, 2019-21

### SD- Standard Deviation

In table 1 it is seen that, the highest percentage of married women victims of physical & emotional violence has been found in the southern region in India covering the states like- Andra Pradesh, Karnataka, Tamil Nadu, Telengana and Kerala with 31.38 percent in former and 15.88 percent in the latter category of domestic violence. Again, Married women victims of sexual violence has been found to be highest (7.18%) in the eastern region in India covering the states like- Bihar, Jharkand, Odisha and West Bengal. It is interesting to note that, lowest percentage of married women victims of physical (14.8%) and emotional violence (8.9%) belongs to the western region of the country covering the states- Goa, Gujarat and Maharashtra. Southern region again found to be in the lowest position with 4.4 percent married women ever experienced sexual violence. Highest variation in the category of domestic violence has been observed in the southern region and the lowest variation has been observed in the central region in India comprising of the states like-Chhattisgarh, Madhya Pradesh, Uttarakhand and Uttar Pradesh. Statistically significant variation in the category of domestic violence has been found in the regions like North Eastern, Northern, Southern and Central regions of India. It implies that, all married women in the states under these regions have not experienced same degree of domestic violence. This really affects the women's reproductive health and increases the risk factors in survival.

# 5.3: Extent and Variation in Domestic Violence in India among Married Women in the Age Group of 18 to 49 Years across Women Empowerment Indicators- A National Level Analysis

In order to analyse the extent and variation in domestic violence among married women in India some vital women empowerment indicators have been selected which are women's educational attainment, employment status and the familial decision making ability. The results of these are presented in tables 2, 3 and 4.

<sup>\*</sup>Significant at 1% level, \*\*Significant at 5% level

Table 2: Variation in Domestic Violence across Women's Educational Attainment

Women's Educational Attainment Level	Types of Domestic Violence	Mean	SD	F value
	Physical	5.67	3.66	
illiterate	Sexual	10.97	4.66	47.78
	Emotional	27.04	14.07	
	Physical	21.42	11.16	
Primary	Sexual	4.4	2.38	43.67
	Emotional	10.97	4.66	
	Physical	18.98	11.57	
Secondary	Sexual	3.84	2.46	32.21
	Emotional	9.70	4.89	
	Physical	13.13	8.28	
Higher Secondary &	Sexual	2.92	1.75	24.48
More	Emotional	7.52	4.95	1

Source: NFHS-5 Reports, 2019-21

#### SD- Standard Deviation

In table 2 we see that, married women in the age group of 18 to 49 years who are illiterate are the most victims of sexual violence 10.97% which is on decreasing trend with the increase in the level of educational attainment. It is also found that, though the percentage of illiterate women victims of physical violence is lowest 5.67% in India but surprisingly the occurrence of same category of violence among married women increases who possess primary level of education. However, with the increase in the level of education beyond primary level, women victims of physical violence decreases. It is quite interesting to note that, illiterate married women are the major victims of emotional violence almost 27% in India but the percentage victims of the same category of married women has been found to be falling with the rise in the level of educational attainment. Moreover, highest variation in the physical violence has been found among the married women who possess primary and secondary level of education. On an average, the degree of variation in the overall categories of domestic violence has been found to exist at the lower level of educational attainment of women though these variations are not statistically significant at any level. This is quite evident from the table 2 that, education level of married women is an important factor behind the occurrence of domestic violence in the household and there exists a negative association between the two.

Table 3: Variation in Domestic Violence across Women's Employment Status

Women's Employment	Types of Domestic	Mean	SD	F value
Status	Violence			
	Physical	18.68	9.91	
Unemployed	Sexual	3.73	1.92	
	Emotional	8.86	3.58	45.24
	Physical	28.49	13.13	
Employed	Sexual	7.02	4.03	44.91
	Emotional	15.94	6.67	

Source: NFHS-5 Reports, 2019-21

#### SD- Standard Deviation

Table 3 reveals the surprising fact that, employed women who are married in India are the major victims of domestic violence compared to the unemployed married women. It is evident from the table that, 18 % of married women who are unemployed has been found to be the victims of physical violence whereas, 28% of women are the victims of the same category of violence when they are employed. With the employment of married women, occurrence of physical violence has been increased by 10% in India. Further, when the married women are employed, percentage increase in the occurrence of sexual and emotional violence has been increased by almost 3% and 7% respectively. Variation in the occurrence of domestic violence has been found to be more among the employed women and the variation is also more in case of physical violence experienced by the married women. However, no significant variation has been observed in any of the category. In contradiction to the existing literature, it is evident from the table 3 that, employment of women is positively associated with the occurrence of domestic violence against women in the familial set up.

Table 4: Variation in Domestic Violence across Women's Familial Decision Making Participation

Women's Familial Decision Making	Types of Domestic Violence	Mean	SD	F value
	Physical	25.59	13.77	
Not Participated	Sexual	7.14	5.58	
	Emotional	15.04	7.76	27.43
Participated	Physical	19.08	11.14	
	Sexual	3.43	2.02	39.72
	Emotional	8.49	4.03	

Source: NFHS-5 Reports, 2019-21

### SD- Standard Deviation

In table 4 it is observed that, those married women in India who takes part in the familial decision making are the victims of domestic violence in lesser percentage compared to those women who are not able to take part in the decision making in the family. It is seen from the table that, 25 percent of married women who participated in familial decision making are the victims of the physical violence compared to 11 percent women who are the victims in the same category when they did not participate in familial decision. Similarly, the percentage decrease in the occurrence of sexual and emotional violence among married women has been found to be 4 percent and 7 percent respectively when the women takes part in the familial decision making. High degree of variation in the occurrence of domestic violence has been observed among married women who did not participate in familial decision making though the variations are not found to be statistically significant. It is thus evident from the table that, ability to participate in the familial decision making is a vital and crucial factor negatively associated with the occurrence of the domestic violence in India.

### 6. Conclusion and Policy Suggestions

In this study it is found that, percentage occurrence of domestic violence among married women in the age group of 18 to 49 years is highest in the southern region in India in general and specifically in the state of Karnataka. Significant variation in the different categories of domestic violence has been found in the north eastern, northern, southern and central regions of India. Regional analysis of the issue of domestic violence further reveals the fact that, occurrence of domestic violence is lowest in the western region of India. However, State level analysis of the issue reflects that, married women in Karnataka are the major victims of physical and emotional violence while women of Sikkim are the major victims of sexual violence but least victims of emotional violence. Nagaland, the north eastern state of India has the lowest percentage of married women who have experienced physical and sexual violence. Among the selected women empowerment indicators, education

level and participation in the familial decision of married women has been found to be negatively associated with the occurrence of domestic violence but employment status of women has been found to be positively associated with the occurrence of the same. The scope of the study is limited in analyzing the current status and variation of different forms of domestic violence in India which needs further investigation to find out the factors behind occurrence of such violence. At this preliminary stage it is suggested that, parents must unbiasedly provide the opportunity to educate their daughters and the husbands in the family must allow their wives to take part in the familial decision making. Indian government should implement strong policies to tackle the occurrence of domestic violence.

### References

- [1] Adebowale A. S., (2018). Spousal age difference and associated predictors of intimate partner violence in Nigeria. BMC Public Health18 (1), 212-222.
- [2] A, Hossain (2016). The Impact of Domestic Violence on Women: A Case Study of Rural Bangladesh. Social Crimonol, 4(1), doi:10.4172/2375-4435.1000135
- [3] Aizpurua E, O'Connell, C., (2020). Men's Psychological Violence against Women. In: Shackelford TK, editor. The SAGE Handbook of Domestic Violence. 1. California: SAGE Publications, 98–112.
- [4] Aksakal FNB, Karaşahin EF, Dikmen AU, Avci E, Özkan S., (2015). Workplace physical violence, verbal violence, and mobbing experiencedby nurses at a university hospital. Turkish Journal of Medical Sciences, 45(6), 1360–1368, Pmid: 26775395
- [5] Bagchi, Lopamudra& N. D. Karamchandani (2016). Violence against Women: Reality, Challenges & Perceptions in India. Imperial Journal of Interdisciplinary Research, 2(11), 84-88
- [6] Bamiwuye, Samson Olusina and Clifford Odimegwu (2014). Spousal violence in sub-Saharan Africa: does household poverty-wealth matter? Reproductive Health, retrieved from <a href="http://www.reproductive-health-journal.com/content/11/1/45">http://www.reproductive-health-journal.com/content/11/1/45</a>
- [7] Begum Shahina, B.Donta, S. Nair and C.P. Prakasan (2015). Socio-Demographic Factors associated with Domestic Violence in Urban Slums, Mumbai, Maharashtra, India. Indian Journal of Medical Research, 141(6), 783-788.
- [8] Bhandari, Shreya &J. C. Hughes (2017). Lived Experiences of Women Facing Domestic Violence in India. Journal of Social Work in the Global Community, 2(1), 13–27.
- [9] Chandra, Prabha S., Veena A. Satyanarayana & Michael P. Carey (2009). Women reporting intimate partner violence in India: Associations with PTSD and depressive symptoms. Arch Womens MentalHealth ,12, 203–209; DOI 10.1007/s00737-009-0065-6
- [10] Charlette, Stephen Lena., B. Nongkynrih, S.K. Gupta(2012). Domestic Violence in India: Need for Public Health Action. Indian Journal of Public Health, 56(2), 141-145.
- [11] Chauhan, Pooja, K. Shridevi, S. Katkuri (2018). Domestic violence and related factors among ever married females in a rural area of southern India. International Journal of Community Medicine and Public Health ,5(9), 3847-3852; <a href="http://www.ijcmph.com">http://www.ijcmph.com</a>
- [12] Dasgupta, Aparajita et al. (2015). Domestic Violence and its Determinants: A cross-sectional study among women in a slum of Kolkata, West Bengal. Indian Journal of Community Health, 27(3), 334-340.
- [13] Dessie S, Bekele Y, Bilgeri M., (2019). Sexual violence against girls and young women with disabilities in Ethiopia. Including a capability perspective. Journal of Global Ethics, 15(3),325-343.
- [14] Dickson KS, Ameyaw EK, Darteh EKM., (2020). Understanding the endorsement of wife beating in Ghana: evidence of the 2014 Ghana Demographic and Health Survey. BMC Women's Health, 20(25), 1–7, Pmid:32046703.

· · ·

- [15] Dwivedi, L. K., et al. (2014). Women's Empowerment and Domestic Violence: Findings from 17 States/UTs Surveyed in Phase 1 of NFHS-4 (2015-16). Demography India, 43 (1&2), 63-69.
- [16] Fedina L, Mushonga DR, Bessaha ML, Jun H-J, Narita Z, DeVylder J., (2019). Moderating effects of perceived neighborhood factors on intimate partner violence, psychological distress and suicide risk. Journal of Interpersonal Violence, 22(5)., 172-181, Pmid:31686578.
- [17] George, Jismary et al. (2016). The prevalence of domestic violence and its associated factors among married women in a rural area of Puducherry, South India. Journal of Family Medicine and Primary Care, 5672-676; DOI: 10.4103/2249-4863.197309.
- [18] Ghahari, SH et al. (2009). Prevalance of Spouse Abuse and Evaluation of Mental Health States in Female Victims of Spousal Violence in Tehran. "Iranian Journal of Psychiatri and Behavioural Sciences, 3 (1), 50-56.
- [19] Grose, Rose Grace., Julia S. Chen, Katherine A. Roof, Sharon Rachel & Kathryn M. Yount (2020). Sexual and Reproductive Health Outcomes of Violence Against Women and Girls in Lower-Income Countries: A Review of Reviews, The Journal of Sex Research, <a href="https://doi.org/10.1080/00224499.2019.1707466">https://doi.org/10.1080/00224499.2019.1707466</a>
- [20] Heise L, Pallitto C, García-Moreno C, Clark CJ., (2019). Measuring psychological abuse by intimate partners: Constructing a cross-cultural indicator for the Sustainable Development Goals. SSM-Population Health, 9, 52-62, Pmid:31993478
- [21] Jeyaseelan, L., S. Kumar, N. Neelakntan& A. Peedicayil. (2007). Physical Spousal Violence against Women in India: Some Risk Factors. Published online by Cambridge University Press, 657-670, DOI: https://doi.org/10.1017/S0021932007001836
- [22] Kabir, Russell et al. (2019).Domestic violence and decision-making power of marriedwomen in Myanmar: analysis of a nationally representative sample. Ann Saudi Med 39(6), 395-402; DOI: 10.5144/0256-4947.2019.395
- [23] Kalokhe, A. S., et al. (2018). Correlates of Domestic Violence Experience among Recently Married Women Residing in Slums in Pune, India. PloS one13 (4), DOI:10.1371/journal.pone.0195152
- [24] Kumar, Shuba., L, Jeyaseelan, S, Suresh and R, C, Ahuja (2005). Domestic violence and its mental health correlate in Indian women. British Journal of Psychiatry, 187, 62-67.
- [25] Kusanthan, Thankian., Sidney O. C. Mwaba, & J. A. Menon (2016). Factors Affecting Domestic Violence among Married Women in Zambia. British Journal of Education, Society & Behavioural Science, 12(2), 1-13.
- [26] Leonardsson, M &M.S.Sebastian (2017). Prevalance and Predictors of Help-Seeking for Women Exposed to Spousal Violence in India- a Cross Sectional Study. BMC Women's Health 17(99) DOI:10.1186/S12905-017-0453-4
- [27] Mathew, S. S., Goud, R. B., & Pradeep, J.,(2019). Intimate Partner Violence among Ever-married Women Treated for Depression at a Rural Health Center in Bengaluru Urban District." Indian journal of community Medicine: official publication of Indian Association of Preventive & Social Medicine, 44(1), 70-73.
- [28] M. Mahapatro, Gupta, R & Gupta, V. (2012). The Risk Factor of Domestic Violence in India. Indian Journal of Community Medicine, 37 (3), 153-157.
- [29] Mercado, Joseph. L. Bautista, J. D. Urrutia, M. J. B. Morelos, J. G. Amora (2015). Analysis on Predicting Spousal Physical Violence in the Philippines Using Binary Logistic Regression. European Academic Research, 3(3), 3145-3166
- [30] Nadda A., et al. (2018). Study of domestic violence among currently married females of Haryana, India. Indian Journal of psychological Medicine, 40 (6), 534-549, doi: 10.4103/IJPSYM.IJPSYM\_62\_18

· · ·

[31] Nair, Saritha., et al. (2013). Reproductive health concerns of women contending with spousal violence and husband's alcohol use in a Mumbai slum community. International Journal of Gynecology & Obstetrics, 122(3), 268–269.

- [32] Naved, R.T & N. Akhtar (2008). Spousal Violence against Women and Suicidal Ideation in Bangladesh. Women's Health Issues 18 (6), 442-452.
- [33] Paudel, Manusha (2019). Prevalence and Factors Associated with Physical Intimate Partner Violence in Slum areas of Kathmandu Valley. Electronic Research Journal of Social Sciences and Humanities, 1(4), 58-64
- [34] Paul, Pintu& D. Mondal (2020). Maternal experience of intimate partner violence and its association with morbidity and mortality of children: Evidence from India. PLoS ONE 15(4), https://doi.org/10.1371/journal.pone.0232454
- [35] Peedicayil, Abraham.et al. (2004). Spousal physical violence against women during pregnancy. BJOG: an International Journal of Obstetrics and Gynaecology, 111, 682-687; DOI: 1 0 .1111/j.1471-0528.2004.00151.
- [36] Pengpid, Supa and Karl Peltzer (2018). Lifetime Spousal Violence Victimization and Perpetration, Physical Illness, and Health Risk Behaviours among Women in India. International Journal of Environmental Research and Public Health, 15, 27-37; doi:10.3390/ijerph15122737
- [37] Pewa, P., et al. (2015). Occurrence of Domestic Violence among Women and its impact on Oral Health in Jodhpur City. Journal of Contemporary Dental Practices 16 (1), 227-233.
- [38] Rajkumari, B., Rajkumar&Keisham (2016). Violence against Women- An Emerging Health Issue in North East India. Annals of International Medical and Dental Research, 2(6), 5-11.
- [39] Prateek S Shrivastava and Saurabh R Shrivastava (2013). Study of Spousal Domestic Violence in an Urban Slum of Mumbai. International Journal of Preventive Medicine, 4(1), 27-32.
- [40] Latimore, D., et al. (2015). Gender-Based Violence against Adolescent and Young Adult Women in Lowand Middle-Income Countries. Journal of Adolescent Health56(2), 188-196.
- [41] Muluneh MD, Stulz V, Francis L, Agho K., (2020). Gender based violence against women in Sub-Saharan Africa: a systematic review and meta-analysis of cross-sectional studies. International Journal of Environmental Research and Public Health, 17(3), 903-913, Pmid:32024080
- [42] Ram, A. et al. (2019). Domestic Violence and its Determinants among 15-49-Year-Old Women in a Rural Block in South India." Indian journal of community Medicine: official publication of Indian Association of Preventive & Social Medicine, 44(4), 362-367.
- [43] Rocca, Corinne H., S, Rathod, T, Falle, R P Pande and S, Krishnan (2009). Challenging assumptions about women's empowerment: social and economic resources and domestic violence among young married women in urban South India. International Journal of Epidemiology ,38, 577–585 doi:10.1093/ije/dyn226
- [44] Sabri, B., & Campbell, J. C., (2015). Intimate partner violence against women in slums in India. The Indian Journal of Medical Research, 141 (6), 757-759.
- [45] S, Ebenezer., O. Adjah& I. Agbemafle (2016). Determinants of domestic violence against women in Ghana. BMC Public Health, 16, 368-378, DOI 10.1186/s12889-016-3041
- [46] Semahegn ,Agumasie&BezatuMengistie (2015). Domestic violence against women and associated factors in Ethiopia; systematic review. Reproductive Health, 12(78); DOI: 10.1186/s12978-015-0072-1
- [47] Sharma, A., (2016). Social Dimensions of Domestic Violence against Women. The Delhi University Journal of the Humanities and the Social Sciences, 3, 185-208.

· · ·

- [48] Sharma KK, Vatsa M, Kalaivani M, Bhardwaj D., (2019). Mental health effects of domestic violence against women in Delhi: A community-based study. Journal of Family Medicine Primary Care, 8(7), 2522-2527. doi: 10.4103/jfmpc.jfmpc\_427\_19. PMID: 31463288
- [49] Silverman , Jay G., et al. (2019). Reproductive coercion in Uttar Pradesh, India: Prevalence and associations with partner violence and reproductive health. SSM Population Health 9: 100484, <a href="http://www.elsevier.com/locate/ssmph">http://www.elsevier.com/locate/ssmph</a>
- [50] SrinivasGoli, MdJuelRana, Jitendra Gouda (2020). Intimate Partner Violence Effects on Maternity Care and Pregnancy Outcomes in India. Economic and political weekly, 6, 71-76.
- [51] Subba, Dipika. (2015). Is The Spousal Age Difference in West Bengal Leading to Spousal Violence? International Research Journal of Management Sociology & Humanity, 6(4); 234-245; <a href="https://www.irjmsh.com">www.irjmsh.com</a>
- [52] Svetlana B, Javad M, Lotfi KT., (2021). From isolation to violence: changes of the domestic environment in the Iranian family under COVID-19. Russian Sociological Review, 20(4):86–110.
- [53] Vidushy, Vimal&GagandeepSethi (2016). Domestic violence in India- An analysis. International Journal of Applied Research, 2(8), 461-465
- [54] V.R.S. Kavitha. (2012). Spousal Domestic Violence of Married Women in India, Journal of Sociology and Social Anthropology, 3 (1), 7-13.
- [55] Weitzman A., (2018). Does increasing women's education reduce their risk of intimate partner violence? Evidence from an education policy reform. Criminology, 56(3), 574-607. Pmid:31592177
- [56] World Health Organisation (2021). Violence against Women. Retrieved from <a href="https://www.who.int/news-room/fact-sheets/detail/violence-against-womenacessed">https://www.who.int/news-room/fact-sheets/detail/violence-against-womenacessed</a> on 9th May, 2023
- [57] Zerihun T, Tesfaye M, Deyessa N, Bekele D., (2021). Intimate partner violence among reproductive-age women with chronic mental illness attending a psychiatry outpatient department: cross-sectional facility-based study, Addis Ababa, Ethiopia. BMJ Open, 11(12), Pmid:34880005