DOMESTIC VIOLENCE AGAINST MARRIED WOMEN OF REPRODUCTIVE AGE- A CROSS SECTIONAL HOSPITAL BASED STUDY

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Abstract

**Background:** Domestic violence which shows an increasing trend worldwide has got serious impact on woman’s physical & mental health and well being social productivity.

**Objectives:** to assess the prevalence of domestic violence amongst the Indian married women of reproductive age group residing at West Bengal.

To evaluate the spectrum of this social illness.

**Methods:** This cross sectional study has been done in the Gynaecology outpatient department of KPC Medical College & Hospital, Kolkata for a period of one year (May 2013 to April 2014). Cases were randomly selected from married women of reproductive age who presented with any medical problem; agree to be assessed by a preorganised questionnaire.

**Results:** Domestic violence was prevalent among 55.63% of cases in their whole married life and experienced by 40.07% of subjects in their preceding one year life. Lower socio-economic condition, poor educational status of both the women and their partners, early age at marriage, having more children, preponderance of female child, addicted husband are at increased risk. Economically independent women are least affected.

**Conclusion:** To reduce this highly prevalent menace of domestic violence, quality of life of women in relation with economic independence, education, increasing age at marriage are to be addressed with utmost importance.

Introduction

Domestic violence is currently defined in India by the Protection of Women from Domestic Violence Act of 2005. According to Section 3 of the Act, “any act, omission or commission or conduct of the respondent shall constitute domestic violence in case it - (a) harms or injures or endangers the health, safety, life, limb or well-being, whether mental or physical, of the aggrieved person or tends to do so and includes causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse; or (b) harasses, harms, injures or endangers the aggrieved person with a view to coerce her or any other person related to her to meet any unlawful demand for any dowry or other property or valuable security; or (c) has the effect of threatening the aggrieved person or any person related to her by any conduct mentioned in clause (a) or clause (b); or (d) otherwise injures or causes harm, whether physical or mental, to the aggrieved person.” 1 Serious health problems often result from physical, emotional, and sexual forms of domestic violence. 2

Domestic violence in India is endemic. 3 Around 70% of women in India are victims of domestic violence, according to Renuka Chowdhury former minister for women and child development. 4

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According to the National Crime Records Bureau of India, reported incidents of crime against women has increased 6.4% during 2012, and a crime against a woman is committed every three minutes.\textsuperscript{5,6} In 2012, there were a total of 2,44,270 reported incidents of crime against women, while in 2011, there were 2,28,650 reported incidents.\textsuperscript{5} Of the women living in India, 7.5\% live in West Bengal where 12.7\% of the total reported crime against women occurs.\textsuperscript{3} Violence by husbands against wives is widespread. Married women are more likely to experience physical or sexual violence by husbands than by anyone else.\textsuperscript{1} Nearly two in five (37 percent) married women have experienced some form of physical or sexual violence by their husband.\textsuperscript{7}

A recent G20 survey ranked India as the worst place to be a woman.\textsuperscript{8} Female foeticide, domestic violence, sexual harassment, and other forms of gender-based violence constitute the reality of most girls’ and women’s lives in India. That domestic violence in India and globally is grossly underreported in surveys and to the police is well known.\textsuperscript{9} Severity of the condition made us aware to conduct the study on prevalence of domestic violence and its spectrum. In the case of domestic violence, the gynaecologist is often the only human contact.

Materials and methods
This cross sectional study has been done in the Gynaecology outpatient department of KPC Medical College & Hospital, Kolkata for a period of one year (May 2013 to April 2014). Cases were randomly selected by the first author from married women of 15 to 49 years of age who have attended the hospital with any medical illness, who resides any part of West Bengal. They were briefed about what domestic violence means and its different forms. After taking the written consent cases were assessed by a preorganised questionnaire. Cases were assured about their privacy. Prior permission was sought from the ethical committee of the institution. Questionnaire includes identity of the woman, present age, age at marriage, duration of marriage, numbers of living children & their sex, educational status of both partners, total family income per month, whether the woman is an earning member or not, addiction of the spouse if any, the violence they have ever experienced in their married life and in last one year, the exact type of violence and whether they had reported it, if yes to whom?

Results
Total 9,050 women were evaluated during the tenure. While 5035 women (55.63\%) reported of ever experiencing domestic violence in their married life, as many as 3627 women (40.07\%) reported to have faced it in last one year. The lower the age at marriage, higher is the incidence of domestic violence. Increased duration of marriage, more number of living issues, female child preponderance increases the risk as well. Women who themselves and their husbands are educated up to higher secondary level or more are less prone for domestic violence. Although women of higher socio-economic group are not totally immuned, they face domestic violence much less. Women who contribute a good amount in their family income are experiencing it scarcely. If the spouses are addicted to alcohol, or drugs, they are responsible for creating increased domestic violence to their wives.

Out of 3627 women who have experienced domestic violence in the preceding year, less severe violence was faced by 1010 (27.84\%) women, severe physical violence by 355 (9.78\%) women, sexual violence by 183 (5.04\%) women, and emotional abuse by 706 (19.46\%) women. Rests were responding for mixed form of violence. Amongst the 3627 cases only 46 (1.26\%) women have reported about their offenders to the police, though very few are proceeding with the case.

Discussion
Domestic violence in India and globally is grossly underreported. Despite the fact that women in India are legally protected from domestic abuse under the Protection of Women from Domestic Violence Act of 2005, National Crime Records Bureau reveal that a crime against a woman is committed every three minutes, a woman is raped every 29 minutes, a dowry death occurs every 77 minutes, and one case of cruelty committed by either the husband or relative of the husband occurs every nine minutes.\textsuperscript{5}

Physical health outcomes of domestic violence include: Injury (from lacerations to fractures and internal organs injury), Unwanted Pregnancy, Gynaecological problems like Sexually Transmitted Diseases including HIV.
Indian women marry younger than 18. 

Magnitude of the problem necessitates awareness among the gynaecologists who often has to conclude somatisation of stress factor is the reason of chronic sufferings of their patients. This thing prompts us to conduct the study among married women of reproductive age attending the gynaecology OPD.

Stress-related factors within the household preponderant of facing domestic violence include low educational attainment, poverty, young initial age of marriage, having multiple children. According to a 2012 United Nations report, 47% of Indian women marry younger than 18 years of age (the legal marriage age is 21 for men and 18 for women)\(^\text{11}\). A study made by Michael Koenig about the determinants of domestic violence in India, higher socioeconomic status tends to be protective against physical but not sexual violence.\(^\text{12}\) Our study reveal an overall decrease in prevalence of domestic violence amongst the higher socio-economic class and educated group though incidence of formal reporting is higher in those category.

It has been seen that measures to improve access to property and economic independence through channels such as education not only directly improve women’s wellbeing and capabilities, but also reduce their risk of exposure to marital or any sort of domestic violence.\(^\text{13}\) Our study also supports this view.

Women suffer many types of physical and emotional abuse as a result of illegal actions taken within the private home, and those who have experienced some form of domestic violence tend to have greater long-term mental disorders and drug dependencies than those who do not.\(^\text{14}\) In India, reducing domestic violence is imperative not only from an ethical and human rights perspective but also because of obvious instrumental and immediate health benefits that would be gained from such reduction.\(^\text{15}\)

The different forms of domestic violence have been considered in our study as classified by the National Family Health Survey (NFHS-3). Sexual violence D105 (H) – ever physical forced sex when not wanted, D105 (I) – ever forced other sexual acts. Less Severe Violence D105A-D105 includes the following acts: spouse ever pushed, shook or threw something, spouse ever slapped, spouse ever punched with fist or something harmful and spouse ever kicked or dragged. Severe Domestic Violence D105E-F includes: spouse ever tried to strangle or burn or spouse ever threatened or attacked with knife or gun or other weapon. Emotional abuse (D103A-D105C) includes the following acts: spouse has humiliated respondent, spouse has threatened respondent with harm, spouse has insulted respondent or made respondent feel bad.

The study reveal a very poor number (1.26% only) of the affected women have formally reported their misfortune. According to 2000 study by the National Law School of India University, it was observed that there were an extremely low number of convictions in a large sample of domestic violence cases in various Indian courts.\(^\text{16}\) There is widespread hesitancy amongst most Indian women who experience domestic violence to report or prosecute against such crimes. A major reason for this reluctance is the patriarchal structure that is the framework for the vast majority of households in India and the misconception that it is almost always the woman’s fault for provoking domestic abuse that such abuse occurs. The results of this hesitancy to report cases is clear in that reported data overwhelmingly tends to underestimate actual prevalence occurrences of domestic violence.\(^\text{17}\) In 2010, a movie based on Domestic Violence titled Bell Bajao was released with the support of the Ministry of Women and Child Development which won an award at the Cannes Film Festival.\(^\text{18}\)

Conclusion

Girl’s empowerment in the form of education, banning childhood marriage, property inheritance, and economic independence can reduce domestic violence. At the same time awareness about the magnitude of the problem and its varieties are to be build up. Stringent punishment of the offenders can help to eradicate the menace of domestic violence.
References

4. Chowdhury, Renuka (26 October 2006). "India tackles domestic violence", BBC.