



DOMESTIC VIOLENCE : A GLOBAL PROBLEM

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Abstract : *The World Health Organization (WHO) indicates that domestic violence is primarily a violation of women's rights (Turmen, 1998). They report that efforts to improve the status of women internationally are being undertaken and supported. The sensitive, controversial nature of the topic of domestic violence can limit access to information about the subject, especially in cultures where women are ashamed to discuss such matters. Oppressive male attitudes contribute to the prevalence of violence in many developed and developing countries.*

Keywords : *Domestic Violence, Women, Family, Abuse.*

1. INTRODUCTION:

Violence against women is partly a result of gender relations that assumes men to be superior to women. Given the subordinate status of women, much of gender violence is considered normal and enjoys social sanction. Manifestations of violence include physical aggression, such as blows of varying intensity, burns, attempted hanging, sexual abuse and rape, psychological violence through insults, humiliation, coercion, blackmail, economic or emotional threats, and control over speech and actions. In extreme, but not unknown cases, death is the result. (Adriana, 1996) These expressions of violence take place in a man-woman relationship within the family, state and society. Usually, domestic aggression towards women and girls, due to various reasons remain hidden.

Cultural and social factors are interlinked with the development and propagation of violent behaviour. With different processes of socialisation that men and women undergo, men take up stereotyped gender roles of domination and control, whereas women take up that of submission, dependence and respect for authority. A female child grows up with a constant sense of being weak and in need of protection, whether physical social or economic. This helplessness has led to her exploitation at almost every stage of life.

The family socialises its members to accept hierarchical relations expressed in unequal division of labour between the sexes and power over the allocation of resources. The family and its operational unit is where the child is exposed to gender differences since birth, and in recent times even before birth, in the form of sex-determination tests leading to foeticide and female infanticide. The home, which is supposed to be the most secure place, is where women are most exposed to violence.

The American Medical Association reports that approximately 2 million women internationally are abused by their domestic partner each year (Marwick, 1998), indicating that domestic violence is an issue worthy of concern and a problem with international significance. Understanding domestic violence from a variety of perspectives is essential to continuing the advancement and success of social work intervention and treatment options designed to combat domestic abuse in the United States as well as in other countries.

Both developed and developing countries continue to suffer from domestic violence. Japan, Switzerland, United States of America, China, United Kingdom, Australia, Israel, Russia, Mexico, Lebanon, Jordan, Egypt, India, Pakistan etc. in many countries the incidents of domestic violence are happening on a large scale. Estimates indicate that 52% of women in Nicaragua, and 25 to 50% of women in South Africa have been abused by a domestic partner in their lifetimes (Baleta, 1999; Ellsberg et al., 1999). Approximately 80% of violent acts reported in Jamaica occur between intimate couples, and in one month in 1994, 409 violent acts by men against women were reported to police (Haniff, 1998). Domestic violence is considered to be a significant negative factor in women's health in the South Pacific (Lewis, 1998).

2. Factors Contributing to Domestic Violence :

Each country has unique factors that contribute to the nature of domestic violence in that particular area (Walker, 1999). Social factors such as acceptance of domestic violence, low social status of women, oppressive political structures, oppressive fundamental religious beliefs that devalue women, civil conflicts, and the existence of states of



war continue contribute to the existing prevalence rates of domestic violence in other countries (Walker, 1999). Domestic violence research efforts have begun to identify a variety of factors associated with involvement in and protection from domestic violence. In international studies, stress related factors, such as: poverty, lack of education, lack of financial resources, levels of jealousy, excessive drinking, substance abuse and living in a large family have been associated with increased risk of domestic violence (Martin et al., 1999; Xingjuan, 1999). A transnational study of two Mexican communities revealed that more economic opportunities, more rights to privacy and more legal protection gave women in the United States more ability to demand violence free marital relationships when compared to the women remaining in Mexico (Hirsch, 1999). A surprising number of women in Chiapas cited the victims' transgressions of gender roles as primary causes of domestic violence (Glantz, 1998). These women also reported the following postulated reasons that men commit women abuse: excessive drinking, violent male tendencies, controlling male tendencies, pressure from another woman/lover, and excessive jealousy. Haj-Yahia (1998) reports that a substantial number of Palestinian women report that wife beating is justified under certain conditions, including sexual infidelity and perceived female challenge of manhood.

3. Types of Violence and Abuse :

Some factors related to domestic violence surface in specific cultures. In addition to typical physical, emotional and verbal assault associated with domestic violence in the United States, unique types of international violence against women and female children also include non consensual sex-selection abortions, private and public beatings, public verbal abuse, honor killings, acid throwing and stoning, lack of access to education and medical care, forced prostitution, genital mutilation, bonded labor, and violence perpetrated onto young women by older women (Fernandez, 1997; U.S. Government Printing Office, 2000).

Honor and Dowry Killings

Recent research indicates that a vast amount of domestic murders is committed globally in the name of 'honor killings.' Many murders in Jordan are the reported result of an honor killing (Faquir, 2001). Honor killings occur when a woman is killed by a male member of her household, usually a husband, brother, or father, for dishonoring the family status, often because of perceived sexual indiscretion (Faquir, 2001). Although such a practice is illegal in Jordan as well as internationally, social values in Jordan that severely subjugate women allow honor killers to go unpunished for their crimes (Faquir, 2001). Great efforts aimed at social, legal, and political reform will be necessary to advance the status of women and change the social acceptance of honor killings in Jordan (Faquir, 2001) and other countries with similar social value systems. Study results indicate that in India, domestic murders are often perpetrated so that husbands may collect on their wives' dowries (Vindhya, 2000). The low status of women and the limited effectiveness of laws protecting women allow dowry killings to continue virtually unacknowledged in India (Vindhya, 2000). Knowledge of unique issues is important for social workers in the United States, as it is possible that such honor dowry killings among certain immigrant groups could occur in the United States as well, creating unique needs for culturally appropriate social work services and interventions.

Health Effects of Domestic Violence

The international health care expenses caused by domestic violence are not quantifiable (Haniff, 1998). The World Health Organization (WHO) indicates that domestic violence puts women at risk internationally for the negative health outcomes of physical injury, mental health problems, sexually transmitted diseases, including HIV/AIDS and unwanted pregnancies (Turmen, 1998). Women in Mexico and women across other cultures report high rates of emotional, physical, and financial abuse and indicate suffering from illnesses, bruises, lesions, loss of teeth, tumors, unwanted pregnancies, shortened life, mental harm, depression, posttraumatic stress syndrome (PTSD), emotional distress, fatigue, sleeping and eating disorders, general fear, other psychological effects and trauma, and exposure to contraction of sexually transmitted diseases-especially HIV/AIDS, as a result of involvement in domestic violence (Diaz-Olavarrieta, et al. 2001; Ellsberg et al., 1999; Fischbach & Herbert, 1997; Glantz, 1998; Haniff, 1998). Finkler (1997) indicates that domestic violence in Mexican women robs them of their core dignity, which is then associated with the development of symptoms of physical illness being more common in abused women there. Results from one Australian longitudinal study indicate that women who report lifetime adult intimate violence received significantly more psychiatric diagnoses than women who report no history of abuse (Roberts et al., 1998). At-risk girls in Israel and the Arab sectors were found to lack access to medical care when cases of intimate violence arise (Steiner, 1999). These negative health effects are magnified by remaining cultural pressure in these countries for women to endure domestic violence.

Violence and Pregnancy

Perhaps the most significant health effect reported in recent literature reveals the serious relationship between domestic violence and pregnancy. The physical and mental health effects of domestic violence were concluded to be a serious reproductive health concern for women in Pakistan and the Caribbean (Haniff, 1998; Fikree & Bhatti, 1999). Evidence suggests that 34% of domestic assaults in Ireland are perpetrated upon pregnant women (Birchard, 2000), while 15% of ever married Pakistani women report being regularly abused during pregnancy (Fikree & Bhatti, 1999). Jejeebhoy (1998) indicates that the patriarchal culture pervasive in rural India encourages the acceptance of domestic abuse, even during pregnancy, and appears to increase infant and fetal mortality. Wang and Chou (2001) indicate that men who father babies with adolescents in Taiwan are much more likely than other adult men to abuse the adolescent during her pregnancy, thereby putting the health of both baby and mother at serious risk. The existence of pregnancy was found to increase the risk of minor assaults for Spanish-speaking women in the U.S. (Wiist & McFarlane, 1998), Hispanic women (Jasinski & Kantor, 2001) and Latina migrant farm workers (Van Hightower, Gorton & DeMoss, 2000).

Social Stigma and Lack of Acknowledgement

The sensitive, controversial nature of the topic of domestic violence can limit access to information about the subject, especially in cultures where women are ashamed to discuss such matters. Study results suggest that in Jamaica, women are blamed for domestic violence and they are socially responsible to keep quiet about it if it occurs (Haniff, 1998). Research indicates that the notion of domestic violence in Japan is typically not discussed, although domestic violence against women has recently begun to be acknowledged in Japan (Kozu, 1999). Lack of acknowledgement of the problem in such countries limits intervention options and treatment strategies. Oppressive male attitudes contribute to the prevalence of violence in many countries. Arab men in Israel reported that they are not responsible for their violent behavior towards their intimate partners because such violence is caused by factors such as: lack of communication skills, traditional expectations of marriage, and being reared with and therefore taught to use domestic violence as a family management strategy (Haj-Yahia, 1998). Men in Greece mostly reported that they believe women are equal to men, however women there reported that they regularly experience discrimination. Research shows that rates of domestic violence in Greece are about the same as in the U.S. (Antonopoulou, 1999).

REFERENCES:

1. Ammar, N. H. (2000). In the shadow of the pyramids: Domestic violence in Egypt. *International Review of Victimology*, 7, 29-46.
2. Antonopoulou, C. (1999). Domestic violence in Greece. *The American Psychologist*, 54, 63-65.
3. Ashford, L. S. (2001). New population policies: Advancing women's health and rights. *Population Bulletin*, 56, 3-44.
4. Bell, C. C. & Mattis, J. (2000). The importance of cultural competence in ministering to African American victims of domestic violence. *Violence Against Women*, 6, 515-533.
5. Birchard, K. (2000). Ireland changes stance on domestic violence. *The Lancet*, 356, 922.
6. DePoy, E., Hartman, A., & Haslett, D. (1999). Critical action research: A model for social work knowing. *Social Work*, 44, 560-568.
7. Faquir, F. (2001). Intrafamily femicide in the defense of honour: The case of Jordan. *Third World Quarterly*, 22, 65-83.
8. Fernandez, M. (1997). Domestic violence by extended family members in India. *Journal of Interpersonal Violence*, 12, 433-455.
9. Fikree, F. F. & Bhatti, L. I. (1999). Domestic violence and health of Pakistani women. *International Journal of Gynecology and Obstetrics* 65, 195-201.
10. Ghandi, A. (1997). Violence against women, with reference to 498A and 304B Indian Penal Code. *Indian Journal of Social Work*, 58, 582-598.
11. Haj-Yahia, M. M. (1998). Beliefs about wife beating among Palestinian women. *Violence Against Women*, 4, 533-558.
12. Haj-Yahia, M. M. (1998). Perceptions of abusive and violent husbands by engaged Arab men in Israel. *Journal of Social Psychology*, 138, 6.
13. Haniff, N. Z. (1998). Male violence against men and women in the Caribbean: The case of Jamaica. *Journal of Comparative Family Studies*, 29, 361-369.
14. Jejeebhoy, S. J. (1998). Associations between wife-beating and fetal infant death: Impressions from a survey in rural India. *Studies in Family Planning*, 29, 300-309.
15. Kozu, J. (1999). Domestic violence in Japan. *The American Psychologist*, 54, 50-55.

13. Lazarus-Black, M. (2001). Law and pragmatics of inclusion: Governing domestic violence in Trinidad and Tobago. *American Ethnologist*, 28, 388-416.
14. Malekoff, A. (1994) Action research: An approach to preventing substance abuse and promoting social competency. *Health & Social Work*, 19, 46-53.
15. Martin, S. L., Tsui, A. O., Maitra, K., & Marinshaw, R. (1999). Domestic violence in Northern India. *American Journal of Epidemiology*, 150, 417-427.
16. Marwick, C. (1998). Domestic violence recognized as a world problem. *Journal of the American Medical Association*, 279, 1510-1511.
17. Perilla, J. L. (1999). Domestic violence as a human rights issue: The case of immigrant Latinos. *Hispanic Journal of Behavioral Sciences*, 21, 107-109.
18. Reese, D. J., Ahern, R. E., Nair, S., O'Faite, J., & Warren, C. (1999). Hospice access and use by African Americans: Addressing cultural and institutional barriers through participatory action research. *Social Work*, 44, 549-559.
19. Sarri, R. & Sarri, C. (1992). Organizational and community change through participatory action research. *Administration in Social Work*, 16, 991-1000.
20. Seith, C. (2001). Security Matters: Domestic violence and public social services. *Violence Against Women*, 7, 799-820.
21. Turmen, T. (1998). The health dimension. *UN Chronicle*, 35, 18-20. U.S. Government Printing Office. (2000). UNICEF says domestic violence against women and girls still a global epidemic. *Public Health Reports*, 115, 304.
22. Vindhya, U. (2000). Dowry Deaths in Andhra Pradesh, India. *Violence Against Women*, 6, 1085-1109.
23. Weis, J. G. (1989). Family violence research methodology and design. In L. Ohlin & M. Tonry (Eds.), *Family Violence* (pp. 117-162). Chicago: University of Chicago Press.
24. Xingjuan, W. (1999). Why are Beijing women beaten by their husbands? *Violence Against Women*, 5, 493-505.
25. Yick, A. G. (2000). Predictors of physical spousal-intimate violence in Chinese American families. *Journal of Family Violence*, 15, 249-268.
26. Yick, A. G. & Agbayani-Siewart, P. (1997). Perceptions of domestic violence in a Chinese American community. *Violence Against Women*, 12, 832-847.
27. Yoshihama, M. (2000). Reinterpreting strength and safety in a socio-cultural context: Dynamics of domestic violence and experiences of women of Japanese descent. *Children and Youth Services Review*, 22, 207-229.