



Domestic Violence : Levels, Correlates, Causes, Impact and Response

A community based study of married women from Mumbai slums

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Preface

Violence as a public health issue has been a key area of concern in CEHAT's work. CEHAT has undertaken research, advocacy as well as made appropriate interventions in this arena as part of its work in the area of women's health as well as health and human rights. Within this domestic violence has been a major priority area and CEHAT has undertaken research and intervention programs both at the community level as well as in the hospital setting.

The present study was part of a community health program, which CEHAT initiated in a slum community in north Mumbai. The community health program called *Aarogyacha Margavar* was an experiment in introducing issues related to domestic violence through a community health program in which women health workers were trained with the idea that this would be their entry into becoming para-counsellors within the community to deal with cases of domestic violence. While the conversion of the community health workers to para-counsellors was not very successful, women in the community were mobilized through self-help groups and the Astitva Mahila Mandal, a community organization of women, to be oriented to the issues and concerns of domestic violence within their community and how they could help in responding to it. During the course of this project research, both household-level study and a qualitative study using focused group discussions was undertaken independently by a research team from CEHAT.

The research throws up clear evidence of wide-spread prevalence of domestic violence within the community, looks at the reasons for the violence and explores what women do to seek help to come out of such a situation. The scope of this study was limited to ever-married women and to violence within marital relationships. Despite its limited scope, this research is a significant contribution to the literature on domestic violence in India.

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Ravi Duggal
Coordinator CEHAT
18th May 2004

Acknowledgements

The genesis of this study was the earlier research CEHAT had undertaken on healthcare morbidity, utilisation and expenditures in this community. The rapport which developed led to the setting up of a community health program, *Aarogyacha Margavar*, aimed ultimately at evolving a community-based response system to address the issue of domestic violence. This study would not have been possible without the support of this program and active participation and co-operation of all our participants. We are immensely grateful to all the women who took time out from their daily lives, to share their experiences with us. Thanks also to all the Community Health Workers – Vidya Tai, Dhapse Tai, Nirmala Tai, Sunita, Lata and Meena; to members of the Astitva Mahila Mandal, women from the self help groups and to all other women in the community who have contributed to the *Aarogyacha Margavar* programme.

The hard work and the efforts put in by each of the research investigators deserve a special mention. Vidya Bansode, Ujwala Kadam and Bharati Jadhav actively involved themselves in the study, including collection of baseline information, conducting of group discussions, household survey and cleaning and coding of data. Sushma Gamre in her capacity as research assistant provided valuable support at all stages of the study. This included, development of community profile, collection of baseline information, field-testing, conduct of group discussions, household survey, supervision of research investigators, data cleaning and transcribing. Apart from them, our thanks also go out to Hema and Sandeep who participated in the baseline study. Usha helped us in data entry work.

Collection of information from Tamil speaking women would not have been possible if it were not for the assistance received from Dr. Aruna Kartik, Rajeswari Balaji, and Rajshri Kamath. They helped us in collection of information through group discussions while Meenakshi and Regina assisted in the household survey. Our other colleagues, Bhavana Kapadia and Qudsiya Contractor contributed to collection of survey information while Neha Madhiwala offered much valued support and advice. Ms. Manisha Gupte, Dr. Bhargavi Davar and Dr. Abhay Shukla in their capacity as project consultants have also provided very important inputs.

We owe a lot to Dr. Leela Visaria for her invaluable inputs, guidance and unwavering support. Her constant encouragement, feedback as well as meaningful analysis is central to the completion of this study. All our colleagues at CEHAT have supported us. The opportunity, space and guidance provided by Ravi Duggal, as co-ordinator at all stages of the project was extremely useful. His suggestions and advice have been extremely valuable. The report has benefited from his inputs, including editorial support.

We would like to thank Dr. Amar Jesani, Dr. Lalitha D'Souza and Mani Mistry who conceptualized the project, called 'Arogyacha Margavar.' We also appreciate the inputs and feedback received from other colleagues at CEHAT including members of the Peer Review Committee and the Institutional Ethics Committee. Special thanks to Vibhuti Patel, Padma Deosthali, Poornima Maghnani, Sunita Bandewar, and Anant Phadke of CEHAT, who had reviewed the report and for sending in their useful comments.

We would like to thank Amrish B. Kondurkar from L.S. Raheja College, Bandra for the cover design. This cover design was made for the poster competition on Domestic Violence organised by Dilaasa.

Last but not the least, we are grateful to the MacArthur Foundation for supporting us in this endeavour.

Summary

The present study has documented the experiences of domestic violence among married women in a slum community in Mumbai. The community profile shows the study population to be a typical urban settlement with a high concentration of lower middle class population and with more than 50 percent being migrants from outside the state. Women in the study population are in an advantageous position vis-à-vis women of Maharashtra as a whole if we compare the educational level and work participation rate. But their overall living conditions are worse due to their living conditions and environment, which probably makes them more vulnerable to domestic violence as shown in other surveys (INCLLEN 2000; IIPS and ORC Macro 2001).

Field Survey

In the field survey the major task was eliciting information on domestic violence from 424 ever-married women who agreed to participate in the survey. The study examined three major forms of violence - physical, psycho-social and economic during a one-year reference period and during their lifetime. Detailed probe list was used to reduce under reporting. Field experience showed that for women sharing psychosocial violence was more acceptable than sharing about other forms of violence. Though in this study we have included this as a case of 'domestic violence' many of the women who reported this viewed it as a part of married life and not as violation of her rights. Data on experience of physical violence was reported with some difficulty. Perhaps the women who experience severe forms of physical violence and who are not in a position to report it might have withdrawn from the interview itself considering the high rate of 14.5 percent refusals.

Violence during their entire marital life was reported by about 64 percent of the women, which is higher than other studies (Jeejebhoy 1998; IIPS and ORC Macro 2001; INCLLEN 2000). Overall violence reported in this study is lesser as compared to some other studies (Mahajan A, 1990). Results indicated that 17

percent of women experienced domestic violence during twelve months prior to the study. These cases of domestic violence constitute the reference for understanding the correlates of violence. Among the women experiencing violence it was mainly psychosocial and followed by physical and economic violence. This study used a detailed checklist for probing to reduce under reporting of domestic violence and this resulted in an additional 51 percent of the different types of violence being reported.

Analysis of differentials in violence within entire marital life showed younger women to be experiencing higher violence compared to their older counterparts. The prevalence of domestic violence was lesser when age difference between spouses is less. Violence was also reported to be lesser among women who married at a later age than those who got married at an early age. This is mainly due to power imbalance created by high inter spousal age difference and low age at marriage, making women more vulnerable to violence.

Social status indicators showed that education and occupational levels of husband to be more closely related to violence within marriage than in the case of women. Violence is reported to be low in the two extreme categories: i.e. among illiterates and those who have completed high school, as compared to women who fall between these two categories. Similar trend was found in the case of husband's education, but the differentials were larger. Again the risk of violence was higher if the husband is unemployed or a daily wage labourer. At the same time it is to be noted that a woman who plays a role in decision-making process about household activities is definitely at a lower risk of violence than those who do not participate. Similarly, experience of violence was lesser among women belonging to nuclear families than those in joint families. State of origin was another significant variable with violence being higher in the Maharashtrian population than the non-Maharashtrian population.

Nature of Violence

An attempt was made to study differentials in different forms of violence like physical, psychosocial and economic. The limitations in sample size made us use information based on violence in marital life instead of violence in last one year. Physical violence during lifetime was found to be higher in women who experienced divorce, those with low age at marriage, middle school educated, with lower level of autonomy in decision making related to household, among Buddhists and in Maharastrian population. The trends were almost similar for both psychosocial and economic forms of violence.

Also the non-response rate of 15 percent observed in the study is noted with caution. If we compare non-response rate and reported violence in one year especially by characteristics like education, earning status and religion it appears that violence in itself might have contributed towards refusal to participate in the survey. Therefore the actual violence rate would probably be higher than that observed in the study. In spite of these unavoidable limitations the study was able to bring out the variations in violence across different sub groups of population in this community.

One significant finding of this study is that violence if it happens, will mostly start within the first year itself, after which the risk of violence beginning reduces substantially. The risk of experiencing of violence declines in the ages after 35 years, when the role as well as status of the woman in the family is substantially changed. Also there is small evidence, which makes us believe that the younger generation in the sample is experiencing more violence than the older ones, i.e. domestic violence appears to be increasing in current times.

Aggravating Factors

Reasons cited for violence were mainly related to woman's domestic role - not doing chores like cooking or keeping household items in an unsatisfactory manner. The situation was found to be more aggravating if the husband had a drinking habit. Thus, alcoholism is coming out as a significant factor responsible for domestic violence in this community. Husbands were involved in 79 percent of violence reported during lifetime, while in the remaining cases the husband's family members and relatives were responsible for it.

Among those who reported violence in the last one year, 38 percent were experiencing it every day. On the whole, 94 percent of these women are experiencing violence atleast once in a month. In many of these cases the intensity of violence was such that many of the victims had to seek medical care and even hospitalisation in some cases. This necessitates the need to equip the health care system to cater to their needs and to sensitise the medical community about this whole issue of domestic violence. The role of the husband and of alcoholism as a factor is again very clear in the case of incapacitation. Added to this is the finding that about 5 percent of the women in the community have attempted suicide due to violence. These cases also require medical and psychological treatment, showing the necessity of access to these types of services in any population. This is only a part of the larger issue, as we do not have information on women who did not survive the suicide attempt. Anyway, domestic violence is a major reason for suicide among married women.

Responding to Domestic Violence

The women experiencing violence were often helpless as we found that 60 percent of women did not do anything during the last episode of reported violence in their lifetime. They mostly think that nobody will listen to them, it is a family matter, it won't improve even after that, and other custom related beliefs. Sizeable proportion of them shared with their natal family members and marital family members. Unwillingness to respond to violence could be due to her low status in the family as well as household. Apart from changes in socio-economic status of women, changes are expected to happen in mindsets of public to make them aware of causes and consequences of domestic violence and make them speak openly about this. As one can expect in this atmosphere the nature of help sought was mostly informal. In fact the informal intervention is coming out to be effective in a considerable proportion of women. Therefore the role of informal interventions should not be underestimated. However women should be encouraged to adopt formal interventions in conjunction with informal interventions, wherever available, to strengthen the support she needs. Also the community as a whole has to be sensitised about violation of rights within marriage and about the existence of various formal mechanisms that are available in or near their locality.

Introduction

Violence against women is increasingly being recognized as a crucial public health and human rights concern. It is an almost universal phenomenon, differing only in scope from one society to the next and cutting across boundaries of culture, class, education, income, ethnicity and age. After efforts spanning the last two decades, women's struggles across the world made headway in placing women's rights issues on the International agenda. This found expression in international milestones like the Convention on the Elimination of All Forms of Discrimination against Women (1979); World Conference on Human Rights, Vienna (1993); International Conference on Population and Development (ICPD), Cairo (1994), appointment of the UN Special Rapporteur on Violence against Women in 1994 and the UN Fourth World Conference on Women, Beijing (1995) which addressed the issue of violence against women. The United Nation's General Assembly passed a Declaration calling on member states to "pursue by all appropriate means and without delay a policy of eliminating violence against women" (U.N. resolution 48/104). This Declaration is the first international human rights instrument to deal exclusively with violence against women, a groundbreaking document that became the basis for many other parallel processes.

Yet the fact remains that there is no universally accepted definition of violence against women. Some human rights activists prefer a broad-based definition that includes "structural violence" such as poverty, and unequal access to health and education. Others have argued for a more limited definition in order not to lose the actual descriptive power of the term (Heise L et al, 1994). The UN Declaration against violence against women (1993) refers to it as 'an act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life. Violence

against women is understood to encompass, but not be limited to: physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation; physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution and physical, sexual and psychological violence perpetrated or condoned by the state, wherever it occurs.

Thus, gender based violence includes a host of behaviours directed at women and girls due to their sex. It is a cycle of abuse, which continues to manifest itself throughout women's lives. At the beginning of her life, it takes the form of sex selective abortion or female infanticide. During childhood it may take form of selective malnourishment of girl child, lack of access to medical care and education, incest, female genital mutilation. As she grows older, it could take form of early marriage, forced prostitution or bonded labour. Some women continue to be victims of battering or rape or even murder at the hands of their intimate partners. Other violations include forced pregnancy, abortion or cultural practices like dowry related violence or sati. Even elderly women may be victims of abuse during the later years of their lives.

Besides the harmful and extensive impact of violence against women on their physical and mental health and its recognition as a public health priority (*WHO, 2002*) such ongoing violence also poses a serious impediment to women's development in general. When women are faced with violence, they are unable to fully participate in activities related to environmental, economic, social and political development.

In India, it was the women's movement, which was responsible for bringing the issue of violence against women into the public discourse. The recognition of gender as an issue forms the basis for India's women's movement. It was within this milieu that in the late 1970s and early 1980s, autonomous women's groups developed around issues of rape and bride burning (Patel, 1985). The groups also addressed issues like sexist depiction of women in the media, sati, female infanticide, harmful contraception, sexual harassment of young girls and women in public places and trafficking (Patel, 2002). These prolonged efforts of women's movement through mobilizations and campaigns bore fruit when gender issues were placed at the centre stage of the political agenda and the State was forced to respond by enacting a myriad of laws and amendments. Significant among these were amendments in the sections in the Indian Penal Code (IPC) dealing with rape, the amendments to the Dowry Prohibition Act of 1961, amendments to the Immoral Traffic (Prevention) Act, 1988, the Commission of Sati Act, the Maharashtra Regulation of use of Pre-Natal Diagnostic Techniques Act, 1988 amongst others. While the campaign for legal reforms was the most visible campaign led by the women's groups across the country, the declining impetus of the women's movement led to many gaps, which found their way into the final making of these laws. (Agnes 1994; Agnihotri & Mazumdar, 1995) In spite of such beginnings over the years, the women's movement in India has been unable to establish a sustained 'national' presence. Groups continue to engage in issue-based work within their respective geographical niches.

Domestic Violence

Of the various forms of violence against women, one of the most common forms is that perpetuated by a husband or intimate partner. Domestic violence or intimate partner violence or spouse abuse accounts for 5 percent of disability adjusted life years (DALYs) lost to women of reproductive age in demographically developing countries (World Bank, 1993). It is a complex and a multi faceted problem, grounded in social, political, cultural and economic reality. In spite of being a health, legal, economic, educational, developmental and above all, a human rights issue, the family is believed to be sacrosanct and is functioning beyond the purview of public debate and questioning. Family matters are regarded, as 'private' and outside interference is not admissible.

Domestic violence or family violence or wife abuse or wife battering has been defined differently by different researchers. Gelles (as quoted in Madhurima, 1996) has defined family violence as day to day patterned and recurrent use of physical violence like pushing, slapping, punching, knifing, shooting and throwing objects by one member of the family at another.' (Pagelow, 1984) defined it as 'any act of commission or omission by family members and any condition resulting from such acts and inaction which deprive other family members of equal rights and liberties and/or interfere with their optimal development and freedom of choice.'

Ahuja (1987) defines domestic violence as 'wilful striking of wife by a husband with or without an injury', thus limiting violence to acts of physical violence. Sriram & Bakshi, 1988 (as quoted in TISS) defined it as 'any form of mental and physical cruelty to married women by family members.' According to Maydeo, 1990 'domestic violence is the violent victimisation of women within the boundaries of family, usually by men to whom they have been married or with whom they have a marriage like relationship. Violence can be both physical and psychological indicating aggressive behaviour toward not only the physical well being but also the self respect and self confidence of women'.

Another study was carried out by Bhatti (undated) at the NIMHANS, Department of Psychiatric Social Work, Bangalore, defined family violence as "an act performed by a family member to achieve the desired conformity which carries negative emotional component". Family violence included physical, verbal, social, emotional and intellectual violence.

Taking all these into account, the study defines domestic violence as 'physical/psycho-social/economic violence against an ever married woman, aged between 15-49 years, occurring in her marital life within the matrimonial home.

Magnitude and Nature of Domestic Violence

In spite of the constraints in comparing prevalence estimates within and across settings partly due to differences in study methods, the inconsistency in the way violence is conceptualized, measured and reported, the available data shows that domestic violence is a pervasive phenomenon. In 48 population-based surveys from around the world, 10-69%

of women reported being physically assaulted by an intimate male partner at some point in their lives. In large national studies, the range is between 10-34%. A WHO review of national studies on women who said they had ever been physically assaulted by an intimate partner showed figures ranging from 20% in Switzerland, 19.3% in Colombia, 20.8% in The Netherlands, 28% in the USA, 29% in Canada to 35% in Egypt (*WHO, 1997*). (See Annexure 1 for details).

Most victims of physical aggression are subjected to multiple acts of violence over extended periods of time. Physical violence in intimate relationships is often accompanied by psychological abuse, and in a third to over a half of cases by sexual violence. Partner violence also accounts for a significant number of deaths among women. Studies from a range of countries show that 40-70% of female murder victims were killed by their husband or boyfriend, often during an ongoing abusive relationship. (*WHO, 2002*)

A national telephone survey on violence against women in the United States showed women experience significantly more partner violence than men do: 25 percent of surveyed women said they were raped and/or physically assaulted by a current or former spouse, cohabiting partner, or date in their lifetime; 1.5 percent of surveyed women said they were raped and/or physically assaulted by such a perpetrator in the previous 12 months. According to survey estimates, approximately 1.5 million women are raped and/or physically assaulted by an intimate partner annually in the United States (*U.S. Department of Justice, 1998*). This clearly shows that 'wife beating' is a pattern and not a single event in most violent households.

In Canada, findings of the first national survey of violence against women conducted in 1993 show that 3 in 10 women reported experiencing at least one incident of physical or sexual violence at the hands of a marital partner. One-year rates of spousal violence from the 1999 General Social Survey indicate that an estimated 220,000 women (3%) with a current spouse or ex-spouse had been the victim of some form of spousal violence in the past twelve months. (*Family Violence in Canada: A Statistical Profile, 2002*).

Unofficial statistics estimate that 70 percent of Russian women experience violence

at some point in their lives. Despite these disturbing statistics, there is virtually no domestic violence intervention system or set of services to provide adequate and gender sensitive legal and social services for abused women. Moreover, there is a systematic lack of responsiveness to battered women's claims for state protection on the part of police, prosecutors, and the courts. (*Dolan, 2000*). This situation is likely to be the same in most of the developing countries, where this is an issue, which is yet to receive considerable attention.

In a paper based on a study conducted in Bangladesh with 199 women in Gazipur district near Dhaka city (*Khan M.E et al, 2000*) 72% of women interviewed reported that they were scolded, mentally tortured or physically harassed by their husband in the last one year. Some of the more common forms of violence were scolding (40 percent), slapping (44 percent) or severe beating (19 percent) and forced sex (15 percent). The women were also mentally tortured by not allowing them to meet with parents or other near maternal relatives (24 percent), by criticizing their work (21 percent) or looks (10 percent). This paper clearly brings out the high prevalence of violence against women by their husbands.

Research on Violence Against Women in India

The emergence of domestic violence as a research issue is a fairly new phenomenon in India. There have been attempts from the late 1980s, mainly through the work of the women's organizations to find out the nature of the problem as well as the factors leading to its occurrence. Much of the studies undertaken, especially in the 1980s-1990s, included documenting the experiences of survivors (*Agnes, 1984; Rebello 1982; Thapan, 1995*) Women's organizations working with 'battered' women have also significantly contributed to the existing discourse (*Saheli 1986; AWAG 1986; Lata 1988*).

Agnes (1984), who studied 25 middle class and 25 working class battered women found that half of women in their sample were beaten within the six months of their marriage and having children did not decrease the violence. This study mainly recorded physical and sexual violence against women. In another similar study, *Rebello (1982)* surveyed 50 (30 rural and 20 urban) battered women in South Kanara district of Karnataka. Her findings are also similar, that the existence of wife beating cuts across the classes, educational levels, age

groups, religion, duration of marriage, number of children, type of marriage (love or arranged), dowry paid in marriage, type of family (joint or nuclear), alcohol intake by husband and the occurrence of extra-marital affairs by any spouse. But these two studies could not be generalized due to their narrow focus.

Another community-based study was undertaken with 346 women across five villages of Kheda district in rural Gujarat by *Visaria (1999)* with an aim to examine interrelations between women's education and their health seeking behaviour. Overall 66 percent women reported being subjected to verbal or physical violence in their marriage in the past and that they continue to experience it. Nearly 42 percent of all women, reported having experienced domestic violence which was more than just a heated verbal exchange between spouses but which involved physical assault by the husbands on the wife. Remaining 23 percent of the women reported that they have been periodically scolded or subjected to abusive language by their husbands and taunted as "good for nothing", or have been threatened to be locked up in the house or not allowed to move out, but have not been physically beaten by their husbands. Of those experiencing physical violence, slapping was reported as the most common form of violence. Hitting with any object was another common form of violence experienced. Sexual assault was reported by 10 percent of women. *Jeejebhoy S (1998)* studied the prevalence of domestic violence in the two states of Tamil Nadu and Uttar Pradesh amongst 1842 women aged 15-39 years from two districts each of UP and TN. The study findings revealed that 36-38 percent of Tamil women and 42-48 percent of women from Uttar Pradesh suffered beating by their husbands.

A community based multicentric study was undertaken by INCLIN (*INCLIN, 2000*) across 7 sites in India (Bhopal, Chennai, Delhi, Lucknow, Nagpur, Thiruvanthapuram, and Vellore). This study covered 9,938 households with each family having at least one woman between the ages of 15 and 49 & having at least one child from three strata - rural, urban slum, and urban non-slum over these seven sites. The findings of the study indicate that 43.5 percent reported at least one psychologically abusive behaviour and 40.3 percent reported experiencing at least one form of violent physical behaviour. One out of every four had experienced slapping, kicking, hitting, beating,

threat or use of a weapon, or forced sex in the last 12 months.

The National Family Health Survey (NFHS-2) for the first time attempted to measure the prevalence of violence against women including domestic violence but not limiting it to violence committed by a woman's husband. The all India figures showed that 21 percent of ever married women in India have experienced violence since the age of 15 years. According to the survey 19 percent have been beaten or physically mistreated by husbands 2 percent by in-laws and 3 percent by other persons. Level of violence was reported to be higher in rural areas than in urban areas, nuclear households than in non-nuclear households, working women than in non working woman, non-educated than in educated and in low standard of living category women than in high standard of living category (*IIPS and ORC, 2000*).

NFHS II also gives state wise information, which shows 18 percent of ever married women in Maharashtra have been beaten or physically mistreated since the age of 15 years (*IIPS and ORC macro 2001*). The risk of experiencing the same was lesser in Mumbai (10 percent) than in rural areas (19 percent) and other urban areas (17 percent) of the state. But within Mumbai the prevalence of physical violence was higher in slum population (13 percent) than in the non-slum population (6 percent).

All these studies suffer from under reporting of domestic violence. This under reporting occurs purposively or in an unintended manner as women themselves are unable to perceive several acts of husbands and marital family members as a form of violence an example of purposive under reporting due to fear of reprisal from husband. *Rao and Bloch, (1993)*, studied 170 women by taking 100% sample of potter community in three villages in rural Karnataka. They found that 22% of women report is being assaulted by their husbands, while 12% reported being beaten on the average 2.65 times in last one month. From their informal interviews and ethnographic data they concluded that prevalence rates are "vastly under-reported".

There are also class/caste differentials in domestic violence (*IIPS and ORC macro, Jeejebhoy 1998*). In the paper of *Mahajan A, 1990 (as quoted by Heise, 1994)*, it was found that 75% of scheduled caste men admit to beating their wives while only 22% of higher

caste men admit to beatings. (Mahajan 1990) Further, 75% of scheduled caste wives reported being beaten frequently. But here it would be due to economic hardship rather than the caste factor, which is not explored in the study.

In another study conducted in Chandigarh by *Madhurima (1995)*, 200 men and women across different classes were studied to find that about 44 percent husbands' resort to withdrawal, 69 percent resort to psychological violence, 71 percent to verbal violence and 34 percent to physical violence against their wives.

Sathyanarayan Rao and his colleagues (1994) from the Department of Psychiatry in the Medical College at Mysore studied 230 urban middle and upper class women who were married and had lived with their partner for at least a period of one year. Predominantly in terms of psychological and emotional violence, the commonest problem reported was ignoring one's feelings (20 percent), refusal to work (14 percent), humiliation in public (13 percent), withholding of affection (12 percent) criticism/shouting (12 percent), ridiculing of her values or beliefs (11 percent), refusal to socialize with her (10 percent), controlling money or decision making (10 percent). Women's dominant reaction to violence was found as seeking permission to spend money and for socialisation (33 percent) and watching the mood of husband (31 percent). The main causes for violence given by women included financial problems (65 percent), stress at work (43 percent) and jealousy (40 percent). The authors opine that this study validates the position that 'women victims view their own self esteem as linked with their ability to satisfy the needs and desires of others, and thus see themselves as inadequate or bad if men beat them.'

These studies clearly bring out the fact that in spite of the cultural context within which domestic violence thrives, it is an all-pervasive phenomenon which has assumed endemic proportions in the Indian society.

Factors Associated with Domestic Violence

In addition to studying the prevalence and forms of violence, various studies have also sought to identify factors associated with the occurrence of violence. These range from studying the immediate antecedents of violence, the apparent causes that sparks off the violence as well as studying the underlying motives behind act/s of violence. We will

examine this in some detail with respect to studies undertaken in the Indian context.

Studies found that women identified lapses in fulfilling their responsibilities (cooking, attending to the household, looking after children) as important factors influencing the occurrence of violence (Ahuja 2000, Visaria 2000, Jeejebhoy 1998). Sexual control was mentioned as another area of conflict. At times, women also attributed violence to infidelity. Conflict over amount of dowry was another reason cited (Ahuja 1998; Mazumdar 2001). Drunkenness on part of the husband was another common event precipitating domestic violence (Jeejebhoy 1998; Warriier 2000; Visaria 2000). Using material from interviews conducted with middle class and upper middle class women in Delhi, belonging to different regional and professional backgrounds, *Meenakshi Thampam (1995)* examined images of body and sexuality in women's oppression - particularly psychological and emotional violence, in nuclear and joint families. In the situation of psychological violence, she concluded that women's femininity gets defined largely in terms of their body-shapes, their sexuality, and their inability to conduct themselves within the dictates of a normative femininity. Women too join together with their oppressors by accepting prevailing definitions of femininity and the female body which they translate into their own ideals of femininity so that its oppressive nature remains hidden even to them. Here one should not blame the women as this is an indirect effect of patriarchal setting in the society. Lastly she concluded that women were helped in maintaining and beautifying their bodies and therefore in the perpetuation of their oppression, by an extremely competent system of cultural norms and practices that seem to exist for this purpose. She suggests that there is a need to explore the possibilities of an autonomous perception of femininity which is not geared to the gaze of the other but is an expression of a woman's innermost self.

Agnes (1984) reported that the immediate cause of violence was arguments over money, jealousy and suspicion about woman's character, instigation by in-laws, housework, woman's desire to work outside home or her high esteem, disputes over children and extra-marital affairs of husband. Similar findings were reported by Rebello (1982) who stated that the immediate causes of beating included husband's drunkenness, demand for money

from wife, conflict on household expenses, forcing sexual intercourse, suspicion of wife's infidelity, disputes regarding decision making, husband's affairs with another woman etc. Issues identified by her as the roots of the problem are religion and culture which have strictures against women and give them low status, legal system and mass media which are insensitive and pitted against women, the patriarchal family structure, the frustrations experienced in the class society and attitude of the family and neighbours towards the wife beating.

Women's Response to Violence

So far, we have looked at the magnitude and nature of domestic violence and factors precipitating its occurrence. Given the fact that domestic violence is not a one-time event but a pattern which continues over a period of time, it is essential to understand how women respond to such ongoing violence. Women have adopted multiple strategies to respond to such experiences of violence. The strategy adopted would depend upon the individual's perception of the violent situation. A variety of factors – economic, psychological, cultural and social – influence a woman's response to a violent relationship.

Ahuja et al (2000) in the multi centric study stated that women reported seeking help from a wide range of people and institutions. Predominantly women approached their natal family for assistance and 91 percent considered this source 'helpful'. Rarely (<2 percent of the sample) did women report seeking help from institutions such as woman's organization, the police, a health care setting or any local official. For those women continuing to face physical violence and yet not seeking help, their reasons for not doing so were inquired into. The most common reason reported for staying with their husbands was the perception that violent behaviour is 'normal' in a marital relationship (58 percent). Economic situation and issues related to family honour were some of the other issues, which restrained the woman from seeking help. Visaria's (1999) study showed that out of 147 women who reported being beaten by their husbands, nine out of ten women reported that the violence was not intense enough to seek medical attention or intervention. Of those more seriously hurt, only 38 percent sought treatment. This study also showed that three out of five women did talk to someone about the beating by their husbands. The rest however, continued to

suffer in silence and were too shy or ashamed to even mention it to others. Those who did share their experiences mainly did so with their neighbours while others shared with family members. The remaining 41 percent who did not share their experiences with anyone were silent due to 'family honour' or as 'fingers would be pointed to their husbands'. Factors such as parents poor economic situation, social traditional beliefs that women must endure some discomfort or hardship in the marital home and unwillingness to depend on natal family were other reasons put forth by the women. Visaria goes on to suggest that in the present Indian rural setting, solutions to much of the domestic violence must be found within the family setting and the community. She suggests that one of the possibilities, which need to be explored, is the formation of women's groups within the community to combat violence.

Jeejebhoy's (1998) study also showed that over three in four women consider wife beating as a justifiable form of behaviour. Not only that, but wife beating is considered a 'right' form of behaviour in a variety of settings. This study concludes that wife beating is not only deeply entrenched but also that attitudes uniformly justify wife beating and few women would opt out of an abusive marriage. Study concludes on note that urgent policy initiatives are needed to combat violence both at preventive and remedial level. Breaking the cycle of violence would require efforts across multiple sectors.

Rebello also looked into the reasons why battered women continue to live with their husbands and believes that the only hope for removing battering is unity and struggle by all women for their rights. Quoting from the case studies done by the Women's Centre, Lata (1998) explains the need to seriously take into account, in addition to physical violence, the mental/psychological violence, emotional violence, neglect and sexual abuse. Research also suggests that the society ignores the violence under the pretext that it is a punishment for infidelity, that it takes place only in the poor and uncultured families, that home is the only safe place for women and to say that it is unsafe is ignored and that women actually ask for such violence through their behaviour.

Mahajan (1996), shows that analysis of coping strategies or behaviour adopted by women to deal with the abusive relationship

reveals that their reactions were depression, along with a feeling of helplessness and powerlessness. A majority of them did not share their experiences even with their relatives and friends. Only one fourth of them, shared this with their informal group. Only 16 of them sought help from any formal agencies.

Community Response to Domestic Violence

A few studies also tried to examine the response of women on the issue of domestic violence. The study by *Poonacha and Pandey (1999)*, examines state, collaborative, NGO and community based initiatives addressing domestic violence in the two States of Karnataka and Gujarat. It was felt that both the state and the voluntary sector have actively promoted interventions in a few key areas like public policy, law enforcement, family counselling, shelter and short stay homes and self help collectives. This study concluded that the government run initiatives are more of a short term nature while those adopted by the NGO sector seek to increase political and preventive and long-term, pursuing consciousness-raising sessions and the economic and social empowerment of women, underscored by the goal of gender equality and the prevention of domestic violence. Similar trends were seen by Mitra in cross sectional survey of various actors involved in intervention on domestic violence in the states of Madhya Pradesh and Maharashtra. Mitra (2000) too, found that the NGO community had adopted a multi pronged approach to domestic violence, spanning preventive, supportive and rehabilitative measures. She has also identified some parameters of best practice, which appear to be critical in evaluating responses to violence against women.

Of the several women's organizations working with battered women, the Saheli group in Delhi (1986), felt that the pattern of violence differs from one class to another. At the *basti* level, there is nothing private in a husband beating his wife as half the neighbourhood is witness to the act. If the husband is an alcoholic or a womaniser, there is always a lot of sympathy for the wife and the neighbours often reach out and help the wife by stopping her husband. But if they perceive the husband as a decent sort of man, with no major vices, the blame is usually laid on the wife, basically because wife beating is considered legitimate. In the upper and middle classes, where privacy of both emotions and acts is given a very high priority, the situation is very different. Very

often, no one else - even in the house - knows what is happening. The first time when a wife confides in a friend or relative, it is received with stunned silence and disbelief, accompanied with the usual set of questions - "but he is so educated", "so well employed", "not excessive in his habits", "so respectable", etc. One levelling point between all these classes (if the husband is not an alcoholic/womaniser or has no other social vice) is the attitude that the wife must have provoked the husband; it could not be all his fault - which in other words is the overall acceptance of physical violence towards the wife. Experiences of working with women revealed that an odd slap or a kick now and then was not perceived as something major; a lot of women who suffered physical abuse were willing to continue to suffer provided he would change his other habits and none of the woman perceived it as an act which was to be condemned unequivocally (Jesani 1998).

The study by Agnes (1984) reveals that most women did try to find some assistance, which included, going to parents' home, staying with friends, staying alone, seeking advice of counsellors and religious heads, complaining to police and going to rescue homes.

Thus, it is clear that the social, economic and political barriers often limit a woman's response to violence. While a few women actively seek help, others continue to remain in violent relationships. Women allude to similar reasons to continuing to live in such relationships. These include: fear of retribution, lack of other means of economic support, concern for the children, emotional dependence, lack of support from family and friends, and an abiding hope that "he will change". Unacceptability of being single is mentioned as an additional barrier that keeps women in destructive marriages especially in developing countries. Denial and fear of social stigma also tends to prevent women from reaching out for help. Those who do reach out, do so to family members and friends alone. (*Population Report 1999*)

To **conclude**, there is growing literature now available on the different dimensions of domestic violence but we also see a trend of increased prevalence and intensity of violence. Somewhere this is linked intrinsically to the increased violence in society as a whole, wherein women are getting targeted. For instance the genocide in Gujarat is a well-

documented recent example of the violent physical and sexual abuse women, especially of the minority community, faced apart from the psychosocial impact, which women have now been facing for ages.

This needs to be conceptualised within the patriarchal framework, which governs society. And this is more so for domestic violence that happens in the intimate environment of the home, which is the first and most difficult

bastion of patriarchy. Thus, the fight against domestic violence has to deal with patriarchy and hence we have to include men in dealing with domestic violence if we want change in the present disposition.

The present study is only a small step in the direction of adding to our understanding of domestic violence and we hope this will contribute towards the leap we need to take to tackle patriarchy itself.

Background of the Study

The review of literature reveals that various studies have been conducted on the issue of violence against women including domestic violence. However the few studies that seek to understand women's perceptions of nature of domestic violence, its various forms, causes, how they cope with such violence, the help-seeking behaviour adopted by them and community response to domestic violence in an urban slum community have been based on very small samples. Keeping this in mind, the present study has been undertaken. This study focuses on domestic violence experienced by ever-married women aged 15-49 years.

The specific objectives of the research study are:

- To study the levels and correlates of domestic violence against women in an urban slum community.
- To identify the causes and perpetrators of domestic violence
- To examine the help seeking behaviour and other coping mechanisms adopted by women to counter domestic violence.

Community Profile

The place of study comprises of Area 'A', Area 'B' and Area 'C'; all situated adjacent to each other in one of the eastern suburbs, falling within the limits of the 'L' ward of Greater Mumbai. The total ward population as enumerated in the 2001 Census is 7,74,812 making it the third most populous ward in the city. The sex ratio (females per 1000 males) for the ward is 758 while the literacy rate is 86 percent. In terms of sex ratio and literacy rate – the ward is ranked low as compared to the other wards in Mumbai. This area was selected as CEHAT had already conducted a research study on women's reproductive health and general morbidity in parts of this community. While interacting with the women during the earlier study, instances of violence had come to the fore but the earlier study did not focus on violence.

The seventies have seen this area develop from a 'forest' or 'agricultural land' or '*wadi*' to being an industrial and commercial centre. With the growth of small-scale industries and factories in the area, the land was cleared and used to provide homes for the workers. Initially, the land on the 'main road' was cleared, while the inner area was used to build '*pucca*' or '*kuccha*' rooms. Many workers shared a single room. Much of these structures were 'ad hoc', not well planned and no basic amenities were available. Thus, factories and private builders with political influence gradually occupied bits and pieces of the land and slums developed to house the rural migrants. Gradually, these homes were sold and the families moved into inner areas. There was a tactical agreement that in turn, the builders would develop these inner areas. Therefore, the parts of the community, which developed later, were much better planned. The individual migrant workers were gradually joined by their families, who are now settled in the community for varying duration of time. In most cases, the residents have bought or rented rooms in chawls without the necessary amenities of water, electricity, toilets and drainage. Families who have settled here over the years have gradually converted their '*kuccha*' houses into '*pucca*' ones.

The effects of economic decline began to be felt by early and mid 80s, with the slowdown in the economy and the gradual closure of the mills functioning in the locality. This led to a decline in employment in the organized sector and work was diverted to the informal sector, where small-scale units were set up. Some of the once thriving mills were let out to be used as offices or small-scale units. What we find now are small informal units of assembling, packaging and garment industries in and around the slums. Substantial part of the community is employed as casual workers or is involved in home-based jobs. Today, one sees that much of the community is organized along the lines of chawl committees. A group of families residing close to each other and/or having a common owner with a formal or

informal leader consider themselves as a local body. Some chawls are small in size while others are fairly large. Parts of the community occupy land belonging to the airport authorities and are uncovered by protective legislation, making them susceptible to threats of eviction and harassment. The situation is accentuated, as there is no clear policy available for slums built on land other than municipal land, i.e. unauthorized occupation of private and Central Government land and that of other bodies such as airport authorities and the railways.

Households in the Study Area

A baseline survey undertaken by CEHAT in 1999-00 in these three areas enumerated the total number of households and individuals, their socio-demographic profile, and the state of civic amenities such as water, toilets, electricity and sanitation in the area. In all the survey covered 1729 households covering a population of 8383. Survey results identified the following household characteristics.

Regional and Religious Configuration in each Community:

The ethnic composition of the area is mixed. Almost 50 percent of the population hails from the state of Maharashtra. There is a sizeable presence of migrants from Uttar Pradesh as well as the Southern states. Some area wise variations can also be seen. Some locality specific trends do emerge. Majority of the people in 'Area A' are from Uttar Pradesh or South India, especially Andhra Pradesh and Karnataka. On the other hand, families in 'Area B' and 'Area C' are predominantly from Maharashtra, while some regional segregation is also seen. We also find a small number of Christian and Neo-Buddhist population in this area.

Majority of the population is Hindu. 'Area A' has a population of around 40 percent Muslims and 60percent Hindus. While 'Area

B' predominantly has Hindus, 'Area C' has a mix of Hindus, Muslims and Christians.

State of Civic Amenities:

Like other slum communities in Mumbai, this area is also characterized by dismal state of civic amenities. Just over half the population interviewed, has water taps within their own homes. The other half relies on community taps (i.e. common tap in the chawl) or the 'municipality tap' for water supply. However, the water is available for 24 hours and is fairly good compared to other communities of the same socio-economic level/strata.

The latrine facility in the area is extremely poor. Very few families have latrine inside their house and majority of the population utilizes public toilets. Specifically, in 'Area A' and 'Area B', there are 12 toilets of which 6 are meant for men and 6 for women. But often, they are either non functional or 'choked.' This is especially true for the ladies toilet. In some areas the community has organized themselves, contributed and built private toilets, especially in 'Area C'. Each family contributes Rs. 10 – 12 on a monthly basis towards its maintenance. Children on the other hand use the nearby playground for defecation. The limited community latrines that exist are also not connected to the main sewage line. The sewage is disposed off in an open canal. There is a lack of a proper drainage system and what exist are narrow open drains built along the houses. Garbage disposal system is also extremely poor with the garbage once again dumped in the canal. There are no garbage bins. The garbage is thrown in the gutter or the canal. This leads to clogging especially in the monsoons and the dirty water enters people's homes.

The methodology adopted in the present study to examine intra-family violence in the above urban poor community is presented in the next section.

Methodology

The present study on domestic violence forms part of a larger women-centred community health programme - 'Aarogyacha Margavar' established in one of the slums in an eastern suburb of Mumbai. As a part of this health programme the community in the project area has been mapped through a baseline survey in the year 1999-2000. Through a household questionnaire, information related to family composition, availability and the state of civic facilities was gathered from all households in the project area (See section on Households in the study area). Apart from this, women's perceptions about violence - its nature, causes, effects, their help seeking behaviour and community response to domestic violence has been documented through informal group discussions. A total of nine group discussions were conducted with sixty-three women from the community (See Annexure 2) From the base line survey data, the groups for the informal discussions were selected using mother tongue, education, occupation and duration of marriage of women as strata to capture all categories of women. The discussions were conducted in Hindi, Marathi or Tamil, the three predominantly spoken languages in this community. At least three sessions each of approximately 90 minutes duration were held with each group. This enabled the researches to have a prior understanding of the general information of domestic violence, their beliefs, attitudes and perceptions about the same in the study population.

Based on insights from the above base line survey and informal group discussions, the present study was designed to address issues of domestic violence through a systematic, quantitative survey of prevalence, forms and problems related to domestic violence. Baseline survey information on households formed the sampling frame for this study. Information gained from the informal discussion served as a base for designing this survey questionnaire and in interpreting the quantitative research findings to some extent.

Questionnaire

A structured questionnaire was designed to elicit information from ever-married woman aged 15-49 years about the nature of domestic violence, its forms, prevalence, frequency and causes. It also helped comprehend who was or were the perpetrator/s of violence, coping mechanisms adopted by women and their help seeking behavior. Given the sensitive nature of the subject under study and to account for under-reporting, along with the questionnaire a probe list (See Annexure 3) was used when women said that they had not experienced any forms of violence. Question on whether each of these abusive behaviors has taken place during their marital life was addressed to all the respondents, including the ones who have reported violence without probe.

The questionnaire was pre-tested in another slum area. Pre-testing of the Marathi protocol was done with community health workers working on health and women's issues through another community based non-governmental organization (NGO) in an eastern suburb of Mumbai. The Hindi protocol was pre-tested with the community health workers and members of the study team who would not be eligible for selection. In all 10 interviews were conducted. Based on feedback received and experiences during pre test survey, changes were made in the questionnaire. The survey protocol, cover letter about CEHAT was finalized after discussion with the project consultants, members of the Peer Review Committee (PRC) - an internal peer review group in CEHAT. Ethical clearance was obtained from the Institutional Ethics Committee (IEC), an external body that reviews ethical issues for all the research studies conducted by CEHAT.

Sample

Information from the base line survey, which had listed 1729 households in the study area, was used for selecting ever-married women aged 15-49 years for this study. Thus, the study universe comprised of 2105 ever-married women in the age group 15-49 years

living in these households. We decided to interview about 600 women, to enable us to capture the various aspects of domestic violence in the study population in detail. Adjusting for non-responses it was decided to select every third woman from the universe to attain the required sample size. During this process 571 women were found to be eligible for the survey. Since there was a two-year gap between baseline survey and present survey, the non-response due to 'respondent not found' was higher than expected. A sizeable number of households had shifted from this area during this period. The new households, which came in as replacement, were not included in the survey. Of these 571 women, only 496 were presently residing in the area.

The study was explained to all of the 496 women selected and consent to participate in the study was obtained. Out of them only 424 women agreed to participate in the survey, that is 72 women refused to participate in the study. Therefore the refusal rate was 14.5 percent. Thus this study is based on information collected from a sample of 424 women using a systematic random sampling procedure.

Training of the Research Team

An all woman research team, comprising of researchers, field investigators and a research assistant, carried out the fieldwork. Given the complex and sensitive nature of domestic violence and its potentially distressing nature, at all stages of data collection a thorough training of the research investigators and the research assistant was conducted. The training included perspective building, developing a basic understanding of the research process, biases in research and how to minimize the same, objectives and importance of each stage of the study, methods of data collection to be used, recording of data and field experiences and the inherent ethical issues. Rapport building techniques, interviewing skills, crisis handling were some of the skills imparted. Training techniques included lectures, role plays and discussion. The team was also trained to handle their own emotions and experiences relating to violence and at the same time conduct the interview in a non-judgmental manner.

Data Collection

The interviews were conducted in a pair, with one member of the research team functioning as an interviewer and the other as a notetaker. As far as possible, attempts were

made to carry out the interviews in a language the woman was most comfortable expressing herself. The interviews were conducted in Hindi, Marathi, Gujarati and Tamil. In terms of the survey, initially we expected to conduct on an average six interviews a day. However, we fell short of this target, as the investigators were sometimes not able to find the respondent woman due to reasons such as the migration of entire households to another area, temporary absence of the respondent at the time of the visit, or the inability of the investigators to communicate in the language of the respondents. Interviews had to be re-scheduled when husband or neighbour or any other member of the household insisted on remaining present while the interview was being conducted. Also, there were delays in the study, especially data collection with Tamil-speaking women due to unavailability of Tamil-speaking investigators. Period of data collection was from July 2001 to December 2001.

Data Analysis

After preparing the coding frame, data was computerized and analyzed using Statistical Package for Social Sciences (SPSS) software package. The responses to the open-ended questions and narration made by the women during the course of interview were transcribed and translated separately. Content analysis of the same was undertaken and used to substantiate findings from quantitative analysis.

Ethical Concerns

As the study focused on domestic violence at the community level, various ethical concerns both for the participant and the study team had to be addressed during the course of the study. These were:

1. Ensuring confidentiality of the participants: The identity of the potential respondents was only known to the research team and not revealed to any other person. Only the research team had access to any kind of information obtained.
2. Ensuring voluntary participation in the survey: Informed consent was sought from the participant before the survey. Each respondent was given a letter stating the objectives of the study, pros and cons of participation, process of selection etc (Annexure 4). The decision to participate was solely left to the woman and she could

refuse to participate in the study or respond to particular question/s raised.

3. The need for privacy while obtaining this sensitive information was also adhered to. At all times, efforts were made to ensure that the discussions and interviews were held at a time convenient for the woman and at a safe and convenient place. It was consciously decided that no interview would be held in the presence of any family member.
4. Issues arising in relation to disclosure of violence by the respondent: The emotional discomfort caused to her on having relived through these experiences in course of the interview or a situation where the respondent approaches the investigator or team after an episode of violence was a critical ethical issue. It was felt that the team should be prepared to address such needs, if they arose. It was decided that one of the team members (from the community health programme) who was a counsellor would provide immediate counselling support to respondents if they so desired. Depending on individual cases, an assessment would be made and as and when required appropriate referral and follow up would be undertaken. Furthermore, informal support mechanisms with the municipal dispensary, health post, municipal hospital, lawyers, women's organizations, crisis centre, police station, counselling centres, community representatives and all relevant stakeholders were established. The research team also maintained the information database of availability of such services.
5. Reaction from family members and the community and the respondent being asked questions like "Who the research investigator was, why did they come, why did they insist on talking to her alone, what did they ask her, what did she say": In order to mitigate such risks, and also ensure the safety of the participant as well as the research team, given our background of community health work in the community, it was decided that the survey would be introduced to the family and community as one which deals with women's marital and familial life experiences. And further information would be provided as part of the consent procedure once the respondent

and interviewer were alone. Also, prior to commencing the household survey, meetings explaining the purpose of the survey would be held with community representatives. Three such interactions were held. The first with the women actively involved in the community health programme, the second with the community health workers and third with a core group of women of an emerging Mahila Mandal.

Major Limitations of the Study

While this study intends to add to the existing discourse, it has certain limitations.

- Since the study is based on self-reporting, the sensitivity and stigma associated with violence may have led to underreporting and non-response.
- There was a gap between the baseline survey and the commencement of the survey. Internal and external migration of households had taken place during this period and hence there were some problems encountered during the study.

Characteristics of the Research Participants

The background characteristics of 424 ever-married women who participated in the study are presented in Table 3.1. A large proportion of them (42 percent) belong to the age group 30-39 years followed by those in the age group 15-29 years and 40-49 years, respectively. Average age at marriage of 17.6 years, shows a low age at marriage. The average duration of marriage was 16.5 years. The average age of respondent was 33 years, while average age of respondent's spouse was 37 years.

In terms of educational attainment, 38 percent of the respondents were educated up to middle level (i.e. 5-9th standard). It is to be noted that about 18 percent of women had completed high school or attained higher levels of education. Therefore, the overall educational level of these women is higher than the state average. The educational level of spouses also showed a similar trend.

Occupational status of women showed that 72 percent of them are non-earners. Since majority of the women are non-earners, the occupational status of husband is a better indicator of economic condition of household. About 43 percent of the spouses were daily wage earners. Another 20 percent each were having a permanent job or own business

respectively. Occupational characteristics show that the community is predominantly lower class with a sizeable concentration of lower middle class population.

Presently more than half the respondents are living in a nuclear family. Religious composition showed 73 percent of them were Hindus. Muslims and Buddhists were the other communities residing in the area. About 47 percent of the women were from the state of Maharashtra. There were a sizable proportion of people from the state of Uttar Pradesh and from South Indian states.

Refusal Rate

The sensitive nature of the subject under study and the fact that violence itself can be a reason for non-response required us to study the profile of non-respondents in a more detailed manner. Table 3.2 gives the non-response rate across different subgroups interviewed. Overall, 14.5 percent (72 out of 496) women refused to participate in the study.

Age differences in refusal rate, i.e. proportion of women who refused to participate in the study is negligible. In terms of their educational level, the lowest refusal rate (5 percent) was seen for women who had completed high school (i.e. 10th standard and

above). This could be attributed to the fact that having undergone at least matriculation, they were open to participating in a study and sharing their experiences with 'outsiders'. Women's occupational profile shows that more non-earners (18 percent) refused to participate as compared to earners (7 percent). This probably has influenced the reporting of violence between these groups. In terms of religion, the lowest refusal rate was among Buddhist women (8 percent). Later analysis reveals that violence was most reported by Buddhist women. The refusal rate was highest (21 percent) among Muslim women. This needs to be borne in mind while analysing the trends seen as it may point to under-reporting of violence amongst this group.

Reasons for Refusal

Some of the women gave specific reasons for not participating in the survey, though it was not tabulated. The reasons cited by women who refused to participate in the study ranged from disinterest in the issue, lack of time, having a hectic schedule that left hardly any time for them. Many of the workingwomen were unable to find convenient time due to a seven-day week with almost 12 hours of work each day. In some cases, the husband and/or mother in law responded on behalf of the woman, saying 'she does not have any time.'

Table 3.1: Background Characteristics of the Research Participants (N = 424)

	Percentage	N
1. Age (in years)		
15 – 29	34.0	144
30 – 39	41.7	177
40 – 49	24.3	103
Mean age in years	32.9	421
2. Marital status		
Currently married	91.3	387
Single /Widowed/Separated	8.7	37
3. Mean age of spouse in years	39.0	381
4. Avg. age at marriage (in years)	17.6	424
5. Avg. age difference between spouse and respondent (in years)	6.2	409
6. Avg. duration of marriage (in years)	16.5	421
7. Education level		
Cannot read or write	32.1	136
Up to Primary	12.0	51
Middle School but high school incomplete	38.2	162
High school complete and above	17.7	75
8. Education of the husband		
Cannot read or write	12.0	51
Up to Primary	9.7	41
Middle school but high school incomplete	32.1	136
High school complete and above	37.5	159
Other (madrasa, etc.)	0.5	2
9. Earning status		
Non – earner	71.7	304
Earner	27.4	116
Others	0.9	4
10. Occupation of the husband		
Daily wage earner	43.4	184
Regular income / pensioner	20.8	88
Own business	19.8	84
Unemployed	5.4	23
11. Type of family		
Nuclear	69.1	292
Joint	26.2	111
12. Religion		
Hindu	73.3	311
Muslim	13.2	56
Christian	5.4	23
Buddhist	8.0	34
13. State of origin		
Maharashtra	47.2	200
Uttar Pradesh	22.6	96
South India (AP, TN, Kerala, Karnataka)	20.0	85
Other (Incl. Bihar, Goa, HP, MP, Gujarat, WB, Punjab, Delhi & others)	10.1	43

Note: N does not add up to 424 in all cases

Table 3.2: Percentage of Women Refusing to Participate in the Survey by Selected Background Characteristics

	Percent Refused
1. Age of woman (in years)	
15 - 29	15.8
30 - 39	13.7
40 - 49	16.3
2. Education of women	
Cannot read or write	18.6
Up to Primary	17.7
Middle School but high school incomplete	15.2
High school complete and above	5.1
3. Earning status of women	
Non - earner	17.8
Earners	7.2
4. Religion of women	
Hindu	14.8
Muslim	21.1
Christian	11.5
Buddhist	8.1
5. State of origin	
Maharashtra	16.3
Uttar Pradesh	15.8
South India	14.1
Other States	8.5
Total (N =496)	14.5

Levels and Correlates of Domestic Violence

In an attempt to understand prevalence of violence, we asked each woman whether she had experienced any form of violence in the last one year from the date of interview and during her entire married life. Experiences of various studies on domestic violence show that it is a very sensitive issue and therefore there is a tendency for the participants to under report their experiences. In order to minimize the underreporting a probe list was used when women said, that they had not experienced violence during their married life. This probe list covered, items like exerting control over movements/speech/body, all forms of physical abuse, widely prevalent forms of psychosocial abuse. As per the survey definition domestic violence would mean *“violence experienced by an ever married woman between the age of 15-49 during her marital life.”* Below we discuss levels, types and differentials of violence in this population.

Level of Domestic Violence

Results presented in Table 4.1 show that out of the 387 currently married women interviewed 17 percent women reported having experienced violence in the last one year (from the date of interview).

Analysis of violence within marriage for 424 women in the sample shows that 42 percent of women reported having ever experienced

violence during their married life, without any use of probe. When probe was used, another 22 percent reported to be experiencing violence. Therefore, the overall level of domestic violence within marriage in this population was 64 percent, which itself shows how widespread domestic violence is in this community.

Types of Domestic Violence

In this section we look into the prevalence of different types of violence. Reported forms of violence within marriage were classified into three subheads: physical, economic and psycho-social. Prevalence of these three forms of violence is presented in Table 4.2.

Physical

Here physical violence includes being hit with any objects like a stick, iron bar, slippers, or hitting with hand or foot, being pushed with an intention to cause fall or injury, burning, strangulating, choking, use of gun, knife or any other weapon among others. Physical violence would also include sexual violence that ranges from having forceful sexual relations, physically hurting the woman while having sex and forceful use of objects. Table 4.2 shows that about 33 percent of women have ever experienced physical violence during their married life. About 10 percent of the women reported physical violence during last one year.

To quote,

“... My husband used to hit me, slap me... laath marta tha... “ (Aged 26 years, educated up to 9th std, housewife, Muslim, married for 10 years)”

“...Often, when I do not give him money to drink.. he uses abusive language and hits me as well as the children.... He used to hit, kick me, insult me, everyday when I used to ask him for money for household expenses ...” (Aged 33 years, educated up to 9th std, earner, Hindu, married for 7 years)

“...My in-laws used to complain about me and then my husband used to start slapping me...hitting me with whatever came in his hands... once he burnt my hands with a hot “Chimta”.. he has done this several times... .. he used to hit me a lot. Once he hit me with a steel belt... he has also tried to burn me... has threatened to kill me... he uses abusive language, taunts me... he used to hit me, abuse me and shout at me, when I was pregnant with my second babyMy mother in law has once hit me with chappal (slipper)...” (Aged 30 years, educated up to 4th std, housewife, Hindu, married for 15 years)

“....My husband wants to sleep with me everyday... he does not consider my feelings at all... maintains physical relations against my will....” (Aged 24 years, cannot read or write, Non earner, Buddhist, married for 7 years.)

“... Irrespective of whether I want or not, he wants to sleep with me...he has completely controlled my body. I don't even have control over my own body....” (Aged 29 years, educated up to 8th std, housewife, Hindu, married for 14 years)

“He used to beat with a ... a ‘pata (belt)’ or a ‘pakad’ or with the door latch. He still keeps abusing me... pulls my hair, hits me, punches me, kicks.. ‘mundkyavar pai devun marnar’... has tried to strangulate me ‘gala dabtat’....” (Aged 36 years, educated upto 3rd std, daily wage earner, Hindu, married for 22 years)

Psychosocial

Psychological violence is the most commonly reported form of violence, experienced by about 61 percent of the women. About 16 percent reported to have experienced psychosocial violence during the last one year prior to the survey. As per the survey definition, psychosocial violence includes a wide range of behaviour like: restriction on movement or on personal choice or saying things to instil fear, insecurity leading to having a low self-image, self-esteem or making the woman feel humiliated in front of others or blaming woman for not having a son, for not

having children, for having only daughters. It would also include threats to hurt her physically or to leave her, spreading rumours about her, not communicating or keeping important information away from her, creating a sense of helplessness in her, depriving her of the need to relate and bond with other loved ones. Other forms of psychosocial violence include blaming the woman for everything that goes wrong, harassing her as she belongs to a different caste or for not getting enough dowry or for not hailing from a reputed family with a good status in society.

As women shared,

“...We used to have disagreements over economic issues – if there were Rs. 70, he used to give me Rs. 20 for buying vegetables, while the rest he used to keep with himself...” (Aged 45 years, cannot read or write, daily wage earner, married for 28 years)

“..In the early years of my marriage, all money matters were in hands of my sister in law now its with my husband... This man has a habit of quietly going and selling household items, jewellery, etc.... I have always been working... have run a mess for 30-40 people....worked as a house help... have also worked in a company... By doing all this, I have kept my household running. This man has been of no use what so ever, he has not contributed anything - *hya manasacha paach paishyacha mala phaida nahi*... When he used to work, he used to not give any money in the house. Then I got fed up and went to his company and asked one of the workers - ‘If husbands don’t give salary at home then what should their wife and children do?’. That man met the boss and told him everything. He asked us to open a joint bank account. Then, I would get the salary in my hands.... When I went to the bank, my husband used to keep quiet till I used to get the bank ‘token’ in my hand. Once I used to get it, he used to snatch it away from my hand and run. He has humiliated me in the bank too - *‘banket sudha hyani mazhi kahi izzat thevali nahi.’* ... He wants to know how I have spent, whatever I money get, he takes that away too. ...”(Aged 36 years, educated upto 3rd std, daily wage earner, married for 22 years)

Economic

About 25 percent of women in the sample were found to be experiencing economic violence which includes: keeping resources – both monetary and material - beyond a woman’s reach, snatching away resources, not allowing her to work even if she wants to, not providing for her basic needs, expecting her to run a house in a minimal amount, forcing her to get material from her maternal home, giving her no power in deciding where and how to use the money or asking for account of every penny spent, without allowing her to make choices. Percentage of women experiencing economic violence in last one year was 8 percent.

Since it is well known that a particular type of violence does not occur in isolation, an attempt has been made to examine the different combinations in which violence occurs in this population, which is presented below. Table 4.3 shows that 15 percent of the sample are experiencing all forms: physical, psychosocial and economic forms of violence. About 21 percent of women were experiencing psychosocial violence alone. Data shows that physical and economic violence does not occur in isolation, but is always accompanied by psycho-social violence.

“... I am blamed for everything, my movements are monitored either by my husband or he asks the children how I spend my day, he takes money away from me, I cannot even go out of the house for daily chores or to answer my personal needs or I have to resort to doing so without telling him....” (Aged 22 years, educated upto 9th std, daily wage earner, Hindu, married for 5 years)

“...My husband monitors my movements, constantly keeps taunting me over my natal family, saying ‘you come from a beggar’s family’... uses abusive language.. has thrown me out of the house too..” (Aged 21 years, cannot read or write, housewife, Buddhist, married for 7 years)

“...I alone have to do everything in the house...my husband finds fault with everything I do - the kind of food I make....he constantly keeps saying something to me...shouting at me, taunting me, speaks rudely or at times does not speak at all... makes fun of my beliefs. He does not like my interacting with others... keeps using foul language... Earlier, they would not even allow me to eat food, I use to go to my grand mother’s house and eat ...” (Aged 35 years, cannot read or write, Housewife, Hindu, married for 24 years)

“...I was staying in the village for one year with my in laws. All of them used to grumble or shout over household chores, if there was no oil in my hair, food was not ready, there was no soap when the clothes were soaked....anything... Since the beginning of our marriage, restrictions have been placed on me... even now, I cannot stitch a blouse with a low neck...have to keep my head covered... My husband does not take me anywhere nor does he let me go anywhere” (Aged 29 years, educated upto 8th std, housewife, Hindu, married for 14 years)

“...Many of the things happen due to dowry. They keep taunting me because I did not bring anything...” (Aged 32 years, educated upto 10th std, Housewife, Hindu, Tamilian, married for 14 years)

“...Husbands do not consider their wives as “individuals”. Even if I was not well, I alone had to do all the work... Their mind is already set that this is a woman’s job...” (Aged 35 years, educated upto 9th std, Housewife, Buddhist, is separated from her spouse)

“... My husband tells me what to wear. Before marriage, I used to follow all the latest fashions... Now, I don’t do anything.... Earlier I used to wear salwar kameez... now I can only wear saris.....” (Aged 33 years, educated upto 9th Std, earner, Hindu, married for 7 years)

In some cases the sister in law used to be the perpetrator, for e.g.

“ When I came to this place, my sister in law put restrictions on my talking to anyone. I used to feel restless here. She used to feel that if I spoke to anyone, then I will tell others what happens in our house ... she used to find fault with everything I did - over my cooking, the way I used to make ‘chapattis’.... Along with her even my husband used to taunt me, over my cooking... They never let me go out and work...My husband used to verbally abuse me while my sister in law used to constantly keep taunting me. She used to say things like, I am an illiterate or ‘gavthi’, nobody has taught me anything, that I cannot even clean the rice properly....She used to keep insulting me. Whenever, I wanted to leave to go to my natal home, she used to go out of the house somewhere and sit so that I could not leave..” (Aged 35 years, cannot read or write, housewife, Hindu, married for 27 years)

“...Till the time I had a child - which was about 14 years after my marriage, I used to be harassed and taunted constantly. My sister in law used to call me barren...” (Aged 41 years, cannot read or write, Earner having own business, Buddhist, married for 28 years)

Mother in laws use to indulge in psychological violence like:

“...When I used to work, I used to give the money to my mother in law. I gave my first salary to my husband. Even then she grumbled, that I had given it in my husband’s hands.... My mother - in -law keeps finding fault - if I ask anything, she does not say anything, keeps quiet... Speaks angrily to me, keeps grumbling... If there are only two of us in the house, then keeps saying, ‘you have not done this, you have not kept this thing here, you have not cleaned ...All my clothes still come from my mother’s place... my brothers buy saris for me during festivals... my husband and mother in law have not bought me anything...” (Aged 24 years, educated up to 10th std, Housewife, married for 4 years)

Effect of Probing on Reported Level of Domestic Violence in the Study

Earlier it was found that there has been an increase in proportion of women reporting violence through use of probe by about 50 percent i.e. from 42 percent without probe to about 64 percent through probe. An attempt has been made to find out what type of violence is likely to be captured through the use of probe.

Probing has contributed to an increase of over 51% in life time violence reporting. The largest increase has been in psycho-social violence and this is mostly due to lack of understanding that psycho - social abuse is also a form of violence. Probing helped the women in the sample to identify such events and thus helped in increasing the reported prevalence of domestic violence. (Table 4.4)

Differentials in Domestic Violence

In this section we examine differentials in the level of violence reported by ever married women in their marital life, across various sub groups of population. To get an in-depth understanding of the issue variations in different forms of violence - physical, psychosocial and economic, is also undertaken and presented in Table 4.5.

Age of Respondent

The youngest age group has reported the highest rate of violence and with advancing age the reporting declines. This is probably an indicator of recall lapse for the older women. So the age differentials of prevalence of violence may not really be significant. The evidence for this is provided by the distribution of different types of violence across the age groups. Physical violence is the least likely to be under reported and this shows that between the youngest and oldest age group the difference is marginal indicating that the extent of physical violence has not reduced over time. The higher psycho - social violence amongst the younger age group is reflective of the better perception of the younger women about what constitutes violence, which is perhaps due to their higher level of educational achievement. This variation is statistically significant.

Marital Status

As expected, all forms of violence whether physical, psycho-social or economic were most reported by women who are widowed or separated or divorced as compared to those who are currently married. This is an expected

trend as these women are more likely to be away from the 'place of violence' or the 'perpetrator', especially if the perpetrator was the husband and hence are more likely to share their experiences. It is also plausible that occurrence of violence could be the cause for their separation. However, this was not systematically explored in the present study.

Woman's Age at Marriage

While the legal age for marriage in India is 18 years, the average age at marriage of women in this community is 17.6 years, thereby indicating that large number of marriages within this community continue to be under-age. Hence age at marriage was used in this study as an indicator of women's status in her family. Women who had been married before attaining the age of 20 years reported more violence (67 percent) in comparison to women who married after attaining age of 20 years (52 percent). Probably, when women are married at an early age, they move into an unknown environment, are expected to forge new relationships, which are not always of a supportive nature. Hence, they are not completely able to fulfil the 'role' expected from them making them prone to violence. Due to their lower status in the family, she is in a vulnerable and helpless position leading to high degree of violence from the husband as well as his family members. Also, women married at an older age have higher levels of education and hence are likely to be more assertive and hence more likely to keep violence at bay.

Age Difference Between the Husband and Wife

Age difference between husband and wife plays a crucial role in interspousal power relationship. Analysis by age difference between husband and wife shows that all forms of violence were most reported when there was an age difference of more than 5 years between the husband and the wife. Lifetime violence increased from 54 percent where age difference is less than 2 years to 68 percent if age difference is more than 6 years and this observation was found to be true for all forms of violence. The relationship remained same for all the three forms of violence, though statistically significant only for physical violence.

Duration of Marriage

It is seen that all forms of violence - physical, psycho-social and economic were

most reported by women who had completed 6-15 years of marriage followed by those married for over 15 years. Chi-square test shows this observation to be statistically significant in the case of psychosocial and for total violence. This higher percentage of reporting for the 6 - 15 years is not surprising, as it is during this period when many of the problems identified as reasons for violence like not having given birth to a male child, psychosocial conflicts etc are more intense. It is plausible that women who have married earlier may have experienced violence in younger age but have not reported the same since they may not be currently experiencing violence. Otherwise it shows that violence peaks in 6-15 years of marriage and declines thereafter.

Education of Women

Educational attainment is a critical variable in determining levels and types of violence. We have already seen that women with higher levels of education have been more responsive in this study (lowest refusal rate) and have reported the lowest rate of violence, especially physical and economic. This goes with the fact that higher levels of education also empower women and hence one sees significant reduction in violence reported by such women.

Further, the analysis by educational levels shows that physical and economic violence were reported more among women who had completed up to middle school level (i.e. 4th – 9th std) while psychosocial violence was reported amongst those who had completed primary school level (i.e. upto 4th std). The relationship between physical violence and education of respondent is statistically significant. Overall trends indicate that women who had completed primary level of school reported more violence (71 percent) followed by those educated till middle school (68 percent). We also see that illiterate women also reported lower levels of violence. Since class and education levels are directly correlated there is a possibility that such women who are also economically independent are better empowered to handle family violence. But we must also note that the no response rate in this group was the highest. This type of relationship was observed in other studies also (IIPS and ORC Macro 2000).

Education of Husband

When compared with the educational background of the spouse, it is seen that for women who reported higher levels of

psychosocial and economic violence, their spouses had also completed upto primary level of school (i.e. upto 4th std). In cases, when women had experienced physical violence, most of the time their spouse had completed middle school (i.e. 4th – 9th std). The relationship observed educational attainment of spouse and violence within marriage was statistically significant for all forms of violence excluding economic violence. Again the importance of education as a gender leveller is seen with the lowest level of violence reported by women whose spouses had higher levels of education. But it must be emphasized here that though education is a critical variable, it is the power relationship which emerges, which is perhaps more critical.

Role in Decision-Making

Another variable used to analyze the occurrence of violence is the extent to which a woman is able to independently take decisions related to addressing day-to-day household needs. Results show that women who have reported that they are unable to independently take decisions relating to day to day household needs have also experienced significantly higher levels of violence (71 percent) as compared to those who are able to make decisions independently (61 percent). The nature of relationship between women's role in decision making and violence within marriage was the same for all three types of violence, though statistical significance as expected was observed only in the case of economic violence where the turf for conflict is economic decisions.

Earning Status

Occupational profile on the other hand shows that women who are earning have reported more violence – physical, psychosocial and economic, as compared to non-earning women. More violence was reported by earning women (69 percent) than non-earning women (62 percent) but the differentials were not significant statistically. This does not necessarily mean to say that earning women experience more violence. Further analysis of the nature of jobs undertaken by women shows that they are mainly engaged in temporary or low paying jobs in small industries, thereby not ensuring much of economic independence for the woman. Also, our field experience has shown that due to closure of industries, many of the male family members have lost their jobs and women have been forced to enter the labour market thereafter, mainly to keep the

house running. Hence, given the low level of education and absence of skills women are more likely to work in low paying jobs. It is also plausible that as workingwomen have greater access to resources than non-working women, they do establish relations with others beyond their family members. It is more likely that they also question the traditional roles and are hence perceived as a threat, making them more vulnerable to violence.

Occupation of Husband

Given the variance in employment patterns especially in the non-formal or unorganised sector, analysis of the occupational profile of the spouse for lifetime violence needs to be interpreted cautiously. When women reported physical and economic violence, their spouses were mainly reported to be unemployed or in the process of finding a new job. When psychosocial violence was reported, their spouses were mainly daily wage earners. Overall trends indicate that more violence was reported amongst women whose spouses were daily wage earners (67 percent) followed by those whose spouses had a regular source of income (61 percent), those who had their own business (60 percent) and those who were unemployed (57 percent). Also the women were found to be at higher risk of experiencing physical and economic violence if their husbands were unemployed.

Family Composition

An attempt has been made to find out whether prevalence of violence in married life varies between joint and nuclear families in this population. Overall trends show that significantly higher levels of violence were reported amongst women living in joint families (71 percent) as compared to those living in nuclear families (61 percent). The above trend remained the same for physical, economic and psychosocial violence, though statistically the differences were not significant.

Religion

Analysis of violence by religion shows that the largest group reporting experiences of violence were Buddhist (79 percent) –

irrespective of the forms of violence experienced. Hindus (65 percent) followed them as the second largest group, followed by Muslim women (60 percent). Violence was least reported amongst Christian women. Religion wise differentials observed were significant in all forms of violence, excluding physical violence. Here one needs to note that one out of every 5 women amongst the Muslim community had refused to participate in the survey (Table 2), while the refusal rate was the lowest among Buddhist women. So if this is taken into account then religious differentials may be marginal.

State of Origin

Analysis of violence indicates a very significant relationship between reporting of violence and state of origin for all the forms of violence. Most of the women reporting all forms of violence belonged to Maharashtra. The second largest group reporting experiences of physical and economic violence hailed from Uttar Pradesh (the exception being women experiencing psychosocial violence). Overall violence is reported to be as high as 75 percent among women hailing from the state of Maharashtra and lowest of 46 percent for those from South India.

The above analysis shows the risk of violence to be considerably higher among younger women/generation as compared to the older generation, indicating a potential increase in domestic violence over time in the population. Risk of violence was found to be reducing if woman had better status like, higher age at marriage, low husband-wife age difference, and autonomy in her household decision making process. Another notable aspect is that spouse's educational attainments as well as the women's own education level are important determinants of domestic violence. Cultural factors like type of family, religion and state of origin also show some significance in determining levels of violence experienced by ever married women. Having understood the levels and differentials in domestic violence we now move on to examine its onset and magnitude.

Table 4.1: Percentage Reporting Violence in Last One Year and During Marital Life

Reported violence	Last one Year	During Married Life
without probe	17.1	42.2
through probe	NA	21.7
Total	17.1	63.9
N	387#	424

widowed/divorced/separated women were excluded for violence in last one year

Table 4.2: Percentage Reporting Different Types of Violence in Last One Year and in their Married Life

Type of violence	Last one year	Married life
Physical	9.7	32.8
Psycho-Social	15.6	61.3
Economic	7.5	24.8
Any Violence	17.1	63.9
N	387#	424

widowed/divorced/separated women were excluded for violence in last one year

Table 4.3: Percentage Reporting Different Forms During Marital Life

Type of Violence Reported	N	%
Psycho-Social	89	21.0
Psycho- Social & Economic	43	10.1
Physical, Psycho- Social	77	18.2
Physical, Psycho- Social & Economic	62	14.6
Any violence	271	63.9

Table 4.4: Effect of Probing on Reporting of Domestic Violence

Type of violence	Percentage Reporting Violence in Marital Life			Addition due to probe in %
	Without probe	With probe	Total	
Physical	24.1 (73.5)	8.7 (26.5)	32.8(100)	36.6
Psycho-Social	41.3 (67.3)	20.1 (32.7)	61.3 (100)	49.6
Economic	18.6 (75.3)	6.1 (24.7)	24.7 (100)	33.6
Any Violence (N= 424)	42.2 (66.1)	21.6 (33.9)	63.8 (100)	51.6

Notes: - Multiple responses were commonly reported for type of violence
 • *Figures in parentheses denote distribution of violence by probe category*

Table 4.5: Percentage Reporting Different forms of Lifetime Violence by Background Characteristics of Ever Married Women

Background Characteristics	Form of Violence			All forms of Violence
	Physical	Psycho-Social	Economic	
1. Age of woman (in years)		*		
19 - 29	34.0	68.8	27.8	70.8
30 - 39	29.9	59.9	20.9	62.7
40 - 49	35.9	53.4	27.2	56.3
2. Marital status				
Currently married	31.0	60.5	23.8	63.3
Widowed, divorced or separated	51.4	70.3	35.1	70.3
3. Age at marriage	**	**	**	*
Below 20 years	35.7	64.6	27.7	67.7
20 years & Above	24.2	50.5	15.4	51.6
4. Age difference between husband and wife (in years)		*		
Upto 2	27.0	51.4	27.0	54.1
3-5	28.9	58.9	20.0	60.6
6+	37.5	64.6	54.9	68.2
5. Duration of marriage (in years)		*		
0- 5	23.1	56.4	20.5	61.5
6 - 15	36.1	69.9	26.5	71.7
16+	32.3	56.2	24.4	59.0
6. Education of woman	**			**
Cannot read or write	29.4	57.4	23.5	59.6
Up to Primary	33.3	66.7	27.5	70.6
Middle school but high school incomplete	40.1	66.0	28.4	67.9
High school complete and above	22.7	54.7	17.3	58.7
7. Education of husband	*	*		*
Illiterate and below primary	33.0	58.7	26.7	61.3
Primary complete but high school incomplete	40.0	70.9	29.1	73.6
High school complete and above	22.6	52.8	20.1	55.3
8. Decision making about daily household needs			**	**
Independently by woman	31.6	59.1	20.8	61.3
Not independent	36.0	67.6	36.0	71.2
9. Earning Status of respondent				
Non earner	31.6	59.9	23.0	62.1
Earner	37.1	66.4	29.3	68.9
10. Occupation of husband				
Daily wage earner	31.5	64.1	25.0	66.8
Regular income /pensioners	29.5	60.2	20.5	61.4

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Background Characteristics	Form of Violence			All forms of Violence
	Physical	Psycho-Social	Economic	
Own business	28.6	56.0	21.4	59.5
Unemployed	34.8	52.2	30.4	56.5
11. Family composition				**
Nuclear Family	32.6	58.8	25.1	61.2
Joint Family	34.5	67.8	25.3	71.4
12. Religion of respondent		**	*	**
Hindu	32.8	62.7	25.1	65.0
Muslim	30.4	55.4	17.9	58.9
Christian	17.4	39.1	8.7	39.1
Buddhist	47.1	73.5	44.1	79.4
13. State of origin	**	**	**	**
Maharashtra	43.0	71.0	33.0	75.0
Uttar Pradesh	27.1	57.3	19.8	58.4
South India	20.0	43.5	16.5	45.9
Other States	23.3	60.5	14.0	60.5
Total (N = 424-)	32.8	55.4	24.8	63.9

N does not add up to 424 in all cases

** and ** denotes Chi Square test significant at 1 % level and 5 % level respectively*

Correlations

		Current age	age at marriage	age difference	Dur. of marriage	lived separately	woman edn	spouse edn	decision making	womans occup	spouse occup	1 Year	LIFE
	Pearson Correlation	1.000											
Current age	Sig. (2-tailed) N	. 421											
	Pearson Correlation	-0.016	1.000										
age at marriage	Sig. (2-tailed) N	0.749 417	. 419										
	Pearson Correlation	0.093	-0.139	1.000									
age difference	Sig. (2-tailed) N	0.069 381	0.007 378	. 381									
	Pearson Correlation	0.888	-0.474	0.152	1.000								
Duration of marriage	Sig. (2-tailed) N	0.000 417	0.000 417	0.003 378	. 417								
	Pearson Correlation	-0.079	0.220	0.070	-0.176	1.000							
lived separately	Sig. (2-tailed) N	0.105 421	0.000 419	0.170 381	0.000 417	. 424							
	Pearson Correlation	-0.115	0.395	-0.095	-0.277	0.082	1.000						
woman education	Sig. (2-tailed) N	0.018 421	0.000 419	0.064 381	0.000 417	0.093 424	. 424						
	Pearson Correlation	-0.053	0.229	-0.171	-0.150	-0.005	0.359	1.000					
husband education	Sig. (2-tailed) N	0.298 384	0.000 383	0.001 379	0.003 381	0.924 387	0.000 387	. 387					
	Pearson Correlation	-0.178	-0.059	-0.176	-0.133	-0.052	-0.065	-0.017	1.000				
decision making	Sig. (2-tailed) N	0.000 421	0.226 419	0.001 381	0.006 417	0.290 424	0.179 424	0.739 387	. 424				
	Pearson Correlation	0.097	0.088	0.047	0.051	0.078	0.033	-0.014	-0.105	1.000			
womans occupation	Sig. (2-tailed) N	0.049 417	0.073 415	0.365 377	0.298 413	0.113 420	0.497 420	0.785 383	0.032 420	. 420			
	Pearson Correlation	0.039	0.025	-0.003	0.027	-0.045	0.102	0.087	0.085	-0.195	1.000		
spouse occupation	Sig. (2-tailed) N	0.456 376	0.632 375	0.954 372	0.609 373	0.380 379	0.047 379	0.091 377	0.097 379	0.000 375	. 379		
	Pearson Correlation	-0.085	0.004	-0.042	-0.076	-0.053	0.052	-0.113	0.076	0.003	-0.089	1.000	
Violence in 1 year	Sig. (2-tailed) N	0.082 421	0.943 419	0.412 381	0.122 417	0.276 424	0.289 424	0.026 387	0.118 424	0.948 420	0.084 379	. 424	
	Pearson Correlation	-0.120	-0.065	0.054	-0.067	-0.059	0.025	0.003	0.090	0.063	-0.054	0.328	1.000
Violence life time	Sig. (2-tailed) N	0.014 421	0.185 419	0.292 381	0.171 417	0.225 424	0.609 424	0.952 387	0.064 424	0.195 420	0.294 379	0.000 424	. 424

Onset and Magnitude of Domestic Violence

Onset Of Domestic Violence

Information on the first incidence of violence was asked to women who reported to have experienced the same. Violence is experienced very early after marriage as 37 percent women experienced violence within six months of their marriage. Another 22 percent women reported that they experienced violence, within one year of marriage. Thus, it is seen that over half (58 percent) of the women reported having experienced violence for the first time within the first year of their marriage, thereby indicating that they have been facing violence for almost their entire married life. Only 10 percent of women reported first instance of violence after completing 5 years of marital life, which indicates that the likelihood of violence occurring very early in married life is quite high (Table 5.1).

Data on event leading to occurrence of violence for the first time after marriage is presented in Table 5.2. Results show that 27 percent of women reported that the first episode of violence in marital life occurred over some 'household issues'. About 24 percent of women could not recollect the event, which led to the first episode of violence while 18 percent said that it was due to the 'husbands personality/habits'. When we combine these two events together, it is seen that household issues are the most reported reason for the initiation of domestic violence in marital life.

During the course of the interview, most women were able to recollect when they first experienced an episode of violence in their marriage and what had led to the same. As mentioned above, in most cases women reported experiencing violence within the first six months of marriage itself. Some experienced it as early as within the first week of marriage. As one respondent mentioned, "The arguments started within the first one week of my marriage. It was because ours was a love marriage, my mother in law was not in its favour, hence trouble started..." Few others stated that they became aware of their husband's drinking habits within the first few

days or months of their marriage and the first episode of violence – either verbal or physical - occurred at such a time. There was no specific event or reason for the violence, it occurred on some flimsy grounds. Some respondents said their husband's personality / behaviour itself was prone towards violence." In one case, a respondent reported, "I was slapped within the first 15 days of marriage, as I could not locate the bag that my husband had given me to keep safely..."

In some cases, the origin of the violent episode can be traced to interactions between the woman and her in-laws. In such cases, disagreements over household issues led to violence. Another interlinked reason given was instigation by family members, over the respondent's cooking style or their own lack of control over financial resources, inability to efficiently complete household chores, which led the husband to being influenced by own family members and harassing his wife. In one instance, a woman said, '*My mother in law was very 'khadus'. She used to bring mangoes, and when I used to go to wash utensils and clothes, both of them used to finish it off. They used to only keep one small piece for me. And I used to not eat that, thinking 'why should I eat just this one small piece'. I had a habit of eating 2-3 mangoes at a time. Once there were 1 kg. of mangoes. I finished all my work and later went to hunt for those mangoes. To this, my sister in law said that they were over. She said, 'when we give you, you don't want to eat, so now why are you hunting for mangoes.' Over this, we had a big fight. That is the first time, that my husband hit me. This happened within 15 days of my marriage.*' Few respondents mentioned that their "...inability to conceive a child.. or "... a loss of a child, (especially) a son..." was the reason for occurrence of the first episode of violence. Such events were reported to have occurred anywhere between 1 – 5 years after marriage.

Events like loss of job, financial constraints, the respondent maintaining relations / interacting with the neighbours and

committing any mistakes in the household also led to violence. In most cases, such events were reported to have caused violence in the later years of marriage. In words of one respondent, *'This happened, about 2-3 years after marriage I was sitting with my neighbour and talking. I did not realise my husband had returned. By the time I came home, he had made tea. I asked him when he had come. He first got up and slapped me.'*

Magnitude Of Domestic Violence

Women who are currently experiencing violence (i.e. experienced violence in the last one year) were asked about the magnitude of violence experienced. About 38 percent of women reported to be facing violence everyday. Another 41 percent reported having experienced violence once a month followed by 15 percent women who experienced violence a couple of times in a month. This shows that 94 percent of women who reported violence in last one year experienced it on a regular basis that is at least once a month. Only one woman

reported that violence happened only once since her marriage. Table 5.3 clearly reflects the extent of violence in marital life that the women in this community are being subjected to. This data viewed in the context of all women in the sample reveals that as many as 15% of women were currently experiencing violence on a regular basis (at least once a month).

Analyses of the most commonly reported forms of violence shows that 46 percent frequently experience verbal abuse, 19 percent face constant nagging from their husbands or other family members. Another 18 percent women said that they are frequently beaten (Table 5.4).

Tables 5.3 & 5.4 reflect only part of the sorry state of affairs that women in this community have to bear during their lifetime. One can imagine their plight if this is the frequency of violence, and they have to bear with this for many more years.

As Some of the Respondents said,

“...He has a habit of nagging... keeps grumbling all day along ... even if everything is done properly, he nags ...” (Aged 24 years, educated upto 10th std, housewife, married for 4 years).

“It happens every day & night... Hamara to Hindustan -Pakistan hota tha ...used to give bad words.... keeps taunting ...” (Aged 35 years, educated upto 14th, earner, Christian, married for 18 years)

“...Keeps taunting... saying I am short, am thin...butki aahes, lukdi aahesThis happens once in 2-3 days, after my husband comes home drunk...” (Aged 27 years, educated upto 7th std, earner, Hindu, married for 13 years)

“... Something or the other happens atleast 1-2 times a week... gives bad words.... if something happens at work, then he takes it out on me....” (Aged 35 years, cannot read or write, housewife, Hindu, married for 24 years)

“..My husband keeps shouting....gives me bad words... hits me... happens 1-2 times a month - mahine mein 1-2 bar to hota hai... “ (Aged 26 years, educated up to 9th std, housewife, Muslim, had been married for 10 years)

Table 5.1: Incidence of Domestic Violence for the First Time after Marriage

Incidence of Violence	N	%
Within 6 months	99	36.5
6 months -1 year	59	21.8
2-5 years	50	18.5
More than 5 years	27	10.0
Don't remember	25	9.2
No response/not recorded	11	4.1
Total	271	100.0

Table 5.2: Event Leading to Occurrence of Violence for the First Time after Marriage

Event	N	%
Over household issues	74	27.3
Does not remember	66	24.4
Husbands personality or habits	48	17.7
No specific reason	24	8.9
Prevalent beliefs	13	4.8
Children related	11	4.1
Perceived "mistake" on part of the woman herself as reported by her	9	3.3
Not getting a child	8	3.0
Other	7	2.6
No response/not recorded	11	4.1
Total	271	100.0

Table 5.3: Magnitude of Violence Experienced by Women in the Last One Year

Reported Frequency of Violence	N	%
Everyday	26	38.2
Not everyday but at least once in a week	10	14.7
Not every week but at least once a month	28	41.2
Sometimes during the year	3	4.4
Only once in entire married life	1	1.5
Total Respondents	68	100

Table 5.4: Most Commonly Reported forms of Violence Experienced During Last One Year

Commonly Reported forms of Violence	N	%
Verbal abuse /constant arguments	31	45.6
Constant nagging	13	19.1
Hitting	12	17.6
Shouting	11	16.2
Taunting	8	11.8
Being suspicious	4	5.9
Other	5	7.4
Total Respondents	68	100

N does not tally due to multiple responses

Reasons and Perpetrators

Reported Causes for Domestic Violence

Along with attempting to understand the nature and forms of violence experienced by women, we also studied the causes for violence. Earlier we have noted the onset of violence. Where reasons are concerned we concentrated more on situations that lead to violence or more specifically why women are being victimised. When a woman shared her experiences of violence, she was also asked, what in her opinion were the reason/s for the occurrence of violence.

As seen in Table 6.1, the major reason for violence as reported by the women was related to their domestic roles (28 percent) – her not doing the household chores on time or not doing the chores in a satisfactory manner. Many women shared that little incidents keep happening. To quote, ‘If I wake up late in the morning, or food is not ready on time then my husband gets angry and hits me.’ It also happens if women are late in completing the daily tasks expected / not following the husband’s routine. For instance, “my husband wants tea immediately after his bath and I get delayed... He likes everything to be done on time. Everything should be clean, neat and tidy, other wise he shouts...” It may start over something as routine as not washing utensils daily after dinner and keeping it for the next day or things are not kept in their proper place in the house – *‘gharme kuch teekh se rakha nahī*. It may also happen, “if there is some mistake in cooking...” “..if the food cooked is not upto the husband’s liking then he finds fault with it...,” “... if there is more or at times less spice or salt in the food” He may then hit her. It also happens if the husband did not like her cooking style or he is of the opinion that she cannot cook and hence may hit her.

Even when the mother in law or the sister in law were reported as perpetrator/s of violence, issues related to household and domestic role of the women were reported as reasons for occurrence of violence. There were instances where women said, “If I am not doing anything and sitting idle for some time, then my mother -in- law gets angry...” Often the

reason for being beaten or constantly being shouted at is that “the meals are not ready on time” or that the woman woke up late in the morning. While women may not be beaten every time, they do have to bear with constant taunting, like when they do not cover their heads as is customary in certain communities – *‘Kisi waqat ghunghat sar pe nahi liya to chillate hai’* or if they make any mistake. Some of them went on to say that since the mother in law is the main decision maker, they often keep quiet and listen to whatever she has to say.

The second most reported reason was their husband’s drinking habit (16 percent). They said, “husband often comes home drunk – at times everyday - and picks up a fight...He does not need any specific reason to do so.” It can start over something trivial as the fact that his wife has not cooked mutton today. He constantly gives bad words, keeps abusing. Sometimes, irrespective of what may happen, he just gets up and starts hitting. At times it starts when the wife does not give him money for his drinking. *‘ If I do not give him money everyday – his daily Rs. 20, then he starts giving me bad words.’* Some women narrated specific instances when their husbands came home drunk and when the violence commenced... “When he has no work, he drinks and comes. And then the bad words start....” Others shared how in the past year, though they have not been physically hit, the verbal abuse continues. Many women attributed the violence to their husband’s drinking habit when they said that ‘the violence occurs because of his drinking. If he is not drunk, he will not say anything, he behaves very nicely. That way, he is a simple man’. This trend needs to be interpreted carefully, as it does not mean to say that absence of drinking on part of the husband does not lead to violence.

Economic constraints or limited economic resources were often cited as the reason for violence. Women shared that it mainly happens over household expenses. They are given limited funds to run the house and with increasing inflation, women find it very difficult

to do so. In such a case, when they approach their husbands for more money, they often get shouted at, or beaten. As one of them said, 'He keeps shouting at me because I ask for money for household expenses, then he gives me bad words... He keeps suspecting that I have money and yet I am hiding it from him. We used to have disagreements over economic reasons – if there were Rs. 70, he used to give me Rs. 20 for buying vegetables, while the rest he used to keep with himself...'

Many women also attributed the occurrence of violence to their husband's personality characteristics or behaviour characteristics (12 percent). Women felt that their husbands personality / nature was such that he was prone to inflicting violence. He is very short tempered, or angry, irritable by nature. Given his personality characteristics, it does not take much for him to react. Others explained said, 'that is how he is', 'he is angry by nature', 'he gets angry and then hits me', he is '*gussewala*', he has a bad temper – '*tapat swabhav*'.

Women shared experiences where since the beginning of their marriage itself, the husband had a habit of constantly nagging them or continuously grumbling. They also spoke of how the husband did not involve himself in any of the household duties, keeps himself aloof from all happenings leading to a situation where the woman alone has to bear all responsibilities – right from child rearing, to

taking care of all household chores and if required going out and working.

Apart from these major reasons, other reasons were also cited such as:

Occurrence of violence was also attributed to bad habits on part of the husband like him having drug addictions, gambling and/ or having relationships with other woman / women outside of marriage. Some women articulated that their husbands have relations with other women (*baykacha naad hota*). This leads to fights between the husband and wife and at times the husband hits the wife. They also said that often they have been beaten when they have confronted their husbands about such relations. Few other women said that their husbands have got into bad habits like gambling, taking 'gutka' due to influence of friends. And when the wife comments on such habits, fights occur and the husband often hits his wife.

These issues are further compounded by the fact that due to closure of many small-scale factories, many men in the area have lost their jobs. This leaves them with free time and they tend to start drinking or getting into other such habits. The frustration, which comes with the loss of job and hence control over resources is often taken out on the wife and children, who are vulnerable and who lack power in the household.

In words of some respondents,

"...Both my husband and husband's sister used to taunt me over household duties. I alone was responsible for all the cooking – whether breakfast, lunch or dinner. If my husband and I wanted to go out together at any time, then my sister in law used to get angry. She used to get sarcastic, say things like, 'you are going, so who is going to cook? Are we your servants? Do we have to cook?' I don't know why she used to behave the way she did..." (Aged 35 years, cannot read or write, housewife, Hindu, married for 7 years)

"....My youngest sister in law used to live with us. She never did any work in the house. I only had to do all the household work, right to the extent of washing her clothes, folding and keeping them in the cupboard. If these clothes also got shifted a bit, then she used to start fighting. My mother in law is very 'khadus' and used to grumble a lot, taunt a lot. They were always very rude to me, used to constantly shout at me. It was only my sister in laws' opinion, which mattered in the house. Mainly all this used to happen over work. ..." (Aged 27 years, educated till 11th std, earner, Hindu, married for 6 years)

".... I have had fights or disagreements with my mother in law, when I used to live with them after my marriage. She was very strict with me. She used to constantly grumble or shout over household work - food was not ready or there was no soap when the clothes were soaked.. She used to also keep commenting on my appearance, if I did not oil my hair...." (Aged 29 years, educated till 8th std, housewife, Hindu, married for 14 years)

Another reason was that a number of husbands tend to be very suspicious of their wives. They insist that every time the woman is going out, she should take the children with her, so she does not 'do other bad things like meeting and talking to other men'. If a woman goes out alone, then the husband may stop talking to her or may constantly taunt her. He may then not send her anywhere and restrict her movements. This may include putting restrictions on or completely stopping her from interacting with others including their neighbours. Other women shared that the suspicious nature of the husband may mean that women are unable to visit even their natal families, as they are not allowed to go anywhere.

Many women also saw instigation by other family members specially in-laws as the reason for violence. Women shared instances wherein other marital family members like the sister-in-law have instigated the mother-in-law or the husband. This has led to fights, further leading to violence between both the spouses. Listening to his family members, the husband may restrict his wife's movements or monitor them. He may also resort to physical violence. Women also felt that their husbands side with their mothers, listen to whatever they say without understanding their wife's viewpoint and react based on what they have been told. As one of them said, 'My mother-in-law used to instigate my husband, *she used to get devi* (possession) and in that trance she used to say that I should be given to God. As I used to disagree, my husband used to hit me a lot. They would not allow me to eat food. I used to go to my grand mother's house and eat (choroon jawoon jevaichi), once my mother-in-law saw me go and she told my husband that I go out in the night so he beat me.'

Not being able to conceive was another reason stated by women for facing violence, especially psychological violence. Women reported experiences of often being harassed, constantly shouted at, taunted, called names like 'barren' / 'vanjoti'. They were ridiculed both within the home and outside. To put in the words of one respondent, 'As I was not having children, my mother in law used to keep taunting me, shouting at me. She used to tell the hens, 'till when are you going to be barren, at least now, lay eggs'. This was aimed at me.' Many a times, the family members wanted to arrange another marriage for their son /

brother. Few women said that even if they had children, they faced violence, as they did not have a son.

At times, women ascribed to the view that they faced violence as they themselves had committed some mistake. This is clearly brought out in the words of one respondent, 'There was housewarming ceremony at our home in the village. There was a lot of work to be done. I had got tired of doing all the work, and a little bored too. My husband was having lunch, and he asked for water. I was very tired, so I told him to take it himself. At that time, he took the water jug and hit me with it. I made a mistake, by not giving him water. This is our tradition - parampara, that if a wife commits a mistake then husband should hit her. Don't we hit our children, when they commit mistakes? Then if something happens and husband hits so what?'

In many cases women felt that there was no specific reason for the violence to start off - "*koi bhi baat nikalte hai*"- It happens over any reason. A small fight escalates into a violent episode. It could be due to any of the reasons given above. It happens, if by mistake she has put little more salt in the vegetable. That is enough for the husband to hit her. Many a times, he has then taken a mug and hit her. Added to that, if he is angry by nature, and drinks then he is more likely to do so. It also happens, if the wife has spoken to anyone, or if she did not open the door quickly. He may suspect her of having relations with other men and so gives her bad words, hits her. Some women reported that often they have not understood why the violence occurs. Few of them hold their fate responsible.

Lack of education on part of the woman was also seen as a cause of violence. They saw this as the reason for the husband committing atrocities on her and hence her living in fear and under continuous pressure. They believed that uneducated wives stay quiet and tolerate everything. If a woman was educated, she could have retorted against the violence being committed on her. An opposing view was also stated wherein it was mentioned that in earlier years, a woman would bear up with everything, as she was not educated. But today women are educated, they do not bear up with violence, they go out of the house, they earn, stand on their own two feet. If the husband is not worth it ("*layak*") then the woman leaves him.

Groups also discussed plausible reasons for a strenuous mother in law - daughter in law relationship and the reason the mother in law harasses the daughter in law. The reasons stated were that the mother in law might not be having a daughter and that's why she harasses her daughter in law, their own mother-in-laws must have treated them like this and so in turn they treat their daughter-in-laws in the same manner. They keep their daughter-in-laws under restriction and won't treat them as daughters. *"During my lifetime I did not get any happiness then why should I give happiness to my daughter-in-law?"* They consider the daughter in law as an outsider. It may happen that the moment the mother-in-law says something, the daughter-in-law answers back while daughters do not do this and they listen. Even if the daughter back answers, she doesn't feel anything. But if the daughter-in-law says anything, it is seen as back answering. Then mother-in-law may complain to her son. *"Daughter is her own blood and from the time she is in the womb, there is a relationship with her. Daughter-in-law has come from another house."* Here the mother in law alone cannot be held as responsible for indulging in violence against daughter in law, as these type of violent acts are an out come of the patriarchal mental set up in the society. One needs to have a deeper understanding of larger patriarchal system to explain this, which is beyond the scope of this analysis.

Perpetrators Of Domestic Violence

While understanding the forms of violence experienced by women, it is also pertinent to understand the person/s responsible for perpetuating the violence. Table 6.2 indicates that in 58 percent cases, husband alone has been mentioned as being the perpetrator. This increases to 79 percent when husband along with either of his parents or siblings has perpetuated such violence. Another 21 percent women reported that family members alone have been responsible for the violence experienced by the woman.

When analyzed by forms of violence experienced, it was seen that the most reported perpetrator for all forms of violence - whether physical, psychosocial or economic - is the husband.

Analysis Tables 6.3 of perpetrator and reported forms of lifetime violence experienced by women shows that irrespective of forms of violence experienced, the husband was the

main perpetrator. When women experienced physical violence, in 62 percent cases the reported perpetrator was only the husband while in 8 percent cases it was his siblings and parents. The role of husband as one of the perpetrator was very clear in 92 percent of women who experienced physical violence during marital life. When psychosocial violence was experienced, in 80 percent cases the perpetrator was the husband while it was 84 percent when she experienced economic violence. However, this analysis has a limitation as women were asked an open-ended question about their experiences of marital violence, and thereafter who was the perpetrator. The specific forms of violence experienced and the perpetrator for each form was not specifically asked. However this table provides a general information on perpetrators of violence against women in their marital life.

Some women shared that their husbands have harassed them ever since marriage. That "he says things for no reason. He gives bad words, says dirty things." Arguments / fights always occur between husband and wife. At times there are no specific reasons for its occurrence while at other times, the reasons would be varied. It could be over household expenses, over his drinking habit, him not being employed or because the wife said something about his mother. This would make him angry, and in turn he would raise his hand on his wife or heap abuses on her. At times, it would be due to the husbands constant drinking or as he was short tempered or suspicious by nature. Women shared that they often had to face various kinds of harassment - constantly being abused, being given bad words, physical beating, constant monitoring at the hands of their husbands. As one of them said, *"husband treating her not like a wife but as a servant 'tyani mala bayko mhanun kadhi sabhalune ghetala nahi, mala molkarin mhanun vagvala, sagla sahan kela"*. We have arguments for no specific reason as such - *'karan kai lagat nahi.'* *My husband hates me.. 'maza tiraskar kartat . He uses words to hurt me. And if I commit any mistake, he hits me..."*

Many other women shared that they enjoyed good rapport with their husbands, but often had to face harassment and violence at the hands of the in-laws. At times, it could be the brother in law and his wife. In most cases by other family members, women singled out sister in law and/or mother in law as being the main perpetrators of violence. Some said,

that 'most of the time, the arguments occur with mother in law.' Once again various reasons were cited. It may be as she is unable to have children. She then had to face constant taunting and criticism, was called various names. At times, attempts were also made to get the husband remarried. Another very common issue was the household chores. Women felt that their in laws, would instigate fights between husband and wife. They used to grumble over food / khana pina or it was felt that since a new daughter in law has come in to the house, then she alone should do all the household work. So, the sister in law and /or mother in law used to expect the daughter in law to complete all chores and more over do so in a manner, which is in keeping with the established patterns, norms, traditions and culture in their marital household. Their 'inability' to perform as expected often bought them more ridicule and led to more name keeping.

The situation was compounded when the husband along with his parents and/or siblings was identified as the perpetrator of violence. This meant that the woman faced violence from almost every member of the marital home.

Women shared that they often experienced 'sasurvas (harassment by mother in laws) ' at their marital homes. As mentioned above, differences over domestic responsibilities of the woman were the most common cause of tensions, disagreements, and harassment between the woman and her in laws. The new daughter in law had the least amount of 'power' in the family. She was expected to quietly follow the dictates of the 'elders' in the house. As one of them said, 'I used to do all the household work, even to the extent of washing the cloth pieces my sister in law used to use during her periods - (*paliche kapde sudha dhuvayachi*). If I retorted it would lead to fights over small small things. Till date, my husband does not side with me...' Another respondent said, 'My mother in law and father in law fought a lot (with me). They used to grumble (*khurkhur karte the*)...used to trouble me, harrass me (*pareshan karte the*). We used to have arguments and then husband used to hit me. My mother in law used to teach him (*sikhati thi*).' A similar experience was shared by another respondent,

"Husband comes in the village and mother-in-law would complain about me - "*ki tujya baykola kam karayla nako*", he used to listen to her and hit me. Also my mother-in-law & brother-in-law used to hit me..."

Incapacitation

Quite often the severity of violence has led to incapacitations on many occasions. In total about 14 percent (60/424) of respondents have reported to have experienced incapacitations in their lifetime. Among the women who have experienced violence in lifetime, 22 percent said that violence had led to some form of incapacitation. Extent of incapacitations is presented below (Table 6.4).

It can be seen that out of these 60 women, 48 percent had sought help from a health professional while 23 percent had used home remedies or self-medication. Violence has resulted to a stage where they were not able to do their usual activities in 15 percent of woman. The observation that 8 percent of these women had to be hospitalised due to incapacitation is very serious. All this shows prevalence of severe violence in this population, which often reached a stage where the victim had to seek medical help.

Person mainly responsible for violence induced incapacitation was the husband alone in majority (70 percent) of the occasions. Husband was a party in most remaining cases also. Only one woman reported 'other relative' as a person responsible for incapacitation (Table 6.5).

Alcoholism was a major factor which has contributed to incapacitation. This was reported as the main cause of violence leading to this critical stage. A small but sizeable proportion of women reported 'instigation by family members' and husband's 'personality or behaviour pattern' as a reason for incapacitation. It is to be noted that infertility or the reason 'not getting' a child is also reported as a reason in some cases. Women narrated that some incidents of violence were severe enough to leave its mark not only on their psyche but also on their body. (Table 6.6)

In words of some respondents,

He used to beat me, till my sari used to soak in blood, hit me with objects. His personality was like that. He did not really need any specific reason to start off. ...” (Aged 36years, educated upto 3rd Std, daily wage earner, married for 22years)

“...One day my husband and his friend came home drunk. He asked me to serve them food. He finished his dinner, but had left something in his plate and I threw it out. He got angry, pushed me against the cupboard and fell on me. Later, he also kept kicking me. He kicked me in my chest and I started vomiting blood. He took me to the doctor” (Aged 30 years, educated upto 10th Std, Hindu, housewife, married for 3 years)

“..My husband does not like my talking to or going to the neighbours place. My in- laws and he are of the opinion that they teach me to say certain things or behave in a particular manner. They bring this up in every argument we have, every time something goes wrong. My husband had hit me a lot, so much so that I had hurt my head and had to spend Rs. 100 on the doctor. In fact it still hurts me / continues to hurt me even now. These people are suspicious by nature. They don't like my talking to anyone and due to this, all this happens....” (Aged 22 years, educated upto 9th Std, Hindu, daily wage earner, married for 5 years)

“..... He has often burnt my hands with a hot 'Chimta.' Once it was so severe that I had to be hospitalised. That also happened, because my neighbours intervened...”(Aged 30 years, educated upto 4th std, housewife, Hindu, married for 15 years)

“...When I was 9 months pregnant, with my first child when he hit me on my stomach because I was sitting outside the house. Then he himself took me to the doctor. (Daily wage earner, Hindu).

“....This happened with my sister in law. We had an argument and then she started abusing my niece who was visiting us. I intervened and the argument escalated into a big fight. She started hitting me, pulled my hair. It only ended with my mother in law's intervention. I suffered from severe shoulder pain for several days after that. (Daily wage earner, Hindu).

Suicide Attempts

In this study we have found that about 5 percent of the women in the sample population have attempted suicide at some point in their lifetime. Though the question was not directly asked, it came through the probe list used during the survey. It is to be noted that this is only one part of the story as we only have information on women who survived suicide attempts and not of women whose suicide attempts were fatal. The interviewers also came across suicides in the locality during the survey period. Apart from this one woman in our sample committed suicide a day before the scheduled date of interview.

Analysis of profile of women who have reported attempts at suicide indicates that they have completed primary level of schooling, were mainly earners and were not significantly involved in the decision making process. Suicide rates were highest among Buddhist and those belonging to the state of Maharashtra. (Table 6.7)

The high levels of suicide attempts reported by women is an extremely alarming trend as it reflects the sheer helplessness and

hopelessness experienced by them in their marital relationship. Analysis showed that all women who reported that they actually attempted to take their own life, had experienced all forms of violence - whether physical, psychosocial and economic and felt that ending one's life or committing suicide was the only way out. (Table 6.8)

It is plausible that women view abusive relationships as a shameful act, a humiliating experience and hence are likely to indulge in self-blaming. Their response to experiences of violence are more self-directed rather than directed towards the perpetrator. Because of social/economic/political barriers she is often unable to confront the abuser. Another reason could be that outside of marriage there exist very limited options for a married woman who may want to get out of her marriage. This is especially relevant in the Indian society where marriage is more a social obligation than a matter of individual choice. Also, lack of a support system, social and familial pressures, issues of prestige, presence of small children, lack of options in terms of shelter, employment may further compound the problem.

Table 6.1: Distribution of Reported Causes of Lifetime Violence

Reported Causes of Violence for Lifetime Violence	N	%
Household chores are not done properly	49	27.7
Husband's drinking habit	44	24.9
Economic constraints & disputes over property	36	20.3
Husband's personality or behaviour pattern	33	18.6
Husband's bad habits like gambling & another woman	21	11.9
Children related	11	6.2
For no specific reason	9	5.1
This is tradition / joint family set up / my destiny	9	5.1
Not getting a child	8	4.5
Cannot understand the reason violence occurs	8	4.5
Company has shut down / no job / work place anger on family	8	4.5
I made a mistake	6	3.4
Other	28	15.8
Total Respondents	177	100

Totals do not tally due to multiple responses.

Table 6.2: Perpetrator of Violence by Lifetime Violence

Perpetrator of Violence	Total	
	N	%
Only husband	158	58.3
Husband and the parents in law	32	11.8
Husband with the siblings and parents of husband	25	9.2
Other family members excluding husband	56	20.7
Total	271	100.0

Table 6.3: Perpetrator of Violence by Reported forms of Violence

Perpetrator	Reported forms of Lifetime Violence					
	Physical		Psychological		Economic	
	N	%	N	%	N	%
Only husband	86	61.9	150	57.7	55	52.4
Husband & parents	23	16.5	33	12.7	16	15.2
Husband, siblings & parents	19	13.7	25	9.6	15	14.3
Other family members excluding husband	11	7.9	52	20.0	19	18.1
Total	139	100.0	260	100.0	105	100.0

Table 6.4 : Extent of Incapacitation Due to Violence in Marital Life

Extent of Incapacitation Due to Violence	Cases	
	N	%
Sought help from health professional	29	48.3
Used home remedies or self medication	14	23.3
Did not do usual activities/work	9	15.0
Required hospitalisation	5	8.3
Other	2	3.3
Total incapacitations reported	60 (14.2)#	100

Note # figure in bracket indicates percentage experienced incapacitation among all women

Table 6.5: Persons Responsible for the Incapacitation Due to Violence

Person	Total	
	N	%
Husband	42	70.0
Other family members	8	13.3
Husband and parents	5	8.3
Husband and siblings	2	3.3
Husband and his other woman	1	1.7
Husband, siblings and parents	1	1.7
Other relatives	1	1.7
Total	60	100.0

Table 6.6: Reported Causes for the Violence Which Led to Incapacitation

Causes	Total	
	N	%
Alcohol	26	43.3
Instigation by other family members	9	15.0
Personality is like that	6	10.0
Another women	4	6.7
Not getting a child / a male child	4	6.7
Don't know	4	6.7
Economic reasons	2	3.3
Tradition	1	1.7
Other	4	6.7
Total	60	100

**Percentage rounded off hence >100*

Table 6.7: Percentage of Women who have Attempted Suicide in their Life Time by Select Characteristics

	%
Education of women	
Cannot read or write	2.9
Up to Primary	3.9
Middle School but high school incomplete	8.0
High school complete and above	1.3
Earning status of women	
Non – earner	3.9
Earners	6.9
Decision making about daily household needs	
Independently by woman	4.2
Not independent	6.3
Religion of women	
Hindu	4.8
Muslim	1.8
Christian	0.0
Buddhist	11.8
State of origin	
Maharashtra	7.0
Uttar Pradesh	2.1
South India	3.5
Other States	2.3
Total (N=20)	4.7

Table 6.8: Reported Reasons for and Nature of Attempted Suicides by Survivors

Reasons for Attempting Suicide	Cases
Suspecting her of infidelity	6
Alcoholism / gambling	5
Constant harassment in marital home for no specific reason	5
Inability to conceive	1
Husband having an extra marital affair / relations with another woman	1
Not giving her money	1
Dowry	3
Nature of suicide attempt	
Self immolation	5
Sleeping pills	1
Poison	3
Not specified	11
Total number of cases	20

N does not tally due to multiple responses

Help Seeking Behaviour and Coping Mechanisms

Coping Mechanisms

In this study we also attempted to understand the pattern of help seeking behaviour when women face violence. Each woman was asked what she did when she experienced the last episode of violence. In cases where no help was sought, reasons for not seeking help were explored. When women had sought help, we tried to understand the kind of help sought and whether intervention by others influenced the intensity and severity of violence experienced by her. The details of this are discussed below.

Response to Violence

When women were asked how each of them has responded to the last episode of violence, about 60 percent women said 'they did not do anything', 'they kept quiet and continued to tolerate the violence.' About 23 percent reported that they shared with their natal family member, while 11 percent shared it with their marital family members.

Women felt that such things keep happening in every house. 'You take tension for some time, get tensed with the person who says something, but after some time things come back to normal. They believed that 'after all the woman has to stay in the marital home.' So she has to abide by the decisions taken by the elders in the house. Some were of the view that if the woman keeps quiet then everything becomes all right and there are no big fights then. Others were of the view that since she was born a woman such things will happen to her, and being a woman she has to tolerate everything'. Hence, even if they have been beaten, they have not gone to anyone nor have they left the house and have tolerated the abuse till they could. They have largely been silent. (Table 7.1)

Nature of Intervention

From amongst above women 41 percent of them sought help or intervention. And among the women who sought help 93 percent had gone for only informal help. Here informal interventions mainly include interventions by

neighbours, other relatives & family members, close friend, any other such person whom the woman trusts. About 7 percent had sought formal help from a community leader, community based organisation, any group working on social issues, Mahila Mandal, any health professional, legal aid group, lawyer or police. (Table 7.2)

Effect of Intervention on Violence

Among the women who have sought intervention, around 22 percent reported that there has been a decline in frequency as well as severity of violence after intervention. At the same time around 44 percent of them reported that there has been no change in frequency and intensity of violence after intervention. Another 22 percent reported that there was a change for a while but it became same after some time. Violence has reported to have increased in the case of 9 percent of women who have sought intervention against it. The above observation that there has not been a considerable decline in violence may be one reason, which might have made other women not to seek any intervention during violence. The major form of intervention in the population was informal and things must be viewed in this context. (Table 7.3)

Reasons for not Responding to Violence

Varied reasons for not seeking help inspite of facing violence or continuing to face violence were shared by the women. They ranged from them asking us, 'whom should we tell? And what should we tell?'. Some felt that they do not feel the need to share anything with anyone, especially since 'what could one do to lessen it?'. Few others opined that these kind of situations are natural in everyone's married life, that it is a matter of family honour – both for their marital home and natal home and also a private family matter. Some said that they do not want to seek help from anyone. Few others shared their concerns that in case they did seek help, their neighbours would laugh at them or their husbands or that their children would be ridiculed. (Table 7.4)

In words of one of the respondents, *“My child has become 18 years old, but I still have not disclosed. Why should one go and wash one’s dirty linen in public? Why should one give a chance to others to talk about us? If supposing, one tells someone as to what happens in ones home then after they have heard us out, they laugh behind one’s back. We loose our dignity. Then why should one tell anyone?”*

Excruciating natal home circumstances such as their poor economic status, having unmarried younger siblings especially sisters, lack of any support and natal home belief stressing that a married woman’s place is with her husband, till the time she dies – all these were constraining factors which prevented a woman from approaching anyone for help. One of them said, ‘when I told my parents about it, they said that it is okay and that such things happen for the first 2-3 years and you are not supposed to say anything and tolerate it.’ Some shared the fact that they ‘don’t have anyone else’ is the reason for their keeping quiet and tolerating everything while others believed that ‘what is destined comes to you’.

To sum up majority of these women perceive violence within homes as a private issue and hence do not speak about it in public or seek any external intervention.

Community Response to Women Experiencing Violence

Apart from trying to understand help seeking and coping mechanisms adopted by women when they faced violence, through the group discussions we were also able to obtain views of other women as to how this community has responded to women experiencing violence.

Women opined that some persons refuse to intervene as they regard husband-wife fights as ‘private affair’. They feel, she is his wife - let him do anything and they just witness the drama. This is especially the case, if this is an everyday scenario - *“kahi mhantat navra baikocha aahe. Nehamicha aahe”*. ‘There was this woman who used to be hit by her mother-in-law, father-in-law and husband and if anyone interfered then the woman herself would question them, asking them not to interfere in her family matters....’. That is the reason people do not interfere. When neighbours intervene in such situations and support one party, they have to face the discontentment of the other party “hear some bad words from the other”. They felt that the

best thing to do is to support no one and leave it as a family matter to be sorted out by the individual concerned themselves.

There are instances where some women said that the neighbours are extremely helpful, intervened - “If a husband drinks and hits / beats then some people would help... some give money. They provide emotional support. If the situation gets out of control, then they reprimand the husband. ‘In one particular instance a woman was hit by her husband over small, small issues with a *“belan”* and she used to quietly bear up with it. The neighbors tried to make him understand once -twice thrice four times but to no avail. Then ultimately they told him that they would hit him or take him to the police then he cooled down.’

Existing Services & Kind Of Support Sought By Women

Here we present some information from the informal group discussions, which we find relevant to the above context. This was done due to the inability of obtaining such information through the survey. Through various discussions with women in the community, it emerged that presently no group except for a Mahila mandal, which works in parts of this community, actively intervenes in cases where women face violence. At times, community leaders or elders do intervene, but this is not a set pattern. If a woman approaches the mandal for help, she is counseled along with her family members. In case, the issue is not resolved and the woman is desirous of taking any action, then appropriate support is provided to her. Efforts are also made to offer emotional support and reassurance to such women in distress.

Based on their interactions with other women in the community, they shared that mainly women ‘want to know, how they can best deal with whatever is happening to them’, ‘what should they do when their husband hits them in a drunken stupor or even otherwise?’ This corroborates our field experience, where women have often asked us for ‘solutions they can implement while they continue to remain in the house’. They have expressed that often the reason a woman does not seek help, is because she does not know where to go. ‘There is help available but we do not know whom to approach. Some organization should give us some information and I am sure they can help’. Furthermore, the nature of information required would differ from woman to woman. For instance, those seeking separation, would

like information on services offered by various organisations, legal procedures, advice on employment and educational opportunities

Through a brief discussion on what would be the requirements of establishing a community based response system dealing with such issues, women felt that for such intervention to be successful, 'women should trust the people involved and open up about what is happening in their house - only then will the intervention be successful'. The group should include social workers, representatives from women's organizations, older people in neighbourhood, leaders in the community and few community members. They cautioned that while women themselves may be interested in contributing to such efforts, their family members 'her husband, brother, sister would yell at her.' There would be a pressure from the community "to sit quietly at home and not get involved in "these problems". Hence it is crucial that their support is enlisted. Furthermore, the group would need to link up with other groups outside the community and more importantly should have a clear purpose and sense of direction.

To sum up, it is seen that majority of women facing violence do not seek any intervention unless the violence assumes severe proportions or they feel that they have exhausted their personal strategies and cannot tolerate anymore. It is then that they share their experiences with others, mostly neighbours or natal family members. Presently, no group in the community actively intervenes in cases of domestic violence except neighbours and onlookers who may do so in

severe cases. There is an expressed need for information by women, which would help them deal with the situation, while they continued to live there. This is especially crucial as it is seen that for a variety of reasons mentioned above women do not actively seek help and continue to live in 'violent situations'.

In conclusion we can say that dealing with domestic violence within the community may not be a feasible option under a patriarchal social fabric as is evident from the responses to coping mechanisms and help seeking behaviour that women have reported. Women have generally reported that violence within the home or in intimate relationships is a private/family matter, it is part of marital life or in relating to in-laws etc. This mind set clearly reveals the deep penetration of patriarchy and its value systems. If women have to eject out of this mind set then it has to be necessarily a more formal process. Only when women are able to comprehend the character of how patriarchy controls their life and determines their fate and keeps them under a leash will they be able to undo the shackles they are bound in and break away from the violence they face in the intimate setting called home. Thus a formal mechanism which helps women identify how and why such violence perpetuates and which also provides the necessary support to help women to come out of violent relationships, is perhaps the only solution to liberate them from the violence they face. At the community level informal mechanisms can help by providing "first-aid" but more importantly by getting them in touch with the formal mechanisms which can help women deal with their violent situations.

Table 7.1: Women's Response to Last Episode of Violence

Responses to Last Episode of Violence	Total	
	N	%
Did not do anything, continued to be quiet & tolerate	160	60.1
Shared with natal family or others	63	23.2
Shared with marital family members	31	11.4
Neighbours used to come & intervene	9	3.3
Took external help	4	1.4
Shared with natal & marital family members	3	1.1
Other	1	0.3
Total	271	100.0

Table 7.2: Nature of Help/Intervention Sought by Women When Faced with Violence

Nature of Help/ Intervention	Cases	
	N	%
Informal	103	92.8
Formal#	8	7.2
Total	111	100

Note: # out of formal (7 sought police intervention 1 got legal intervention)

Table 7.3: Impact of Intervention on Frequency and Severity of Violence Experienced by Women

Impact of intervention	Change in Frequency of Violence Experienced		Change in Severity of Violence Experienced	
	N	%	N	%
Remained the same	49	44.1	48	43.2
Decreased	25	22.5	24	21.6
Increased	10	9.0	10	9.0
Cannot say	3	2.7	3	2.7
Change for few days then same situation	24	21.6	26	23.4
Total	111	100.0	111	100.0

Table 7.4: Reasons Reported by Women for not Seeking Help (N = 160)

Reason	N	%
What should one tell? And whom? Why should one tell anyone, is anyone going to lessen it?	46	28.8
These things happen in a marriage, part of tradition	37	23.1
Do not feel the need to share	34	21.3
Natal home belief that once married, should die in marital home, no support, not well off	28	17.5
Ultimately have to stay with my husband, basic needs are met	23	14.4
It's a matter of family honour, people will laugh, private matter	10	6.3
It is my fate or destiny	8	5.0
Other	1	0.6

Multiple responses, N does not tally

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Annexure 1

Magnitude & Nature of Domestic Violence: Findings from Select Studies Industrialized Countries

Canada (1993)

- 29% of women (a nationally representative sample of 12,300 women) reported being physically assaulted by a current or former partner since the age of 16.

Japan

- 59% of 796 women surveyed in 1993 reported being physically abused by their partner.

New Zealand (1988)

- 20% of 314 women surveyed reported being hit or physically abused by a male partner.

Switzerland (1997)

- 20% of 1,500 women reported being physically assaulted according to a 1997 survey.

United Kingdom (1995)

- 25% of women (a random sample of women from one district) had been punched or slapped by a partner or ex-partner in their lifetime.

United States (1986)

- 28% of women (a nationally representative sample of women) reported at least one episode of physical violence from their partner.

Asia and the Pacific

Cambodia (1996)

- 16% of women (a nationally representative sample of women) reported being physically abused by a spouse; 8% report being injured.

India (1996)

- Up to 45% of married men acknowledged physically abusing their wives, according to a 1996 survey of 6,902 men in the state of Uttar Pradesh.

Korea (1992)

- 38% of wives reported being physically abused by their spouse, based on a survey of a random sample of women.

Thailand (1994)

- 20% of husbands (a representative sample of 619 husbands) acknowledged physically abusing their wives at least once in their marriage.

Middle East

Egypt (1995)

- 35% of women (a nationally representative sample of women) reported being beaten by their husband at some point in their marriage.

Israel (1997)

- 32% of women reported at least one episode of physical abuse by their partner and 30% report sexual coercion by their husbands in the previous year, according to a 1997 survey of 1,826 Arab women.

Africa

Kenya (1990)

- 42% of 612 women surveyed in one district reported ever being beaten by a partner; of those 58% reported that they were beaten often or sometimes.

Uganda (1997)

- 41% of women reported being beaten or physically harmed by a partner; 41% of men reported beating their partner (representative sample of women and their partners in two districts).

Zimbabwe (1996)

- 32% of 966 women in one province reported physical abuse by a family or household member since the age of 16, according to a 1996 survey.

Latin America and the Caribbean

Chile (1993)

- 26% of women (representative sample of women from Santiago) reported at least one episode of violence by a partner, 11% reported at least one episode of severe violence and 15% of women reported at least one episode of less severe violence.

Colombia (1995)

- 19% of 6,097 women surveyed have been physically assaulted by their partner in their lifetime.

Mexico(1996)

- 30% of 650 women surveyed in Guadalajara reported at least one episode of physical violence by a partner; 13% reported physical violence within the previous year, according to a 1997 report.

Nicaragua (1996)

- 52% of women (representative sample of women in León, reported being physically abused by a partner at least once; 27% reported physical abuse in the previous year, according to a 1996 report.

Central and Eastern Europe/CIS/Baltic States

Estonia

- 29% of women aged 18-24 fear domestic violence, and the share rises with age, affecting 52% of women 65 or older, according to a 1994 survey of 2,315 women.

Poland

- 60% of divorced women surveyed in 1993 by the Centre for the Examination of Public Opinion reported having been hit at least once by their ex-husbands; an additional 25% reported repeated violence.

Russia (St. Petersburg)

- 25% of girls (and 11% of boys) reported unwanted sexual contact, according to a survey of 174 boys and 172 girls in grade 10 (aged 14-17).

Tajikistan

- 23% of 550 women aged 18-40 reported physical abuse, according to a survey.

Source: "Violence Against Women," WHO, FRH/WHD/97.8, "Women in Transition," Regional Monitoring Report, UNICEF 1999, and a study by Domestic Violence Research Centre, Japan.

Annexure 2

Table Depicting Profile of the Women who Participated in the Group Discussions

	In Actuals	In Percentage
Age		
15-19years	9	14.3
20-29 years	25	39.7
30-39 years	20	31.7
>40 years	9	14.3
Marital Status		
Never Married	9	14.3
Married	50	79.4
Divorced	1	1.6
Seperated	2	3.2
Widow	1	1.6
Education		
Non literate	21	33.3
Upto 4th standard	2	3.2
Beyond 5th standard	40	63.5
Current activity		
Earnar	20	31.7
Non earner	43	68.3
State of origin		
Maharashtra	27	42.9
Tamil Nadu	8	12.7
Uttar Pradesh	22	34.9
Other	6	9.5
Religion		
Hindu	45	71.4
Muslim	8	12.7
Buddhist	5	7.9
Christian	5	7.9
Type of family		
Nuclear	44	69.8
Joint	12	19.0
Extended joint	3	4.8
Other	4	6.3

Annexure 3

Probe List

- Exerting control on your speech
- Exerting control on the way you dress
- Not allowing you to make any independent decisions
- Controlled all finances and make you account for every rupee spent
- Took money away from you
- Ignored your feelings
- Refuse to socialize with you
- Not providing for your basic needs (such as denying food, clothes, health care, etc)
- Ridiculed or insulted your most valued beliefs your religion caste or class
- Continually criticized you called you names,
- Constant monitoring and being suspicious
- Forcing to have sexual relations against ones wish
- Hurting private parts
- Humiliated you in private or public
- Harassed you about affairs, your partner imagined you were having
- Want you to stop working
- Discouraged your relationships with family and friends for e.g. Wife not allowed to visit her natal home, keeping children away from her, etc.)
- Pressures regarding natal family (forcing to get material from your maternal home)
- Threatening (to hurting you physically or someone else you love, threatening to leave you)
- Cause harm to the children as a means to teach her a lesson / control her
- Speaking rudely
- Repeated taunting
- Shouting
- Giving bad words, '*gallies*'
- Pushing to cause fall or injury, holding down against the floor
- Throwing her out of the house
- Pulling hair
- Banging
- Punching
- Hitting (e.g. slapping, kicking, hitting with any object / weapon such as stick, iron bar, slippers, "belan")
- Using sharp or dangerous instrument to hit with an intention to cause grievous injury or to kill
- Strangulating
- Burning
- Pushing her to a point that she thinks of committing suicide

Annexure 4

Letter to Respondent

Date :

Dear Friend,

I am and I am working with a non profit organisation called CEHAT. In 1995 we conducted a research study to understand various dimensions of women's health (a copy of "aurato ki khani unki zubani" (Mumbai Study) is given to the woman). The study brought to light the fact that women ignore their health needs till it hampers their day to day functioning. This was a matter of grave concern to us and as a step towards addressing this issue we started working in the areas of Tanaji Nagar, Shanti Nagar and Shivaji Nagar since November 1997 through a project called Arogyacha Margavar. We initially began our work by holding health education sessions in various lanes in Shanti Nagar and some lanes in Tanaji Nagar. Various women from our basti attended these sessions. As they grew interested in further training, we developed a training programme on health and related aspects wherein women from the community itself were trained as community health workers. Today five women have completed the training and are working as community health workers. Each of them visits around 200-250 households, inquires about the family, and dispenses medicine. In case, she is unable to diagnose the problem, the patient is seen by a doctor(at our clinic based in the DSP Vyayam Shala) and if further required, is referred to the hospital or any other agency. Apart from this, the community health workers have worked on other issues such as ration card, social security schemes for women in distress, income generation programmes, etc. They also hold health education sessions.

In course of this work, we were approached by some women who shared that medicines gave them physical relief but raised the query as to what about their mental state of mind. This echoed our observation over the years that mental health of women was often ignored. There seems to be an urgent need to address this issue. We felt that prior to commencing any programme or service, we needed to know whether this (these) issue (s) were confined to few women in the community or more. This would help us evolve our strategy along with the women in the community.

Accordingly, we decided to hold small group discussions with women in the age group of 15-49 yr. in the three areas. We formed nine such groups wherein women from different educational and occupational background depending on their age, marital status and duration of marriage were grouped together. Another criterion used was language spoken. We conducted on an average three sessions with each group wherein issues relating to tensions experienced by women, how they resolved it, effects of unresolved tension, women's experiences in their families, the problems they face were discussed.

At the end of the sessions, we were able to get glimpses into the various issues affecting women and its impact on their lives. In course of these discussions, harassment faced by women emerged as a major issue. We felt that it is not right to draw conclusions based on these but we should try and get a complete picture. This meant that we needed to individually meet as many women in the community as we could, talk to them about their experiences.

As it would not be possible to meet each and every woman in the basti. We randomly selected homes in each of the three nagars. Since we work closely with women between the age 15-49 years, we decided to talk to women in this age group. And we are now visiting your home. We would like to talk about such experiences, to bring them out in the open. You could ask us, as to why we are asking you such questions / what do we hope to gain from this. This is an attempt to understand and learn from your experiences. And this is how an understanding about women's' experiences has developed. It is because many women (like you) have shared their stories and personal views and experiences that help in various forms can today be extended to several other women. We feel that in the interest of women in this community, together we - you and us

- can and would want to reach out and help. For us to be able to do that we need to understand what these debilitating experiences are and their impact on our lives. Only then can we redress the situation together in manner that the woman desires

We would like to say that there are no right or wrong answers to any of the questions. It is your experience and opinion that we would like to understand more about. It does not matter whether you are educated or not or whether you have always been in the house or have been working. Each of you is extremely important to us and we value everything that you share with us. It's only by knowing from you, that all of us together can help other women in the community. In fact, some of the questions we might be asking or experiences we might be asking you to speak about, might or might not be your own personal experiences.

We would like to assure you that whatever you share with us will be kept confidential and will only be used for research and educational purposes. Even when data is shared within the team, your identity will not be revealed. You are free to refuse to be part of this study either completely or in part. At any point if you would like to stop the interview, please feel free to do so and we will respect your wish. However, to begin with, we need you to respond whether you would like to be part of this process or not.

To share with you, on completion of the study, a report will be prepared and widely disseminated. We assure you that even then utmost care and precaution will be taken to ensure that your personal identities are not being disclosed. .

In case you need any more information, or clarification or you need any assistance, please contact us at the Arogyacha Margavar office situated at Dhangar Shikshan Mandal, near Olympic Krida Mandal, Tanaji Nagar, Safed Pool between Monday to Friday between 9.30 a.m – 5.30 p.m.

In solidarity,
Anagha, Bharati, Bhavana, Sumita, Sushma, Ujwala and Vidya

Annexure 5

AAROGYACHYA MARGAVAR SURVEY QUESTIONNAIRE

Schedule No:

Name of the investigator: Date/s of interview: No. of visits:

SOCIO-DEMOGRAPHIC INFORMATION

Q.1) Name of the respondent (*Instructions for the RI: To be masked later*)

Q.2) Nagar: (*To be masked later*)

Q.3) Address: (*To be masked later*)

Q.4) Household Composition (*Will be filled in earlier using data from the baseline and checked for changes if any*)

No.	Name (<i>To be masked later</i>)	Relation to the respondent	Sex	Age	Education (<i>RI : To ask</i>)	Occupation Nature of work(<i>RI : To ask</i>)
1						
2						
3						
4						
5						
6						
7						

Q.5) Marital status of the respondent (*To be filled in with earlier data from the baseline and checked for changes if any*)

- Married
- Separated
- Deserted
- Divorced
- Widowed
- Other(specify)
- No response

Q.6) Details about the respondent and her spouse (*Wherever information is available from the baseline, will fill in earlier and check*)

	About the respondent	About the spouse
1 Age at marriage		
2 Duration of marriage (<i>Instructions to the RI: Ask once only</i>)		
3 Religion		
4 Caste		
5 Whether it is SC / ST / OBC / High Caste / Other :		

Q.7) No. of living children (Birth order with sex) (*Instructions to the RI: Children presently not staying in this household are also to be included*)

1 2 3 4 5 6

Sex (M/F)

Q.8) Type of family (To be filled by the RI)

- Single person
- Nuclear
- Joint
- Extended Joint
- Other (kindly specify):
- No response

MARITAL HISTORY

Q.9) Was your marriage

- Arranged
- Love
- No response
- Both
- Other – specify

Q. 10) In her married life, did the respondent and her spouse live separately for any period of time?

- Yes (Go to Q.11)
- No (Go to Q 12)
- No response (Go to Q.12)

Q. 11)

- a) If they have lived separately or away from each other, when in their marriage did the separation occur?
- b) If they have lived separately what was the reason for separation – the husband was working in Mumbai and the respondent joined later, the respondent had an argument and went to her natal family, other (specify) etc

Q.12) Have you been residing in this basti since your marriage?

- Yes (Go to I)
- No (Go to II & III)
- No response (Go to Q.13)

(I) If yes, at the time of your marriage who were living in this household?

(II) If No,

(a) Where were you staying earlier?

(b) Is that place

- A village
- Town
- No response
- Slum in Mumbai
- Slum in another city

(III) Reason for shifting to the present basti

DECISION MAKING & AUTONOMY

When faced with the following situations, what do you do?

- Choose from:
- 1 Can decide independently
 - 2 Have to consult someone
 - 3 Have to follow instructions (issued by husband or other older family members such as mother-in-law)
 - 4 Other (specify)

- Q.13) Deciding on household daily purchase % 1 % 2 % 3 % 4
- Q.14) Buying things for oneself like saris / salwar etc % 1 % 2 % 3 % 4
- Q.15) Purchasing major assets like house, vehicle, etc % 1 % 2 % 3 % 4
- Q.16) Visiting your natal family % 1 % 2 % 3 % 4
- Q.17) Seeking health care for a sick child % 1 % 2 % 3 % 4
- Q.18) Seeking health care when pregnant % 1 % 2 % 3 % 4
- Q.19) Deciding the extent of schooling for your children % 1 % 2 % 3 % 4

Q.20) Going out with friends / other women from the community % 1 % 2 % 3 % 4

VIOLENCE: WHETHER IT EXISTS, FORMS & TYPES

Q.21) You have been married for ____ years. During this time, did you ever have an argument over any matter with your husband and / or family members?

- Yes (Go to Q.22) No response (Go to Q. 23)
 No (Go to Q.23)

Q.22) What forms do your arguments or fights with your husband and / or family members take?

Q.23) In the last one-month did you face harassment or violence (*been hit, slapped, kicked, repeatedly insulted, given bad words, always need to ask for money even for daily purchases, taking away your money, constantly needing to know where you are, threatening to hurt you or those you love, etc?*)

- Yes (Go to Q.24) No response (Go to Q.25)
 No (Go to Q.25)

Q.24)

- If yes, in the last one month what form did it take? Let the respondent narrate.
- RI to go through the checklist. (*See checklist*)
- What was the cause?
- Who was the perpetrator?
- What was the commonest form of violence?
- How often did it occur?

Q.25) If No in Q.23, in the last one year did you face harassment or violence (*been hit, slapped, kicked, repeatedly insulted, given bad words, always need to ask for money even for daily purchases, taking away your money, constantly needing to know where you are, threatening to hurt you or those you love, etc?*)

- Yes (Go to Q.26) No response (Go to Q. 27)
 No (Go to Q.27)

Q.26)

- If yes, in the last one year what form did it take? Let the respondent narrate.
- Then the RI to go through the checklist. (*See checklist*)
- What was the cause?
- Who was the perpetrator?
- What was the commonest form of violence?
- How often did it occur?

Q.27) If No, to Q. 25, in your married life, have you ever experienced harassment or faced violence (*been hit, slapped, kicked, repeatedly insulted, given bad words, always need to ask for money even for daily purchases, taking away your money, constantly needing to know where you are, threatening to hurt you or those you love, etc?*)

- Yes - Go to Q.27 (i) No response - Go to Q. 27 (ii)
 No - Go to Q. 27 (ii)

Q. 28) (i) If yes to Q.27, what form did it take?

- Let the respondent narrate.
- RI to go through the checklist (See checklist)
- What was the cause?
- Who was the perpetrator?
- What was the commonest form of violence?
- How often did it occur ?

(ii) If No, to Q. 27, then

- a) The RI to go through the checklist
- b) If the respondent answers yes to any form of violence listed on the checklist, then ask
- c) What was the cause?
- d) Who was the perpetrator?
- e) What was the commonest form of violence?
- f) How often did it occur?

- Q. 29) Has the violence ever physically impaired you such that
- (a) You could not go about doing your daily tasks
 - (b) Had to seek medical treatment
 - (c) Had to be hospitalised
 - (d) Other specify
 - (e) Not applicable
 - (f) No response

Q. 30) If response to Q 28 is (a) or (b) or (c), (d) how often has this happened in the last one year?

- Q. 31) Who is primarily responsible for you facing such physical impairment?
- Husband
 - Mother in law
 - Father in law
 - Brother in law
 - No response
 - Sister in law
 - If more than 1 (specify)
 - Other (kindly specify)
 - Not applicable

Q. 32) In your opinion what were the probable causes for you facing such harassment or violence?
(Instructions to the RI: List the responses given by the respondent)

Q.33)

- a) When in your marriage did the violence begin? *(Instructions to the RI: Ask about 'time')*
- b) What event triggered the violence? / What event caused the violence to begin?

COPING MECHANISMS & HELP SEEKING BEHAVIOUR

Q.34) When you experienced the last episode of violence or harassment, what did you do?
(Instructions to RI: use checklist)

Q.35) If sought help, from whom did you seek help? (neighbour, friend, natal home, community leader, Mahila Mandal, police, lawyer, doctor, CHW, any other) *(Instructions to RI: use checklist)*

Q.36) If they intervened, what did they advice you?

- Q.37) As a result of the intervention, the intensity of violence
- Has remained the same
 - Has increased
 - Other(specify)
 - No response
 - Has decreased
 - Cannot comment
 - Not applicable

Q.38) As a result of the intervention, the severity of violence

- Has remained the same
- Has increased
- Other(specify)
- No response
- Has decreased
- Cannot comment
- Not applicable

Q. 39) If did not seek help, what were the reasons for not seeking help?

Q.40) Any other comments

Thank you for your co-operation

Annexure 6

For research purpose only
Not to be used

DISCUSSION GUIDE FOR THE GROUP DISCUSSIONS

SESSION 1

Introduction

About the project

Out of you, some of you might have heard about “Aarogyacha Margavar”. We have been working in this basti since end 1997. Presently, we work in Tanaji Nagar, Shanti Nagar and Shivaji Nagar. We began our work by forming small groups of women, going to their homes or chawls and conducting health education sessions. Then women from these groups and other women became participants for training as community health workers. Today, some of these women go house to house, inquire about people’s health especially women and children, give medicines for common ailments. Apart from asking about physical health problems they also ask about mental health. Moreover, apart from health work, they have worked on other issues like ration card, birth certificate, photopass, etc and also give information on these issues.

Self introduction & introduction of the participants (Name, Education, State of origin, living in this area since how many years, occupation – their and their spouse, family composition)

Objective of today’s session:

To talk about the various “tension” experienced by women in their life and how this affects their health.

Many women have been approaching us with their problems. They have shared with us the problems or issues, which affect their lives. We would like to help them. But before that it is necessary for us to know whether these issues affect few women in this basti or many more. For this purpose, we wanted to discuss this with different groups of women in the basti to understand their experiences. And for this we would like to meet you 3-4 times. You might be thinking as to why did we call you alone and how did we select you. You might be aware that couple of months ago, some of us came to your homes and asked for some information. Based on that, we were able to gather information on the number of women in this basti. And when we decided to conduct such discussions, we selected women from various backgrounds, based on their age, education, the kind of activity they are currently engaged in and the language they speak. We came to your homes and asked whether you would like to come here to our office and speak to us.

Before we go forward, we would like to assure you that whatever you speak here will be kept confidential and for now the information will be discussed within the research team alone. Each of you has a right to refuse to be part of this discussion – either in part or full. In case you would like to know more about us or the kind of work we do, you can contact us at Aarogyacha Margavar, DSM Vyayamshala, Tanaji Nagar, Safed Pool, Jari Mari between Monday to Friday from 9.30 a.m. to 5.30 p.m. Some of us will be keeping notes of today’s discussion. It does not mention who said what but will only focus on what were the issues discussed.

As I mentioned earlier we would like to meet you 3-4 times, so before we end today, we would like to discuss the date and time based on your convenience. Before we begin the discussion, I would like to say that there are no right or wrong answers to the issues we are discussing. Also, we would like you to speak in general terms without getting into personal experiences (if you so

wish). The intention is to understand women's experiences in general and would request all of you to freely express your opinion.

Content of the session:

- All of us experience some tensions in our life. (Within the house, outside, work related, family related, etc) For some, it might be the tension of whether we will be able to reach the office on time today. What do you understand by the term "tension"?
- What are the different tensions experienced by men and women. (work related, at home, etc)
- What are the most commonly experienced tensions?
- Ranking 5 most common tensions experienced by women } Reasons
- Ranking the same on the basis of severity (for tensions experienced by women)} Reasons
- Are these tensions resolved? Yes / No
- If yes, how? Who resolves them?
- If no, why not?
- If tensions remain unresolved, what happens? (i.e. effects)
- What do you do when you face tension?

Concluding the session

We would like to discuss how unresolved tensions affect our life in detail in the next session.

SESSION 2:

In the last session, we spoke of tensions and their effects. Tensions can lead to arguments and fights. Today, we would like to discuss this in detail and what causes these tensions. Before we begin the session, I would like to know whether you discussed this with anyone. If so, with whom and what was their response.

Like I mentioned before, in the last session, we spoke of tensions and their effects. We saw that due to tensions,(**salient points from the earlier session are mentioned)fights and arguments occur or are likely to occur. Today, we would talk about this in detail. We would like to begin by relating to you a story. This story is based on women's experiences. This is a story of Lakshmi / Shanti / Girija or Salma, her husband and about her life. This incident is situated in another slum community but one has changed the name of the characters and the locale.

Once again, I would like to seek your consent and before we go forward, we would like to assure you that whatever you speak here will be kept confidential and for now the information will be discussed within the research team alone. Each of you has a right to refuse to be part of this discussion – either in part or full. Some of us will be keeping notes of today's discussion. It does not mention who said what but will only focus on what were the issues discussed. We would also like to know whether we could tape the discussion. In case you would like us not to tape the full session or part of the session, please let us know. (Ask each participant and note consent). Would again like to say that there are no right or wrong answers to the issues we are discussing. Also, we would like you to speak in general terms without getting into personal experiences (if you so wish). The intention is to understand women's experiences in general and would request all of you to freely express your opinion.

Story:

Lakshmi / Shanti / Girja is about 35 years old. She is a housewife and is educated till Vth standard. She had an arranged marriage about 14years ago. Presently she is living in a one room rented kholi in a basti. Lakshmi and her family have been residing here for the past seven years. She has three daughters. Her eldest daughter Rupali is aged 13 years, followed by Deepali aged 7 years and the youngest Vrushali, aged 4 years. Her husband is a labourer. Lakshmi's mother in law also resides with them, is ill and it is she who takes all the decisions in the house.

To go back into the past, when Lakshmi got married and came into this family, in the first 2-4 years, her mother in law did not allow her to go anywhere. Even if she wanted to go out with her husband, she had to take her mother in law's permission. Lakshmi used to do all the household work. She used to not get many opportunities to even to go to her parent's home. Even her

husband used to continuously taunt her for small - small things. And whenever, he used to get the opportunity, he used to tell her that he used to get such good proposals and he committed a mistake by marrying her.

Many years passed in this manner.

Recently, her husband came to know that the factory where he is working is closing down. After knowing this, he starts drinking and his entire salary goes in that. As there is no other source of income and no other choice, Lakshmi has to step out of the house and work. She starts selling vegetables and running the house herself. Due to her mother in law being ill, she cannot do anything. Her husband often comes home drunk abuses her and the children. He constantly demands money and if she refuses, hits her and the children. According to Lakshmi's mother in law, Lakshmi is to blame for his drinking. She often says, "because you have three daughter, your husband began drinking. You have no sons - you are useless"

Lakshmi leaves the responsibility of the entire house on her elder daughter who is 13 years old and goes to sell vegetables. ****(Separate section added on for discussion conducted with adolescent girls only - In spite of wanting to study, due to the household circumstances, she has to leave school and stay at home. All the household responsibility - cooking, cleaning, and washing clothes, looking after her siblings - comes on her. She does not realize how time flies due to the household work. She does not even get any time to do things that she wishes to do or to meet her friends. Many a times, it happens that if the food is not cooked properly - there is more salt or spice, then she has to listen to her mother's scolding and at times even gets hit or beaten by her father.)* Hence, she is often very worried about her children. One day, her elder daughter comes to her saying that the younger one has fallen and is crying. Lakshmi is forced to leave and go. That day she has not sold much and they do not have a proper meal. Many a times, she feeds everyone, but she doesn't eat as nothing is left for her. So, her health suffers too. She has often thought of dying but stops herself when she thinks of her children, because she keeps thinking, "if I die, who will look after my children?"

One day Lakshmi returns back after selling her vegetables. She has high fever. That very day, her husband comes home drunk and kicks and hits her because the food is not hot. She faints, the children are crying.....

We have never openly discussed women's experiences in a household. Our experience has shown that this is not a story of Lakshmi alone but also of many women in this community. We feel that we should start talking, relating to each other and discussing these issues openly. We are not doing anything wrong in this or our intention is not to keep names to anyone but to learn from each other's experiences, to support each other - this is our intention.

Questions:

MEANING & PERCEPTIONS OF VIOLENCE

- In your opinion what kind of behaviour occurred with Lakshmi / Shanti / Girija / Salma?
- In your opinion has Lakshmi / Shanti / Girja / Salma has been wronged in any way? Yes / No Why?
- How was she wronged? Why was she wronged?(Go through the story paragraph by paragraph)
- In your opinion was there any violence? If yes, what was it?
- Do incidents like this happen in our community? Have you heard of any such incidents? Can this incident from the story occur in our community? Does anything else happen?

NATURE & FORMS OF VIOLENCE

- What are the other forms of violence you know of? (Children / Married women / Middle aged / Elderly)
- Does violence occur on both - men and women?
- What kind of violence?
- What are the common forms of violence that occur in the community?

- Rank them according to commonly occurring violence experienced by women.
- Rank the severity (for violence experienced by women) } Reasons
- Generally when does a woman first experience violence? At what age?
- Apart from their home do women face violence where else? Yes / no. If yes, where? What kind of violence?
- Who is more prone to violence – men or women? Why?

CAUSES OF VIOLENCE

- Why do women face more violence? What are the causes of violence? Or What are the causes for violence against women? (**Probe**) What is the commonest cause?

EFFECTS OF VIOLENCE

- When there is a violent incident in the house what happens? (**Probe** for effects on women / children / elderly in the house / man)
- Do you think this incident could have been prevented? Yes / NO. If yes, how. If no, why not?
- When there is repeated abuse, do women feel like harming themselves (e.g suicide)? Yes / No? If yes, what do they do? Why do women feel like committing suicide?
- Do you think a violent household is different from a house where violence does not exist? What are the differences?

Concluding the session

Today, we discussed in detail the various kind of violence faced by women in our society – its nature, types, causes and effects. In the next session we would like to discuss on how do we cope with such situation and how can we help each other.

SESSION 3

Before beginning this session, lets recap what we discussed in the last session. Before we begin the session, I would like to know whether you discussed this with anyone. If so, with whom and what was their response.

Today, we carry forward the discussion we had last time wherein we spoke of(add what mainly emerged from earlier session...) and speak in detail about how do we cope with such situation and how can we help each other.

Once again, I would like to seek your consent and before we go forward, we would like to assure you that whatever you speak here will be kept confidential and for now the information will be discussed within the research team alone. Each of you has a right to refuse to be part of this discussion – either in part or full. Some of us will be keeping notes of today's discussion. It does not mention who said what but will only focus on what were the issues discussed. We would also like to know whether we could tape the discussion. In case you would like us not to tape the full session or part of the session, please let us know. (Ask each participant and note consent). Would again like to say that there are no right or wrong answers to the issues we are discussing. Also, we would like you to speak in general terms without getting into personal experiences (if you so wish). The intention is to understand women's experiences in general and would request all of you to freely express your opinion.

Content of the session:

The story is repeated..... Lakshmi / Shanti / Girja / Salma has been hit by her husband and she is lying unconscious.....

Questions

COPING MECHANISMS

- What will happen to Lakshmi / Shanti / Girja / Salma now? Or how will the story end?
- What do you think Lakshmi / Shanti / Girja / Salma can do to prevent this from happening again? Can she do anything? Yes / No? If no, why not?

- Do you think Lakshmi / Shanti / Girja / Salma should approach for help? Yes / No?
- If yes, where can she go for help?
- If no, why not?

RESPONSE OF FAMILY & COMMUNITY

- What sought of help you think will be available to her – within the family, community, outside the community
- When similar situations occur in our community / neighbourhood what do women do?
- Do women from our community approach for help? Yes / No? Why / Why not?
- If women do not approach for help, what happens to them?
- If women want to approach for help, where do they go? (within the family, community, outside the community)
- Within a family - who helps? What sort of help?
- Within a community – who helps? What sort of help?
- Outside a community – who helps? What sort of help?
- When does a woman ask for help? At what point? Or when is women forced to ask for help? Till then, what does she do? How does she cope?
- Apart from asking for outside help, how else does she cope with the situation?
- Does family intervene in violent situation? Who intervenes? If they do not intervene – why not?
- When there is violence in your neighboring household what do you do? / How do you respond?
- Do you intervene in such a situation? Yes / No? Why?
- Are family fights or violent incidents resolved in the community itself? How? By whom? What is done?
- Should violence remain a private matter or is it a public issue? At what point does it become public?
- Do women who face violence talk to each other? Yes / No. If yes, why?. If no, why not?

OPINION ABOUT EXISTING & WANTED SERVICES

- Do you know of any services within the community that will help a woman who faces violence?
- What information do they feel women need to deal with violence?
- What services do they think are necessary at a community level?
- Can women from the community provide some of these services?
- What support / services do you feel are essential for women facing violence? List them.

If we are to work on this issue (CEHAT) what would you expect? (time, place, where would you want these services to be place, cost, etc)