

**Domestic Violence against
Women in Kerala**

Pradeep Kumar Panda

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**Kerala Research Programme on Local Level Development
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1. Introduction

Domestic violence is a problem that affects the lives of many women both in the urban and the rural areas. It is also an episode that has been found to recur throughout the life cycle of women and has extensive repercussions. According to the most commonly used definitions, it may comprise “physical, emotional, sexual and economic abuse occurring in an adult relationship between intimate or formerly intimate partners with a pattern of controlling behaviour by the abusing partner”. Domestic violence takes many forms and occurs in all settings, within the household and is in almost all cases, perpetrated by men. Cultural and social norms that enhance patriarchal values are promoted in most societies including India and in the process they perpetuate inequality between men and women, and condone violence against women.

Scope of domestic violence

Although violence takes place within households, it affects women in all the spheres of their life. It affects their autonomy, their productivity, their capacity to care for themselves, and their children and their quality of life (Moreno, 1999). It includes domestic violence, trafficking in women, forced sex, sexual violence, and dowry-related killings.

United Nations definition

The Declaration on the Elimination of Violence Against Women, adopted by the United Nations General Assembly in 1993 defines violence against women as “*any 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*”. It encompasses, but is not limited

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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 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”.

Accurate and comparable data on violence are needed at the community, national, and international levels to strengthen advocacy efforts, help policy-makers understand the problem and guide the design of interventions. Measuring the true prevalence of violence is, however, a complex task. Statistics available through the police, women’s centres, and other formal institutions often underestimate levels of violence due to under-reporting.

Population-based research is more accurate, but the lack of consistent methods and definitions makes comparisons across studies difficult. Survey questions often ask whether women experience specific acts of violence, during a fixed period of time. While some studies examine only physical abuse, others may consider physical, sexual, and psychological abuse. In family violence research, some may include only those women currently in a relationship, while others report on women who have ever been married.

The severity of violence recorded may also vary among studies. For example, one researcher may record all instances of violence regardless of whether they result in bodily injury, whereas another researcher may record only incidents in which physical injury occurred.

Violence across the life span

Violence has a profound effect on women. Beginning before birth, in some countries, with sex-selective abortions, or at birth when parents who are desperate for a son may kill female babies, it continues to affect women throughout their lives. Each year, millions of girls undergo female genital mutilation. Female children are more likely than their brothers to be raped or sexually assaulted by family members, by those in positions of trust or power, or by strangers. Women, who become pregnant before marriage may be beaten, ostracised or murdered by family members, even if the pregnancy is the result of rape.

After marriage, the greatest risk of violence for women continues to be in their own homes where husbands and, at times, in-laws, may assault, rape or kill them. When women become pregnant, grow old, or suffer from mental or physical disability, they are more vulnerable to attack. Women who are away from home, imprisoned or isolated in any way are also subject to violent assaults. During armed conflict, assaults against women escalate, including those committed by both hostile and “friendly” forces.

Review of literature

In the past decade, there has been a spate of research studies on violence across the world.

A large number of studies were done in the Indian sub-continent too. In India, most of the studies focused on dowry-related violence and deaths (Vindhya, 2000; Waters, 1999; Parameswaran, 1996; Fernandez, 1997), childlessness (Kohher-Reissman, 2000) and the gender and agency dimensions of domestic violence (Hegde, 1996). Wife-beating alone has been the subject of research in two important studies by Jejeebhoy and Cook (1997) and Rao (1997).

National studies

In the study conducted by Rao (1997), ethnographic and econometric methods were used to study the determinants of wife-abuse in a community of potters in the Karnataka State in South India. The study used a mix of qualitative and quantitative data to examine the inter-connections among socio-economic conditions, status of women, marriage markets, family decision-making processes, fertility, and health and nutrition. In-depth interviews and focus group discussions were conducted to draw hypotheses which were then tested with survey data collected from the same population using econometric techniques. The qualitative analysis based on interviews with 70 women and 30 men revealed that wife-beating is a common practice, especially in mild forms, and that it is acceptable behaviour in the community. It is not considered a problem. The causative factors of abuse, as revealed in the qualitative survey, included excessive liquor consumption by husbands, hostilities connected with dowry, female sterilisation, and the number of living male and female children. This indicates that the qualitative results and the quantitative evidence conform to each other.

It was found that sterilisation leads to fear on the part of husbands that their wives would turn unfaithful. On the other hand, female sterilisation indicates the end of a wife's reproductive phase and lowers the husband's costs of sexual violence towards her. While the number of living female children has a positive but insignificant effect, the number of male children reduces the incidence of wife-beating.

Visaria (1999) found in Kheda district of Gujarat that two-thirds of the women had undergone some form of psychological, physical or sexual abuse. Each form of abuse cut across all ages, castes, and education all levels. The most frequently reported types of violence against women were abusive language (80 percent), beating (63 percent), forcing women back to their parental home (52 percent) and threats to throw them out (51 percent). Women from Scheduled and other backward castes reported much higher incidence of physical abuse than others. The causes for violence were related to complaints about meal preparation and childcare and economic stress. An important finding in this study is that women living in nuclear families reported more violence than women living in extended or joint families and that higher proportions of women married for long periods of time reported more episodes of physical violence than newly married women.

A study on women's autonomy conducted in 1993-'94 in two districts, each in Tamil Nadu and Uttar Pradesh addressed issues closely related to wife-beating, women's decision-making authority, personal freedom of movement, and wife-husband relations. A total of

1842 rural women aged 15-39, constituted the sample. The respondents consisted of both Hindus and Muslims. Wife-beating was found to be widely prevalent in all settings, the most often stated cause of beating being 'disobedience' of the husband's orders, or failure to meet husband's expectations. Violence was justified because it was husband's 'prerogative'. The study held the state accountable for its failure to punish perpetrators (Jejeebhoy and Cook, 1997).

It is also found from various studies that close relatives, especially members of the husband's family play important roles perpetrating violence against women (Devi Prasad, 1990; Fernandez, 1997). In a vast majority of cases, the perpetrator is the husband, assisted by the mother-in-law. Other members of the husband's family such as brother-in-law and sister-in-law also are found to actively participate and abet the violence (Devi Prasad, 1990). In an enquiry which made 15 case studies in Bombay during 1985-'99 it was found that domestic violence by extended family members in India constituted interplay of gender and generation. A young daughter-in-law is subordinate not only to men but also to older women in the family as well. Mothers-in-law and sisters-in-law contribute to the violence. The study concludes that Indian women's experiences with violence vary by their generations or life cycle stages, social class, caste, and region.

A study by Sen (1998) examined violence in intimate relationships, namely women's experiences of male violence at the hands of husbands (or male partners) in the city of Calcutta. Information was collected from 52 relationships by interviewing women about their histories including educational experiences, migration patterns, paid employment, and physical and sexual violence. It was found that in general, women suffered extreme physical abuse and for long durations. Employment of women was not found to be unassociated with violence, indicating that irrespective of whether a woman is an earning member or not, she faces hostility and violence.

An important dimension that has not been explored adequately is domestic violence against childless women. An attempt in this direction was made by Kohler-Reissman (2000) by analysing married women's experiences and the processes of resistance and stigma. Childlessness is marked by profound psychological trauma and the role of the family and the community in the creation of such trauma is important. Kohler-Reissman interviewed 31 childless married women in the age group of 22-27 years in the State of Kerala. The narrative method was used to collect the data. Women described their experiences as shameful and distressed and considered their fate of childlessness abominable. They did not have a respectable status within the family; and it was difficult for them to attend family gatherings or festivities with humour. They are discriminated against in all social forums. Poor women become all the more detestable. But the strength of resistance to discriminatory behaviour is found to be more.

Domestic violence is also seen to be associated with the state of health of women, especially their reproductive and sexual health. The data come from a community-based survey in two culturally distinct sites of rural India, Uttar Pradesh and Tamil Nadu. The results suggest that wife-beating is deeply entrenched habit and that attitudes uniformly justify

wife-beating. It was found that health consequences of domestic violence in terms of infant and foetal mortality are considerably high. The women who have suffered beatings appear to be significantly more likely than other women to have experienced foetal wastage or infant deaths irrespective of religion or residence. The association between wife-beating and foetal and infant mortality are found to persist, even after controlling for other factors. The results also suggest that wife-beating and mortality levels are higher in Uttar Pradesh where women are actually powerless than in Tamil Nadu where women have some measure of autonomy, and as a result of marriage and residential patterns, some support from kinsfolk.

In a large multi-site household survey INCLIN recently estimated the intensity of domestic violence in India and its correlates and outcomes. The community, family, and individual factors associated with family violence were examined. A uniform sampling strategy was drawn and families in which at least one woman aged 15-49 (years) and who has at least one child (<18 years of age) living in the household were considered. A woman was randomly chosen from all eligible women within the household irrespective of whether she was currently married or not. The participation rate was 90 percent in the rural stratum and 76 percent in the urban slum and 67 percent in the urban non-slum. About 50 percent of the sample reported as having experienced at least one of the behaviours outlined above at least once in their married life. About 44 percent reported at least one psychologically abusive behaviour and 40 percent reported experiencing at least one form of violent physical behaviour. Dowry harassment was seen to have been one of the major precipitating factors of violence within the marital home. The gender gap in employment status emerged as an important risk factor for violence. More than half (58 percent) of the women respondents reported that the members of their immediate family were aware of the violence. In addition 41 percent of them reported that their neighbours also knew of the violence. However, only less than 10 percent had left their husbands; surprisingly, more than 55 percent of the women perceived violence as a normal part of marriage life.

A similar study by Martin, et al, has examined relationships between men's reports of wife-abuse and reproductive health issues in Uttar Pradesh from the PERFORM survey in 1995-'96. A total of 6632 married men aged 15 to 65 years who lived with their wives and completed all survey questions for the study variables were considered. The main measures used were physically and sexually abusive behaviours toward wives, sexual activities outside marriage, sexually transmitted disease (STD) symptoms, contraception use, unplanned pregnancies, and socio-demographic characteristics. The results indicate that 54 percent of men reported not having abused their wives; 17 percent reported physical but not sexual abuse of their wives; 22 percent reported sexual abuse without physical force; and 7 percent reported sexual abuse with physical force. Abuse was more common among men who had extramarital sex. Similarly, men who had STD symptoms were more likely to abuse their wives. Unplanned pregnancies were significantly more common among wives of abusive men, especially sexually abusive men who used force. The study concludes that wife-abuse appears to be fairly common in northern India and that abusive men were more likely to engage in extramarital sex and have STD symptoms. It also suggests that the men who have STD symptoms might have acquired them from their extramarital

relationships, and placed their wives at risk of STD acquisition sometimes via sexual abuse. These abusive sexual behaviours also would result in increasing the number of unplanned pregnancies (Martin, et al, 1999a and 1999b).

A study of domestic violence against women based on an investigation of hospital casualty records in Mumbai was undertaken by Daga, et al (1998). Data on all women whose cases were recorded in the emergency police register of the JJ Hospital during the year 1996 were examined. As many as 23 percent women came under the category of victims of domestic violence. They had either suffered assaults by a family member or a known person or, in a minority of cases, attributed the burns they suffered to their husbands or other family members. Another 44 percent women appeared to have been victims of violence; 19 percent refused to name the perpetrator of the assault; 9 percent attributed the burns they suffered to accidental stove burst; 16 percent were clear cases of attempted suicide. An important finding is that over one-fifth of the injuries took place during the late hours of the night, raising doubts about reports of accidents. Most women were of the 20-34 years age group. The results do indicate that violence is an invisible public health problem.

International studies

Internationally, the subject of domestic violence has moved to the forefront of research and policy. Domestic violence has become an issue of increasing importance and a number of studies have been conducted in recent decades. In the analysis of data from the 1985 National Family Violence Re-survey, it was found that there were no differences in reports of domestic violence between pregnant and non-pregnant women, after controlling for age (Gelles, 1988).

Strauss (1980) had reported that 11.6 to 12.6 percent of couples beat up each other at some time during their relationship; but he did not find long-term prevalence of violence against individuals, in the national probability samples that he examined although 28 to 30 percent of couples had experienced some domestic violence during the course of their marriage life. Generally a mean of six violent episodes were reported a year. Frequent alcohol use by the male partner has been found to be associated with increased likelihood of violence in the home.

A study in mainland China has examined the extent to which wife-abuse exists under the Communist regime. An attempt was made to delineate the prevalence of and the changing trends in wife-abuse and to establish the linkages between wife-abuse and the underlying social mechanisms. Survey data on marriage and family relations in Chengdu, not collected specifically for a wife-abuse study but contained useful information, were utilised for the purpose. The sample comprised 586 ever-married women between the ages of 20-70 years, via a random sampling procedure. Another survey of Hebei province from Baoding had a sample of 636 ever-married women. Both these samples were compared to see the prevalence of and changing trends in wife abuse. A composite index of wife-abuse, following the Strauss and Gelles model, was obtained and statistical models were used for obtaining results. It was found that urban China was not free of family violence. In the Chengdu

sample, husbands were seen to have abused about 57 percent of their wives at some point of time or the other during the course of married lives. The incidence of non-physical abuse appeared more frequently than physical abuse. Patriarchal family system and gender inequality within the family are responsible for the prevalence of wife-abuse. Close-knit kinship ties and living with parents were found to be effective in lowering wife-abuse (Xu, 1995).

Ramirez and Vazquez (1993) conducted a cross-sectional study, on the epidemiology of violence within the home against women and girls older than 12 years, in the state of Jalisco in Mexico. The findings show that 44 percent of the 1163 rural women and girls and 57 percent of 1228 urban women and girls reported being physically abused in their homes. They reported that husbands inflicted the abuse in 60 percent of the cases and parents in 40 percent. Among the demographic variables examined, low levels of education and families with seven children or more were associated with domestic violence.

In Pakistan also, domestic violence is found to have emerged as a reproductive health and rights issue. A study was carried out in three out-patient clinic facilities catering for the low and middle income population of Karachi. The criterion for selecting the respondents was: currently married; living with their husbands for at least the past one year; and permanent residents of Karachi. The results of these cross sectional study of 150 women revealed that they are subject to violence at an alarming proportion with serious consequences to their physical and mental health. Nearly one-third of the women had experienced physical violence at least once in marital life, the reasons being financial constraints, children or in-laws, although these factors were not significantly associated with anxiety/depression. The study suggests that appropriate intervention strategies should be undertaken to generate awareness about the health consequences of wife-battering (Fikree and Bhatti, 1999).

The results of the first large-scale, community-based study conducted in rural South Africa show that intimate partners has assaulted 25 percent of women. The 1306 women interviewed were randomly sampled from Eastern Cape, Mpumalanga, and the Northern Province. It is estimated that during the final year of the survey, physical injury to women in these provinces cost the health system about US\$4.86 million. And it is found that women appeared to contribute to their abuse by supporting patriarchal beliefs. A third of the women in Northern Province, for example, believe that being beaten by their partners is an expression of love. In the second study, interviews with 1394 male council workers in Cape Town in the Western Cape Province showed that about 50 percent of workers admitted to having physically abused their female partners in the past decade.

A population-based survey was carried out in 1993 in Nicaragua on the issue of wife-abuse. The study aimed at measuring the prevalence, frequency, and severity of physical abuse of women by current or former intimate partners and to identify associated risk factors. A cross-sectional survey was performed in Leon, Nicaragua's second largest city. A representative cluster sample of 10867 women (15 to 49 years old), was developed for a household survey on reproductive and child health was used to obtain a sub-sample of 566 women. Of these women, 488 were identified and interviewed. No woman refused to

be interviewed. The findings show that one-half of ever-married women of childbearing age in Leon had experienced physical violence from a partner at some point in their lives and one out of five women had received severe beatings within the past one year. However, it is unknown whether this association and the one between violence and urban/rural zone are due to actual variations or whether they simply reflect a greater reluctance of both rural women and women of higher socio-economic status to disclose violence. The association found between violence and a history of violence in the husband's family is consistent with research findings in other countries suggesting that violent behaviour may be learned from childhood experiences. The study concludes that wife-abuse represents a significant public health concern in Nicaragua, in terms of its high prevalence as well as its frequency and severity, and that Nicaraguan women experience the risk for spousal abuse, regardless of age and educational background.

In order to study the incidence of domestic violence against women in pregnancy, women attending the antenatal clinic of a local teaching hospital in China Tsan Yuk were interviewed by a designated research nurse in a private setting with the husband or male partner absent. Verbal consent was obtained from the woman before the interview. The questionnaire was derived from the Abuse Assessment Screen. Of the 631 women interviewed during their first antenatal visit, 113 (17.7 percent) had a history of abuse. Domestic violence occurred during the current pregnancy in 27 women (4.3 percent). About 23 women (3.6 percent) said that they were afraid of their partner: 17 of them belonged to the abused group (17.2 percent). The husband was the perpetrator in the majority of cases, 86.9 percent of the abused group as a whole, 77.8 percent of violence during pregnancy, and 96.6 percent of sexual abuse. The mean age was 29.1 years for the abused group and 29.6 years for the non-abused group. The incidence of abuse was significantly higher among the Chinese (17.2 percent) than among the non-Chinese (6.6 percent); and higher among single/divorced/widowed women, and smokers, drinkers and unemployed women, although the difference was not statistically significant. Risk factors for abuse that were statistically significant included unplanned pregnancy ($P=0.002$) and women with husbands/partners who were manual workers or unemployed ($P<0.05$). No difference was found between the abused and the non-abused groups in terms of the number of years of marriage, parity, gestation at first antenatal booking, drug abuse, and total family income.

A similar study was undertaken in Bangladesh to examine three occasions of sexual violence within marriage – namely, violence during menstruation, pregnancy, and neonatal periods. The reference period was one year. Data for this research were collected from an intensive monitoring system known as Watch 3 in 70 villages located in 10 regions of Bangladesh. A team of 10 resident female researchers who stayed in the study villages for more than two years conducted in-depth interviews. A structured questionnaire was used to collect detailed information of their socio-demographic characteristics and their involvement in credit operations. The interviewers kept intimate relationships with the participants as they visited the women once a month for two years consecutively as part of a larger study. Nearly one-third of the sample women were found to participate in credit-based income-generating projects, whereas the other two-thirds were not.

The study focused on the association between the participation of women in credit-based income-generating programmes and the prevalence of sexual violence in rural Bangladesh. About 27 percent reported that they had been victims of sexual violence at least once in the past year. Nearly eight percent had encountered situations in which they were forced to engage in sexual acts during their menstrual period, although the menstrual period is regarded as an unhygienic condition of a woman, from a religious point of view. The occurrences of sexual violence by socio-demographic characteristics suggest that prevalence of violence varies by age, education, and economic status. In general, sexual violence declines with age of both the spouses. For example, forced sex during menstruation and neonatal period is very high among young women (15-19 years). Marital rape during pregnancy remains high until women become 30 years old. It is interesting to note that sexual violence during pregnancy and neonatal periods drops significantly when husbands reach the age of 40 years. Older women are less likely to be abused than younger women. It is quite possible that older women achieve a respectable position in the family as a result of becoming the mother of adult children. The prevalence of sexual violence is reasonably high, and it might have already created significant health problems among women in Bangladesh. Although a negative association between the behavioural aspects of micro-credit programmes and the prevalence of sexual violence is established in this research, it is clear that credit programmes alone cannot do much to have a significant impact on reducing violence against women (Abdullahel Hadi, 2000).

Using a large-scale survey among women of reproductive-age in rural Bangladesh, an attempt was made to present evidence on the prevalence of domestic violence in this population. Subsequently the determinants of domestic violence within this population were explored for the effects of both individual and community-level factors. Data for the study came from the MCH-FP Extension Project of the International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR, B). At the time of the study, the Extension Project was located in two separate areas of rural Bangladesh - the Sirajgonj area in the north-central region of the country, and the Jessore area in the south-western part of the country, adjacent to the Indian border. All currently married women aged 15 to 49 years in existing SRS households were included in the sampling frame. A total of 10,368 women were successfully interviewed over the period June through December 1993, representing over 90 percent of the sample of women eligible for inclusion in the survey. The questionnaire included a range of issues related to the household: socio-economic and demographic characteristics, health and family planning service utilisation, and women's status and mobility. The module also included a limited subset of questions on domestic violence. With regard to household characteristics, a highly significant and strong inverse relationship between landholdings by women and the risk of domestic violence is found in both the areas. Women in non-Muslim households, those married to educated husbands, and women married for longer durations (20 years or more) all experienced significantly low levels of domestic violence. Contrary to expectations, a larger number of living sons is not protective condition for women against violence; it is only weakly associated with higher risks of violence. With respect to parental support variables, either proximity of parents' residence or substantial assistance from parents is significantly protective against violence. In both the study areas, education of the wife was found to exert a highly significant inverse

relationship with the risk of violence. In culturally conservative settings physical mobility of women into activities regarded as almost exclusively belonging to the male space' and resulting in increased contact with men, is likely to generate grounds for conflict within the family. Higher maternal education was found to be inversely related to domestic violence in both the study areas. The presence of women's savings and credit groups confers significant protection against the risk of domestic violence. This effect appears to operate largely at the community rather than at the individual level (Koenig, et al, 1999).

The context of Kerala

The State of Kerala is held as an example for other regions to emulate, of how a comparatively high quality of life could be achieved with relatively low level of income. Kerala has done exceptionally well in terms of all human development indicators: very low level of infant mortality rate (11 per 1000 live births); high longevity of males and females (69 years for males and 75 years for females); below-replacement level of fertility (1.7 children per woman); near universal literacy rates of males and females (94 percent for males and 88 percent for females); and high levels of health and nutritional status of women and children. Researchers and policy makers have been engaged in evaluating these remarkable achievements, the so-called Kerala model of development (Dreze and Sen, 1995; Heller, 1995; Kannan, 1998; Lieten, 2002).

The reasons for this enormous human development in Kerala are many. The implementation of comprehensive redistributive land reforms in the early 1970s transformed the agrarian relations and facilitated social change in Kerala. The conferment of ownership of land titles to hutment dwellers, small artisans, and agricultural labourers liberated them from feudal subservience and enhanced their bargaining power and human dignity. Local level struggles and broad-based social mobilisation struggles from below provided the erstwhile deprived sections institutionalised bargaining power to claim their rights for minimum wages, fair working conditions, social protection and other welfare entitlements including food subsidies. Legislative and institutional changes in the labour market through responsive government interventions paved the way for wage and employment security. In fact, Kerala has a comprehensive pension and social security regime, especially in the informal or unorganized sectors, which include agricultural labourers, head load workers, construction workers, toddy tappers and widows, to name only a few.

Political mobilisation and collective action around educational reforms played a major role in creating an enabling environment for mass literacy. The liberal policies followed are also linked to advancement in the status of women especially of the socially and economically deprived groups.

The social movements of yesteryears also played significant roles in enhancing the status of women and creating a liberal attitude towards girls' education. And the system of matriliney in powerful and influential communities such as the Nairs where women controlled the property and other important duties of the household, had an influence on the society in their appreciation for women's high status (Agarwal, 1994). The enlightened educational

policies pursued in the erstwhile Travancore and Cochin States, contributed in many ways to the development of the health sector and the utilisation of available health services.

The twentieth century witnessed many social movements that benefited women in diverse ways such as supplying them with information and education on the various oppressive tactics used by upper castes and the elite in society against the poor, the landless and the lower castes. The radical political traditions in Kerala and the mass mobilisation of the backward castes for affirmative action also had their influence on the creation of the stage for voicing their rights. Women's status was, in the process, enhanced with growing participation in these movements, increasing exposure to education, rising assimilation of progressive ideas, and rising appreciation of their own rights.

The question here is “are these tendencies and the struggle for rights and the images of the emancipated woman of Kerala true”? “Are they visible today?”

Poverty and unemployment levels that have risen sharply consequent on the introduction of economic reforms appear to have rendered poor women much poorer. Commercialisation of agriculture tends to reduce female labour and many women are reportedly thrown out of the work force. Even those who are employed are reportedly paid lower wages than are paid to men in comparable jobs. Reductions in public spending on social services are also found to affect women. The gender relations do not seem to have improved much despite progress in education and health sectors.

Overview of status of women in Kerala

An overview of the situation of women in Kerala presents a paradoxical picture. Laudable achievements in the socio-demographic realms notwithstanding, such as favourable sex ratio, and high levels of literacy, unseen in other parts of the country, issues of economic impoverishment, low participation in political activity, malnourishment and low labour force participation rates are rampant among women in Kerala. Harassment of women in the domestic sphere and the work place is also observed to be quite common in the State.

What are the causes for this malady and what has happened to the Kerala model of development? Why are women conspicuously absent at the centre-stage of development, in spite of high social development?

The paradox of social development and economic backwardness was documented about two decades ago. What is not often discussed is the “gender paradox”, where women have high levels of education but low levels of participation in the labour force and in the political activities. For example, women's work participation is lower than in other south Indian States with less than 25 percent of women in the work force. Researchers are unanimous in their view that women's education, access to resources, health care and food, high age at marriage, and low fertility levels are requisites for high status of women. Yet in Kerala overcoming of the constraints in these aspects has not led to a situation in which women have a controlling “space” of their challenging of patriarchal attitudes. There

is obviously an “invisible” crust within the public domain that operates in an obnoxious manner to keep women away from bargaining (in terms of power and influence) and also avoiding confrontation between men and women, for another “kind” of development. Therefore to enable and to create an identity amongst women and for recognition of their rights, several women’s organisations have emerged and are actively addressing the issues of gender imbalances in Kerala society (Devika and Kodoth, 2001).

In the context of rising domestic violence and harassment of women at the workplace and in public places, a renewed vigour is in evidence in recent years in attempts to understand and foreground “gender subordinations” (of all hues) alongside caste and class. The movements of yesteryears were based on caste and class and power relations defined in those terms. The gender perspective was not on the agenda of the movements. The gains that accrued to women were the indirect fallout of the movements against class and caste oppression.

Some critics point out that the so-called Kerala Model of Development has virtually ignored the gender dimension (Saradhamoni, 1994). The fact that women’s health and education indicators in Kerala are good has led to a certain complacency, blinding scholars and activists alike to the increasing marginalisation of women from traditional sources of employment, the disappearance of matrilineal family forms that had buttressed the status of women in the household, the steep rise of dowry practices, and the decline of other forms of women’s inheritance. We argue that considering the possibility of violence against women in Kerala from such perspectives might shed useful light on a little explored but very important dimension of women’s status.

Domestic violence in Kerala: Prevalence and correlates

In recent years, domestic violence is being increasingly recognised as a human rights and social and public health concern. Although the estimates of prevalence of domestic violence vary widely, prevalence rates generally range from 20 percent to 50 percent (Heise, et al, 1999). In the current literature on domestic violence, different explanations have been given for its occurrence: (1) cultural systems legitimise violence, legal authorities fail to protect women, economic structures subordinate women, and political systems marginalise women’s needs (Heise, et al, 1994); (2) marital violence is more prevalent in societies in which patriarchal systems are strong and women have few options outside of marriage due to divorce restrictions and low access to economic resources, and where violence is an accepted means for conflict-resolution (Levinson, 1989); (3) violence against women is a reflection of the power relationships between spouses (Strauss, Gelles, and Steinmetz, 1980); (4) violence against women is linked to woman’s lower self-esteem, severe depressive symptoms with minimal personal resources, and little institutional support (Strauss, 1980); (5) society encourages husbands to exercise their rights to dominate and control wives (Dobash and Dobash, 1992).

In India, domestic violence is emerging as a major social problem. However, until recently, the documentation on the prevalence and correlates of domestic violence against women

has remained scant. In a landmark study, the International Centre for Research on Women (ICRW) in partnership with the International Clinical Epidemiologists Network (INCLLEN) has provided reliable estimates on the prevalence of domestic violence as well as its correlates (INCLLEN, 2000). The study is based on a survey of 10,000 households across seven sites in India, encompassing rural and urban slum and urban non-slum areas. Respondents were women of 15-49 years of age with at least one child less than 18 years of age currently living with them. The measured violence outcomes were discrete physical behaviours (such as being slapped, kicked, hit, or beaten) and psychological abusive behaviours (such as being demeaned, threatened, abandoned, insulted or having the husband being unfaithful). The data were collected for two time-periods, lifetime and current. Lifetime violence includes behaviours which women experienced throughout their married life. Current violence includes behaviours, which women experienced during the 12 months immediately preceding the date of interview.

The results suggest that about 50 percent of women experienced at least one of the behaviours outlined above at least once in their married life; 43.5 percent reported at least one psychologically abusive behaviour and 40.3 percent reported experiencing at least one form of violent physical behaviour. The study also documents the multiple forms and frequency of occurrence of violence (INCLLEN, 2000). As regards the correlates of domestic violence, the study found that the lifetime experience of both physical and psychological violence was negatively associated with socio-economic status of the household, education and employment levels of the women and their husbands and social support. However, gender gap in education (wife more educated than husband) and better type of employment are positively associated with the lifetime experience of both physical and psychological violence (Duvvury and Varia, 2000; Duvvury and Allendorf, 2001). Domestic violence was positively associated with women's childhood experience of family violence and alcohol consumption of husband.

2. The Present Study

Against this backdrop, understanding not only the prevalence of domestic violence, but more pertinently, of the reasons for the perpetration of such violence, is extremely important for designing appropriate intervention strategies not only to respond to violence, but to prevent it as well.

This study, therefore, examines the prevalence and the correlates of domestic violence in intimate relationships in the context of Kerala.

Objectives

The objectives of the study are the following:

1. To examine the lifetime and current prevalence of physical and psychological violence in intimate relationships in a community-based sample in Kerala
2. To identify the risk and the protective factors of domestic violence against women
2. To document the various strategies women adopt in response to abuse

Data and method

Data for this study come from a household survey in three rural and three urban settings in Thiruvananthapuram district of Kerala. These settings represent different geographical areas in the district. A total of 10 wards (6 rural and 4 urban) were selected from these six settings. From each ward 50 households were selected at random. Thus, a total of 500 households (300 rural and 200 urban) were selected. The study participants were ever-married women aged 15-49 years. The survey included 502 women (302 rural and 200 urban). The participation rate was 92 percent, similar across the rural and the urban areas.

Informed consent was taken from the women respondents prior to interview. Respondents were informed of the sensitive nature of the interview content and told that they could stop at any stage of the interview. To ensure safety, the members of the local *panchayats* (in case of rural areas) and municipality/corporation (in case of urban areas) were consulted and informed about the nature of the survey. If the woman respondent was not available during the first attempt, the household was visited a second time. Interviews were undertaken in places which could ensure maximum privacy. Confidentiality of information was strictly maintained.

The interviews were conducted in 2001 by a team of six local female investigators. The

investigators were given extensive training for a comprehensive understanding of each survey instrument item. The data collection instruments were field-tested. All questionnaires were reviewed for completeness and correctness of recording, after each interview.

Information was collected on demographic variables such as age, duration of marriage, and number of children as well as socio-economic variables such as consumption expenditures (food and non-food), possession of consumer durables, ownership of assets (title to land and house) by women, education and employment. Information was also collected on social support received from natal family and neighbours, women's childhood experience of family violence, and alcohol consumption and substance abuse by husband. The index woman was the respondent for the above-mentioned information excluding for items on consumption expenditures. For consumption expenditures, the head of the household was the respondent. A trained male investigator collected information on consumption expenditures from the household head in each site.

The operational definitions of prevalence rates and of physical and psychological violence in this study are similar to those of the INCLLEN study. Accordingly, physical and psychological violence were measured with specific discrete behaviours. These behaviour-based outcomes measured both *lifetime prevalence* (violence which occurred at least once in the woman's married life) and *current prevalence* (violence which occurred within the past twelve months).

For lifetime prevalence of physical violence, four behaviours were considered: slaps, hits, kicks, and beatings. For current prevalence of physical violence, six behaviours were considered: slapping, hitting, kicking, beating, threatening of using weapon and forced sex.

Lifetime and current prevalence of psychological violence were measured with seven behaviours: insult, belittlement or demeaning, threat, threats to someone the respondent cares about, frightening, threats of abandonment, and husband's infidelity.

It is important to note that the reported rates of violence could be underestimates, due mainly to sensitivity and stigma surrounding domestic violence.

Prevalence and correlates

Socio-demographic profile of respondents

The average age of the women respondents is 33 years and the average duration of marriage, 12 years. More than 95 percent of the men and the women are literate, in both the rural and the urban areas. There is no sex-differential in the levels of education. Less than 10 percent of rural women and men have more than 12 years of schooling as compared to 40 percent of men and women in urban areas, showing significant rural-urban differentials in the levels of education (Table 2.1).

Table 2.1 Socio-Demographic Characteristics of Sample

Socio-Demographic Characteristics	Total (N= 502)	Rural (N= 302)	Urban (N= 200)
Age (Years)			
Index Woman	32.7	32.3	33.2
Husband	39.4	38.5	40.7
Education (%)			
Index Woman			
Illiterate	4.2	5.3	2.5
Primary (1-5)	11.4	14.6	6.5
Secondary (6-12)	62.5	70.9	50.0
>12	21.9	9.3	41.0
<i>Husband</i>			
Illiterate	4.0	3.3	5.0
Primary (1-5)	14.5	21.2	4.5
Secondary (6-12)	60.8	67.5	50.5
> 12	20.7	7.9	40.0
Employment (%)			
<i>Index Woman</i>			
Unemployed	68.1	66.2	71.0
Employed (total)			
Of which:	31.9	33.8	29.0
Regular	58.1	42.2	86.2
Seasonal	15.0	20.6	5.2
Irregular	26.9	37.3	8.6
<i>Husband</i>			
Unemployed	6.8	4.3	10.5
Employed (total)			
Of which:	93.2	95.7	89.5
Regular	86.8	80.6	96.6
Seasonal	5.1	6.9	2.2
Irregular	8.1	12.5	1.1

More than two-thirds of the women in the total sample do not engage themselves in outside employment compared to only seven percent of the men. When employed outside home,

women in rural areas are more likely to be engaged in seasonal and irregular employment (58 percent) whereas women in urban areas are more likely to be employed in regular employment (86 percent). As one would expect, men are more likely to be employed in both the rural and the urban areas. A substantially higher proportion of men are likely to be engaged in regular employment, in both the areas.

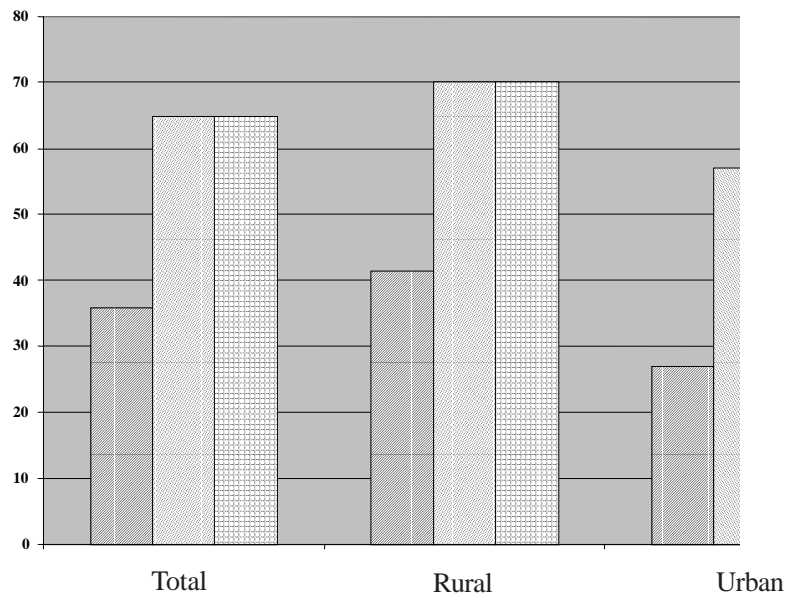
Marriage is predominantly of the arranged type (78 percent). Women reported agreement in about two-thirds of the marriages. Nearly half the women (48 percent) reported that dowry had been demanded by their in-laws at the time of marriage. Women in rural areas are more likely to report dowry demand than women in urban areas (57 and 33 percent respectively). A similar pattern is reported for new demands for dowry: 37 percent women in rural areas as compared to 11 percent women in urban areas reported new dowry demands raised after marriage.

Women’s experience of physical and psychological violence

Lifetime experience

Overall, 35.7 percent of women reported experiencing at least one of the violent physical behaviours at least once in their married life, and 64.9 percent reported experiencing at least one form of violent psychological behaviour at least once in their married life.

Figure 1: Overall Prevalence of Violence
(Percentage of women reporting violence)



At least one of the physical or psychological violent behaviours in lifetime is reported by 64.9 percent of the women – the same level as lifetime psychological violence. Both physical and psychological violence were relatively higher in rural areas than in urban areas.

Women reported that they experienced violence in combination. Of the 179 women who reported that they had been hit, kicked, slapped, or beaten in their marital life, three-fifths (109 women) experienced all the four and nine out of ten (161 women) had suffered from at least three types of the assault. As regards psychological abusive behaviours, nearly one out of four (74 out of 326 women) had experienced all the seven and four out of ten women at least four.

In addition to multiple forms, women also reported that they had experienced violence several times in their marital life (Tables 2.2 and 2.3). A larger proportion of rural women reported that they had experienced violent physical behaviour of all types. Violent psychological behaviours, however, had occurred more than three times in both rural and urban areas, except abandonment. Of the women reporting physical violence (179 women), 68 percent (122 women) reported a frequency of three or more times, and of the women reporting psychological violence (326 women), 76 percent (248 women) reported a frequency of three or more times.

Table 2.2 Lifetime Marital Physical Violence (Percent)

Behaviours of Husband towards woman respondent	Total (N= 502)	Rural (N= 302)	Urban (N= 200)
Hitting			
None	67.3	61.6	76.0
1-2	16.3	16.2	16.5
= 3	16.3	22.2	7.5
Kicking			
None	76.7	70.5	86.0
1-2	8.8	8.9	8.5
= 3	14.5	20.5	5.5
Beating			
None	67.1	60.9	76.5
1-2	12.5	13.2	11.5
= 3	20.3	25.8	12.0
Slapping			
None	65.3	59.6	74.0
1-2	16.7	16.2	17.5
= 3	17.9	24.2	8.5

Time 2.3 Lifetime Marital Psychological Violence (Percent)

Bhaviours of Husband toward woman respondent insulted	Total (N= 502)	Rural (N= 302)	Urban (N= 200)
None	37.1	31.8	45.0
1-2	15.9	14.2	18.5
= 3	47.0	54.0	36.5
Demeaned			
None	53.0	45.7	64.0
1-2	14.3	14.6	14.0
= 3	32.7	39.7	22.0
Threatened			
None	66.9	58.9	79.0
1-2	3.6	3.6	3.5
= 3	29.5	37.4	17.5
Threatened Someone wife cares about			
None	79.5	74.2	87.5
1-2	1.6	1.7	1.5
= 3	18.9	24.2	11.0
Frightened			
None	84.1	78.1	93.0
1-2	0.8	1.0	0.5
= 3	15.1	20.9	6.5
Abandoned			
None	84.5	78.8	93.0
1-2	14.7	20.5	6.0
= 3	0.8	0.7	1.0
Was unfaithful			
None	72.9	63.6	87.0
1-2	5.0	5.0	5.0
= 3	22.1	31.5	8.0

Both multiple forms and frequency of physical as well as psychological violence was reported comparatively less by urban than by rural women.

Physical violence occurs frequently even during pregnancy. Of the women who reported physical violence, more than one-third reported that they had experienced violence during pregnancy. However, there is a striking rural-urban differential in this respect: the rate is more than 40 percent in rural areas compared to less than 20 percent in urban areas (Table 2.4).

Table 2.4 Severe Physical Violence during Pregnancy (percent)

Characteristic	Total (N= 179)	Rural (N= 125)	Urban (N= 54)
Slapped	35.8	44.8	14.8
Kicked	36.3	46.4	13.0
Hit	33.5	41.6	14.8
Beaten	35.8	43.2	18.5

Current experience

Since current violence is defined as either physical or psychological abuse occurring in the 12 months immediately preceding the date of interview, certain categories of women (eg., widowed, divorced, separated, or women whose husbands were absent from home for more than one year) were obviously excluded (59 women). Of the rest (443 women), 29 percent (127 women) had experienced slapping, kicking, hitting, beating, or forced sex during the period (Table 2.5). None of the women (excluding one in the rural area) reported as having experienced physical abuse of using or threatening to use a weapon'. Women living in rural areas have reported higher rates than women living in urban areas.

Table 2.5 Current Physical Violence (percent)

Bhaviours of Husband toward woman respondent	Total (N= 443)	Rural (N= 272)	Urban (N= 171)
Hitting			
None	83.5	79.8	89.5
1-2	5.9	5.9	5.8
= 3	10.6	14.3	4.7
Kicking			
None	87.1	83.1	93.6
1-2	3.2	3.3	2.9
= 3	9.7	13.6	3.5

Beating			
None	77.0	74.3	81.3
1-2	12.9	11.8	14.6
= 3	10.2	14.0	4.1
Slapping			
None	78.1	74.6	83.6
1-2	11.5	10.7	12.9
= 3	10.4	14.7	3.5
Using to threatening to use a weapon			
None	99.8	99.6	100.0
1-2	0.2	0.4	0.0
= 3	0.0	0.0	0.0
Forced Sex			
None	85.3	86.0	84.2
1-2	9.3	13.2	2.9
= 3	5.4	0.7	12.9

Nearly 15 percent of the total sample of women reported one or more incidents of forced sex during the period of 12 months. This rate is similar across the rural and the urban areas although the frequency of occurrence of forced sex is substantially higher in urban areas (by three times more).

Of the 443 women, about one-half (218 women) had experienced at least one of the psychological abuses. More women in rural areas reported that psychological abuse occurred at least three times across all five behaviours (Table 2.6).

They respondents had also experienced violent behaviour in combination (multiple forms) and several times (three or more times). Of the 127 women who reported of having been hit, kicked, slapped, beaten or subjected to forced sex in the last one year, 36 percent (46 women) experienced four of these five behaviours, and 58 percent (74 women) experienced at least two of them. Of the 218 women experiencing psychological abusive behaviours, 19 percent (41 women) experienced all types of abuses and 44 percent (96 women) experienced at least two of them behaviours during the period.

Women reported as having experienced violence several times in the current period. Of the 127 women reporting physical violence, 57 percent (72 women) reported a frequency of three or more times, and of the 218 women reporting psychological violence, 53 percent (115 women) reported a frequency of three or more times. On the whole the results indicate that violence against women is pervasive in terms of prevalence, forms, and frequency.

Table 2.6 Current Psychological Violence (percent)

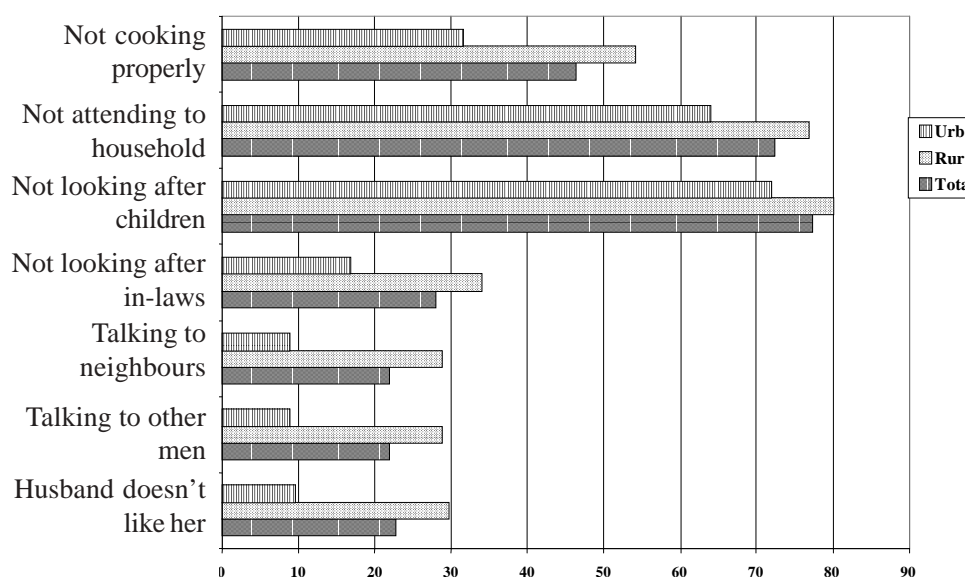
Bhaviours of Husband towards woman respondent insulted	Total (N= 443)	Rural (N= 272)	Urban (N= 171)
0	55.3	54.4	56.7
1-2	20.3	18.0	24.0
= 3	24.4	27.6	19.3
Demeaned			
0	80.6	77.6	85.4
1-2	9.0	8.1	10.5
= 3	10.4	14.3	4.1
Threatened			
0	88.7	84.9	94.7
1-2	1.6	1.5	1.8
= 3	9.7	13.6	3.5
Threatened Someone wife cares about			
0	89.2	84.9	95.9
1-2	1.6	1.8	1.2
= 3	9.3	13.2	2.9
Frightened			
0	89.8	85.7	96.5
1-2	0.9	1.1	0.6
= 3	9.3	13.2	2.9
Abandoned			
0	88.9	84.9	95.3
1-2	10.6	14.7	4.1
= 3	0.5	0.4	0.6
Was unfaithful			
0	88.3	84.6	94.2
1-2	2.0	1.8	2.3
= 3	9.7	13.6	3.5

Reasons for violence

The respondents reported several “reasons” as possible causes or triggers of violence, but typical gender roles and expectations about women’s proper behaviour were the major

factors. The complaints raised against women are, in general, the following: ‘not looking after children properly’ (78 percent); ‘not attending to household’ (72 percent); and ‘not cooking properly’ (54 percent).

Figure 2 Reasons for Violence as Identified by Women
(Percent of women citing reasons)



Rural women are found to be relatively more outspoken in this matter. However, the pattern is similar across rural and urban areas.

Another area of conflict cited by women is ‘sexual control’. One-fifth (21 percent) of the women attributed violence due to infidelity: husbands had been sexually involved with other women and husbands accused wives of being “unfaithful”. Among this group of women (104 women), 85 percent reported husband’s infidelity as the reason for quarrels with husband. Nearly four-fifths reported that their husbands “hit or beat” them because of the wife’s suspicion about the husband’s sexual involvement with other women. Among women reporting that their husbands accused them of being “unfaithful” (106 women), 96 percent reported this as a reason for quarrels and 66 percent reported this as reason for their husband’s hitting or beating them.

‘Dowry’ is another area of conflict. Women who reported having had an arranged marriage were asked about their lifetime experience of harassment due to dowry. Such harassment was reported by 30 percent of women (38.7 percent in rural and 16 percent in urban areas). Among women who reported being harassed due to dowry, nearly 46 percent had received beatings, 46 percent were threatened with dire consequences, 13 percent were sent back to their natal homes, and 21 percent were ill-treated just as domestic servants.

The family member who most frequently harassed women due to dissatisfaction with dowry was the mother-in-law (95 percent), followed by husband and father-in-law (72 percent each), sister-in-law (49 percent) and brother-in-law (14 percent).

Correlates of domestic violence

In order to find the correlates of domestic violence, an ecological perspective was followed. (Heise, 1998). Accordingly, the bivariate relationships have been examined between the lifetime experience of physical and psychological violence among women and some of the individual, household, and community factors. These risk factors included are the following:

1. Demographic characteristics: age of the woman; duration of marriage; age difference between husband and wife; number of children.
2. Socio-economic status: education and employment status of the woman and her husband; per capita expenditures per annum; number of consumer durables owned by the household.
3. Social support from the natal family and the neighbours.
4. Ownership of property by the woman respondent: title to land or house, or both.
5. Husband's risk behaviours: alcohol consumption and substance abuse.
6. Woman's childhood experience of family violence: Woman's witnessing father beating mother in childhood; harsh physical discipline experienced by the respondent during her childhood.

Demographic indicators

The lower the age of the woman (15-24 years) and the lower the duration of the marriage (< 7 years), the higher is the lifetime experience of physical and psychological violence among women (Tables 2.7 and 2.8).

Table 2.7 Demographic Indicators and Lifetime Physical Violence (percent)

Demographic Indicators	Slapped	Kicked	Hit	Beat	Any lifetime Marital Physical Violence
Age of the Index Woman (Years):					
15-24	45.2	35.6	43.8	41.1	46.6
25-34	33.2	21.6	30.8	32.0	34.4
35-49	32.4	20.7	30.7	30.7	33.0
Duration of Marriage (Years):					
< 7	40.4	29.8	39.1	37.7	42.4

7-14	33.7	21.2	30.4	32.6	34.2
15 & Above	30.5	19.8	29.3	28.7	31.1
<i>Age Difference (Years):</i>					
<5	40.1	26.3	35.8	38.0	40.1
5-8	35.5	24.2	34.2	34.6	37.2
9 & Above	27.6	18.7	26.9	24.6	28.4
Number of Children					
0	40.8	28.6	34.7	38.8	42.9
1-2	32.8	22.0	31.4	31.2	33.9
3 & Above	39.3	26.2	36.9	36.9	39.3

This finding suggests an early onset of violence in the marital relationship, which continues as age progresses. There is no significant association between age difference between husband and wife and psychological violence. As for physical violence, the lower the age difference (< 5 years), the higher is the physical violence experienced by women. While there is no relationship between number of children and psychological violence, women with a large number of children or women with more children (3 or more) are somewhat more likely to experience physical violence than women having two children or less. But the difference is not statistically significant.

Some studies have found a positive association between woman's age and experience of violence: The finding has been interpreted to mean that women gain more control over their decision-making processes when they become older and that age influences spousal relationship. The results of the present study do not support such a relationship between woman's age and violence. Similarly, some studies in India have shown that violence is common among families with more children (Jejeebhoy, 1998b; Martin, et al, 1999b). Again, the results in this study do not show such evidence. The reason for the absence of such association may be the fact that there are very few women in our sample with more than three children.

Table 2.8 Demographic Indicators and Lifetime Psychological Violence (percent)

Demographic Indicators	Insulted	Demeaned	Threatened	Threatened someone else	Made you feel afraid	Abandoned	Was unfaithful	Any lifetime Marital Psychological Violence
Age of the Index Woman (Years):								
15-24	75.3	58.9	41.1	27.4	21.9	23.3	34.2	76.7
25-34	60.4	44.0	30.0	18.8	14.4	13.2	25.6	62.8
35-49	61.5	46.4	34.1	20.1	15.6	15.6	26.3	63.1
Duration of Marriage (Years):								
< 7	67.5	51.7	37.1	24.5	17.9	18.5	31.1	70.2
7-14	61.4	45.1	31.0	18.5	14.7	13.0	26.6	63.0
15 & Above	60.5	44.9	31.7	19.2	15.6	15.6	24.0	62.3
Age Difference (Years):								
<5	64.2	46.0	33.6	24.1	19.0	18.2	32.8	65.7
5-8	63.2	47.2	32.9	19.9	16.9	16.5	27.3	64.5
9 & Above	61.2	47.8	32.8	17.9	11.2	11.2	20.9	64.9
Number of Children								
0	63.3	34.7	30.6	20.4	14.3	16.3	24.5	65.3
1-2	63.7	48.8	33.3	20.3	16.0	14.9	27.9	66.1
3 & Above	59.5	46.4	33.3	21.4	16.7	17.9	25.0	59.5

Socio-economic status

There exists a negative association between socio-economic indicators and women's reported lifetime experience of physical and psychological violence (Tables 2.9 and 2.10).

Table 2.9 Socio-Economic Status and Lifetime Physical Violence (percent)

Socio-Economic Status of Family	Slapped	Kicked	Hit	Beaten	Any lifetime Marital Physical Violence
Per Capita Expenditure (Rs/Yr):					
<6000	71.8	63.4	69.5	70.2	73.3
6000-11999	23.3	10.6	21.6	22.0	24.6
12000 & above	18.5	6.7	16.3	15.6	18.5
Number of consumer goods owned:					
< 4	47.4	40.7	46.9	45.9	48.8
4-6	32.7	15.4	30.2	31.5	34.0
7 & above	16.8	5.3	13.0	13.7	16.8
Education of Index Woman:					
< 6	56.4	47.4	56.4	57.7	57.7
6-12	33.8	21.3	31.2	30.9	34.7
13 & Above	21.8	11.8	20.0	20.9	22.7
Education of Husband:					
< 6	45.2	39.8	44.1	44.1	46.2
6-12	35.4	23.0	33.1	33.4	36.7
13 & Above	23.1	9.6	21.2	21.2	23.1
<i>Employment of Index Woman:</i>					
Unemployed	33.9	21.9	32.2	31.9	35.1
Employed:					
Regular	28.0	18.3	25.8	26.9	28.0
Seasonal	45.8	33.3	37.5	41.7	50.0
Irregular	48.8	39.5	48.8	48.8	48.8
Employment of Husband:					
Unemployed	70.6	61.8	67.6	64.7	70.6
Employed:					
Regular	30.3	18.5	28.1	28.3	31.3
Seasonal	45.8	33.3	45.8	50.0	50.0
Irregular	42.1	34.2	42.1	42.1	42.1

Table 2.10 Social-Economic Status and Lifetime Psychological Violence (percent)

Socio-Economic Status of Family	Insulted	Demeaned	Threatened	Threatened someone else	Made you feel afraid	Abandoned	Was unfaithful	Any Lifetime Marital Psychological Violence
Per Capita Expenditure (Rs/Yr):								
<6000	86.3	74.8	62.6	52.7	51.9	53.4	62.6	87.8
6000-11999	58.5	40.3	27.1	10.6	3.8	2.5	18.2	60.6
12000 & above	48.1	31.9	14.8	6.7	2.2	1.5	8.1	50.4
Number of consumer goods owned:								
< 4	70.8	57.9	48.3	36.8	34.4	33.0	44.0	73.7
4-6	67.3	42.6	29.0	9.9	3.7	3.7	18.5	67.3
7 & above	45.0	35.1	13.7	7.6	1.5	2.3	10.7	48.1
Education of Index Woman:								
< 6	71.8	56.4	44.9	38.5	38.5	35.9	44.9	74.4
6-12	65.0	47.8	35.0	19.4	14.0	14.0	26.4	66.6
13 & Above	50.9	38.2	19.1	10.9	5.5	5.5	16.4	53.6
Education of Husband:								
< 6	66.7	59.1	45.2	36.6	35.5	32.3	40.9	72.0
6-12	67.5	47.9	36.4	20.0	14.4	14.8	28.2	68.2
13 & Above	46.2	33.7	12.5	7.7	2.9	2.9	11.5	49.0
Employment of Index Woman:								
Unemployed	62.0	45.6	31.3	19.3	14.3	13.7	25.1	64.0
Employed:								
Regular	58.1	45.2	31.2	18.3	12.9	12.9	26.9	59.1
Seasonal	70.8	58.3	37.5	25.0	25.0	20.8	33.3	79.2
Irregular	76.7	55.8	48.8	32.6	30.2	32.6	39.5	76.7
Employment of Husband:								
Unemployed	82.4	67.6	52.9	50.0	50.0	50.0	52.9	85.3
Employed:								
Regular	59.9	44.1	29.8	17.0	11.6	11.3	22.7	62.1
Seasonal	75.0	50.0	37.5	25.0	20.8	20.8	41.7	75.0
Irregular	71.1	57.9	47.4	28.9	28.9	26.3	42.1	71.1

Between the two economic status indicators, i.e., per capita expenditure and number of consumer goods, per capita expenditure and more negative association with both measures of violence. International research has also shown that although women from all classes experience violence, women at poverty are more likely to experience violence. The educational status of men and women is also negatively associated with both lifetime physical and psychological violence. However, it is unclear whether this relationship is due to actual variations or greater reluctance on the part of women of higher socio-economic status to disclose violence. The employment status of the woman and her husband does not show any clear relationship with violence, except that unemployment status of husband is significantly and positively associated with both measures, lifetime and current. In fact, women and men who are engaged in irregular/casual employment are more likely to experience violence while regular employment is likely to reduce it.

Social support

Two potential sources of support have been considered important for woman's ability to negotiate conflict in marriage: natal family and neighbour. In the literature, the number of potential sources is considered to be more important than any individual source. We consider three levels of social support: (1) no potential source; (2) natal family as a source of support; and (3) two sources of support (both neighbour and natal family). In the sample, 54 percent of women reported at least one of these sources as support, and the remaining 46 percent reported no social support from any source. Nearly one-fourth (23.5 percent) of women reported social support from both the sources (neighbour and natal family) and 31 percent reported natal family as a source of support.

Level of social support is negatively associated with the reported experience of physical and psychological violence, more significantly so for physical violence (Tables 2.11 and 2.12).

Table 2.11 Social Support and Lifetime Physical Violence (percent)

Social Support	Slapped	Kicked	Hit	Beaten	Any lifetime Marital Physical Violence
None	47.6	36.2	45.9	45.4	49.8
Natal family	21.3	7.7	18.1	18.7	21.3
Natal family and neighbourhood	27.1	18.6	26.3	27.1	27.1

Table 2.12 Social Support and Lifetime Psychological Violence (percent)

Social Support	Insulted	Demeaned	Threatened	Threatened someone else
None	74.7	57.9	43.7	35.4
Natal family	58.7	27.7	27.7	0.6
Natal family and neighbourhood	45.8	19.5	19.5	17.8

Made you feel afraid	Abandoned	Was unfaithful	Any lifetime Marital Psychological Violence
27.5	26.2	32.3	77.3
0.6	0.6	27.1	59.4
13.6	14.4	16.9	48.3

Ownership of property by women

Ownership of property by women is defined under four categories: (1) no title to either land or house; (2) title to house only; (3) title to land only; and (4) title to both land and house. In the sample, six percent of women had title to land only; 14 percent had title to house, 15 percent had title to both land and house, and nearly two-thirds did not have title to either land or house.

Ownership of property has a strong negative effect on lifetime physical and psychological violence against women (Tables 2.13 and 2.14). Among those who did not own property, about one-half experienced physical violence and 84 percent experienced psychological violence. In contrast, those who own both land and house reported substantially lower physical (7 percent) as well as psychological (16 percent) violence.

Table 2.13 Ownership of Property by Woman and Lifetime Physical Violence (percent)

Ownership of House/Land	Slapped	Kicked	Hit	Beaten	Any lifetime Marital Physical Violence
None	47.9	32.1	44.8	44.8	49.1
Land only	14.3	14.3	14.3	17.9	17.9
House only	9.9	4.3	9.9	9.9	9.9
House & Land	6.8	5.5	6.8	6.8	6.8

This pattern is consistent across any of the violent physically or psychologically abusive behaviours. It is important to note that even woman's ownership to either house or land also reduces violence substantially.

Table 2.14 Ownership of Property by Woman and Lifetime Psychological Violence
(percent)

Ownership of House/Land	Insulted	Demeaned	Threatened	Threatened someone else
None	81.8	61.5	44.8	27.3
Land family	53.6	28.6	25.0	21.4
House only	28.2	19.7	5.6	1.4
House & Land	15.1	15.1	9.6	8.2

Made you feel afraid	Abandoned	Was unfaithful	Any lifetime Marital Psychological Violence
22.7	22.4	37.6	84.2
3.6	3.6	14.3	53.6
1.4	0.0	4.2	29.6
4.1	4.1	6.8	16.4

Husband's risk behaviours

Two measures were considered to assess husband's risk behaviours: alcohol consumption and substance abuse. Alcohol consumption is measured under three categories: teetotalers (no consumption of alcohol); occasionally drunk (less than once a week); regularly drunk (more than once a week). Substance abuse is measured as a dichotomous variable (no or yes).

More than half the women (51.6 percent) reported that their husbands drank at least occasionally during the past one year. The remaining women reported that their husbands were teetotalers. Nearly one-fourth (23.9 percent) reported that their husbands drank to excess over the past one year and another 28 percent reported their husbands drank only occasionally. As regard substance abuse, 12.5 percent of women reported substance abuse by husbands over the period.

A positive association was found between husband's risk behaviours and reported violence. More than 61 percent of the women who stated that their husbands had got drunk at least once a week reported that their husbands had hit, kicked, slapped or beat them. More than 65 percent who mentioned substance abuse by husbands reported that their husbands had hit, kicked or beat them (Table 2.15). In addition, substance abuse and excess drinking by husbands are strongly related with violence of women being threatened of someone they care about being threatened or of women being frightened or abandoned (Table 2.16).

Table 2.15 Alcohol Consumption and Substance Abuse of Husband and Lifetime Physical Violence (percent)

Characteristics of Husband	Slapped	Kicked	Hit	Beaten	Any lifetime Physical Violence
Alcohol Consumption:					
Teetotaler	24.7	11.1	22.2	23.0	24.7
Occasionally	23.7	11.5	20.9	21.6	26.6
Regular	67.5	61.7	67.5	65.8	68.3
Substance Abuse:					
Yes	66.7	65.1	65.1	65.1	66.7
No	30.1	17.3	28.0	28.2	31.2

Table 2.16 Alcohol Consumption and Substance Abuse of Husband and Lifetime Psychological Violence (percent)

Characteristics of Husband	Insulted	Demeaned	Threatened	Threatened someone else	Made you feel afraid	Abandoned	Was unfaithful	Any ifetime Martial Psychological Violence
Alcohol Consumption:								
Teetotaler	47.3	35.4	21.0	2.5	1.2	1.2	20.2	47.3
Occasionally	77.7	48.2	25.9	19.4	5.8	4.3	11.5	84.9
Regular	77.5	69.2	65.8	58.3	57.5	57.5	59.2	77.5
Substance Abuse:								
Yes	85.7	81.0	81.0	71.4	69.8	68.3	66.7	85.7
No	59.7	42.1	26.2	13.2	8.2	8.0	21.4	62.0

Women's childhood experience of family violence

Nearly 35 percent of women reported having witnessed during childhood their fathers beating their mothers. About 47 percent living in rural areas reported witnessing this parental behaviour, compared to a relatively smaller proportion of women (17 percent) living in urban areas. A majority of them (56.4 percent) had undergone harsh physical discipline during childhood. Harsh childhood punishment experienced was found to be higher in rural areas than in urban areas (64.6 and 44.0 percent respectively).

Women's childhood experience is strongly associated with both physical and psychological violence (Tables 2.17 and 2.18). Women who reported having undergone harsh physical discipline as a child were thrice more likely to report being hit, kicked, and beaten by husbands. Similarly women, who reported having witnessed their fathers beating mothers, were twice as likely to report being hit, kicked, and beaten by husbands.

Help-seeking behaviour

This study also attempted to identify the paths women seek in response to their experience of domestic violence. The victims were asked whether they seek help from persons or institutions, whether the source was helpful, and whether they eventually have left an abusive relationship.

Women reported seeking help from a broad range of organisations and persons. Basically they sought help from members of their natal family (61 percent) this being their single-most important source of support. Apart from this, women sought support from neighbours as well (43.9 percent). A few women also reported seeking help from husbands' family.

Institutions such as women's organisations and homes for single and destitute women (23 percent) and to some extent police (11 percent) also formed sources of support sought. However, the extent of help rendered varied from one institution to the other. Very few women (less than 5 percent) sought help from health clinics, mental health centres, and local officials.

Women most frequently reported that members of their family and members of their husbands' family knew about the violence. Neighbours were the next group most frequently aware of the violence. One-fifth of the women reported that no one knew about the violence other than themselves.

Women who reported physical violence were asked whether they continued to stay with or had left their husbands. Of the 179 women experiencing lifetime physical violence, most stayed with husbands and did not leave the abusive relationship (76 percent). Women cited many fairly common reasons for staying with husbands in spite of an abusive relationship. These include: 'normal' behaviour in a marital relationship (44 percent), lack of alternative means of support (94 percent), concern for children (29 percent), and family honour (28 percent).

Table 2.17 Childhood Experience of Domestic Violence and Lifetime Physical Violence (percent)

Childhood Experience reported by IW	Slapped	Kicked	Hit	Beaten	Any lifetime Physical Violence
Harsh Physical discipline in childhood:					
Yes	48.1	32.9	46.3	46.3	49.1
No	17.4	11.0	15.1	15.5	18.3
Witnessing father beating mother in childhood:					
Yes	46.6	45.5	46.6	47.7	47.7
No	28.2	11.3	25.2	24.8	29.1

Table 2.18 Childhood Experience of Domestic Violence and Lifetime Psychological Violence (percent)

Childhood experience reported by IW	Insulted	Demeaned	Threatened	Threatened someone else	Made you feel afraid	Abandoned	Was unfaithful	Any lifetime Marital psychological violence
Harsh Physical discipline in childhood:								
Yes	81.3	62.9	44.5	24.4	21.9	21.2	37.8	81.3
No	39.3	26.5	18.3	15.5	8.2	8.2	13.2	43.8
Witnessing father beating mother in childhood:								
Yes	70.5	62.5	60.2	39.2	39.2	38.6	63.1	70.5
No	58.9	38.7	18.4	10.4	3.4	3.1	7.7	62.0

Few women left their husbands due to violence. Of the 179 physically abused women, 43 (25 percent) left home. The number of times women reported leaving their husbands because of these incidents was as follows: once (14 women); twice (11 women); three times (6 women), and four to seven times (12 women). Of the 43 women left home, 24 women returned back and 19 women eventually did not return to the husband.

Health care needs for injuries and disabilities

Some women were in need of medical care due to the violence inflicted on them and the seriousness of the injury. Out of the women experiencing violence, about one-fourth reported that they needed medical care due to violence. Amongst the women who needed medical care, 62 percent had sought medical care while the remaining 38 percent did not. The reasons for not being able to obtain medical care were the following: feeling ashamed (43 percent); lack of freedom (32 percent); lack of economic access (25 percent); fear of reprisals (18 percent).

Of the 179 women experiencing physical violence, 19 women (10.6 percent) reported of having been hospitalised for injuries sustained from violence. Out of these, 7 were hospitalised only once; 9 were hospitalised two times, 2 were hospitalised three times and one was hospitalised four times. Owing to injuries sustained from violence, 92 women reported that they could not do their usual household chores for a period of at least 7 days after the incident and 36 women reported that they could not work for income for at least 5 days. The reported number of days of work lost is likely to be gross underestimates.

Multivariate analysis

Owing to possible confounding among the independent factors in the bivariate analysis, logistic regression models were used separately for lifetime physical (1 if experienced any physical violence; 0 otherwise) and psychological violence (1 if experienced any psychological violence; 0 otherwise) to assess the effect of each independent factor in the presence of other variables in the model. The independent factors selected were: (1) education of the woman; (2) level of social support; (3) per capita expenditure; (4) ownership of property; (5) alcohol consumption; and (6) women's witnessing of parental behaviour in childhood.

On the basis of international literature on correlates of physical and psychological violence in intimate relationships, we also considered some other relevant variables such as women's age, duration of marriage, number of children, women's employment status, and location of residence (rural-urban). However, none of these variables were found to be statistically significant in the logistic regression analysis at 5 percent level. Therefore, these variables were excluded from the final logistic regression model (Table 2.19).

The logistic regression results in terms of odds ratios are presented in Table 2.19. The odds ratios predict whether a woman experienced any physical or psychological violence in her marital life. Odds ratios greater than one indicate a positive relationship between the independent variable and the experience of violence, and odds ratios less than one indicate

a negative relationship. The multivariate results show a pattern of relationships almost similar to that was found in the bivariate analysis.

Table 2.19 Logistic Regression Models for predicting Women’s Experience of Physical and Psychological Violence (Odds Ratios)

Variable	Any Physical Violence	Any Psychological Violence
Number of cases	502	502
Education		
< 6 years(r)	1.00	1.00
6-12 years	0.47*	0.81
>12 years	0.64	1.33
Level of Social Support		
No support(r)	1.00	1.00
Natal family	0.49*	1.98
Natal family & neighbours	0.37 **	0.37**
Per Capita Consumption Expenditure (Rs/annum)		
<6000(r)	1.00	1.00
6000-11999	0.14***	0.14***
12000 & above	0.14***	0.19***
Ownership of Property by Women		
None(r)	1.00	1.00
Land	0.23**	0.04***
House	0.11***	0.01***
Land & house	0.08***	0.01***
Alcohol Consumption by Husbands		
Teetotaller(r)	1.00	1.00
Occasionally drunk	0.45	9.19***
Regularly drunk	2.84**	2.03
Woman’s Childhood Experience of Family Violence		
Did not witness(r)	1.00	1.00
Witnessed	4.46***	9.98***
-2 Log L	443.9	
df	12	

*Significant at p<0.05, **Significant at p<0.01, ***Significant at p<0.001

‘r’ reference category

The strongest predictor was found to be ownership of property by a woman; it reduced both physical and psychological violence significantly. The strong negative relationships between women's experiences of both physical and psychological violence and women's ownership of property were maintained even after controlling for a host of other well-known correlates including woman's education, per capita income, level of social support, husband's risk behaviour, and a history of violence in wife's family during her childhood. The most important result is that even a little access to ownership of asset (land or house) reduces dramatically the risk of both physical and psychological violence.

As we have discussed in the previous section, asset ownership has many direct and indirect effects not only on the well-being of women but also on the well-being of children, family and society. It enhances women's capability in several ways. Property ownership enhances woman's bargaining power within marriage, and her dignity and self-worth. If conflicts arise, say, due to spousal violence, women with independent access to ownership (of land and/or house) will have outside options to exit from marriage; a place to stay (house ownership), and opportunities associated with land ownership.

The results show no significant association between women's education and their experience of violence, but for a significant negative effect of middle level education (6-12 years) on physical violence. The explanation for this observation may be that as everyone is educated in the context of Kerala probably it loses its significance as a factor for reducing violence directly in the presence of other variables.

Per capita expenditure is strongly and negatively associated with women's experience of both physical and psychological violence. This result is consistent with the findings of international research although it is not clear whether this relationship reflects a greater reluctance on the part of women of higher socio-economic status to disclose violence.

The levels of social support, especially of both the sources together (natal family and neighbours), have a significant negative effect on the prevalence of any physical and psychological violence. The ways in which social support is related to the reduction of violence are not, however, obvious is that neighbours and natal family may be traditional sources of conflict-resolution in the Indian context.

As one would expect, a strong positive association is found between husband's excessive consumption of alcohol and wife's experience of physical and psychological violence. Furthermore, husband's occasional drinking of alcohol has a strong positive effect on the risk of any psychological violence. However, its relationship with women's experience of any physical violence is negative though not significant.

Finally, the significant and positive association between women's experience of violence (both physical and psychological) and a history of violence in woman's family during her childhood (i.e., witnessing father beating mother) is consistent with findings of research in other countries. This association suggests that violent behaviour may be learned from childhood experience. It has serious negative effect on the well-being of family due to the intergenerational transmission of violence.

3. Conclusions/strategies

During the past decade, domestic violence against women has become one of the pre-eminent issues in the women's international human rights movement. A large number of variety of countries have taken up the responsibility to help prevent violence in the home and to prosecute offenders. To prevent and reduce domestic violence, government and non-governmental and inter-governmental organisations are already working at many levels (Schuler, 1991; UNICEF, 2000; UNIFEM, 2000; WHO, 2002). The strategies being adopted include: home visitation, collaborative efforts of domestic violence service providers, prevention efforts that address violence both in homes and in communities, school-based programmes, and public education campaigns.

India, like many other countries, has enacted legislation stipulating domestic violence as a crime, held national media campaigns designed to raise consciousness about the issue, and established women-only police stations intended to encourage reporting of domestic violence crimes. To respond to the needs of the victims, protection and support systems must be made available. Religious and social institutions that could assist victims need to be trained in appropriate responses. Since the existing legal framework is inadequate to fully address women's needs, political advocacy should be mobilised to change particular elements within the laws that continue to be unresponsive to issues of gender-based violence (Singh, 1994; Lawyers Collective Women's Rights Initiative, 2000).

In addition to legal and institutional interventions domestic violence needs to be re-situated in social justice and social transformation. What is needed is a rights-based strategy in the prevention of domestic violence, which meshes formal treaty doctrines with grassroots activism and critiques of power. While the right to make the claim is global, the specific and useful strategies to build a non-violent and gender-egalitarian society must be developed locally.

Domestic violence conceived of as violation of a woman's most basic rights, must be viewed from an ecological perspective. Domestic violence prevention strategies must include a critical understanding of the underlying causes of domestic violence as well as a vision of what constitutes a healthy, non-violent family.

Woman's "right to housing" and "right to property and inheritance" are critical and most fundamental for any strategy of prevention of domestic violence. Empowerment of women is the key to prevent gender-based violence. Access to, and control over, economic resources, especially immovable assets, is the precondition to women's empowerment. Social support network, especially natal family and neighbours, is also a crucial factor in reducing domestic violence. Four points need to be emphasised here:

1. Importance of immovable assets and social support is significant in making a difference to the incidence of domestic violence.

2. Non-acceptability of violence as a norm in the family is critical for reduction of inter-generational transmission of violence.
3. Male attitudes and society's attitudes need to undergo change. Since prevention of domestic violence requires fundamental changes in attitudes and behaviour, it confronts societal and individual resistance to change.
4. Support structures could be both within the family and from NGOs, women's self-help groups etc., which could help both in changing attitudes and in helping women acquire immovable assets. This calls for creative community involvement, shared responsibilities, collective action with the goals to challenge patriarchal assumptions of power and control and entitlement to women.

Prevention of domestic violence at the national level depends on the level of public and governmental commitment to making prevention a long-term priority, and to establish a consistent, co-ordinated, and integrated approach for each community. Given the pervasiveness and the perils of domestic violence, a national policy of zero tolerance for domestic violence is necessary.

References

Agarwal, Bina. *A Field of One's Own: Gender and Land Rights in South Asia*, New York: Cambridge University Press. 1994.

Devika, J., Praveena Kodoth. 'Sexual Violence and Predicament of Feminist Politics in Kerala', *Economic and Political Weekly*, 18 August 2001.

Dobash, R.E. R. Dobash. *Women, Violence and Social Change*, London: Routledge. 1992.

Dreze Jean, Amartya Sen. *India: Economic Development and Social Opportunity*, Oxford: Clarendon Press. 1995.

—————. *Hunger and Public Action*, Oxford: Clarendon Press. 1989.

Duvvury, Nata, Keera Allendorf. 'Domestic Violence in India: The Roles of Education and Employment'. Paper presented at the Sixth Women's Policy Research Conference on 'The Status of Women: Facing the Facts, Forging the Future', Washington DC, 8-9 June. 2001.

Duvvury, Nata, Nisha Varia. 'Violence against Women in Marital Home: Links with Education and Employment'. ICRW, processed. 2000.

Fikree, F.F, L. I Bhatti. 'Domestic Violence and Health of Pakistani Women', *International Journal of Gynecology & Obstetrics*, 1999.

Glander, Susan S, et al. 'The Prevalence of Domestic Violence among Women Seeking Abortion', *Obstetrics and Gynecology*, 91 (6), June 1988.

Hadi, Abdullahel. 'Prevalence and correlates of the risk of marital sexual violence in Bangladesh', *Journal of Interpersonal Violence*, 15 (8), Beverly Hills. 2000.

Heise, L. 'Violence against Women: An Integrated Ecological Framework', *Violence against Women*. Vol. 4. 1998.

Heise, L. A. Raikes, C.H. Watts, A.B. Zwi. 'Violence against Women: A Neglected Public Health Issue in Less Developed Countries', *Social Science and Medicine*, Vol. 39. 1994.

Heller, Patrick. 'From Class Struggle to Class Compromise: Redistribution and Growth in a South Indian State', *Journal of Development Studies*, 31 (5). 1995.

IndiaSAFE. *IndiaSAFE Final Report*, Washington DC: International Centre for Research on Women. 1999.

International Clinical Epidemiologists Network (INCLIN). *Domestic Violence in India 3:*

A Summary Report of a Multi-Site Household Survey, Washington, DC: International Centre for Research on Women and The Center for Development and Population Activities. 2000.

International Institute of Population Sciences and ORC Macro, 1998-'99. *National Family Health Survey-II*. Mumbai. 1999.

Jejeebhoy, S.J. 'Association between Wife-beating and Foetal and Infant Deaths: Impressions from a Survey in Rural India', *Studies in Family Planning*, Vol. 29. 1998a

_____. 'Wife-beating in Rural India: A Husband's Right', *Economic and Political Weekly*, Vol. 33. 1998b.

Jejeebhoy, Shireen J, Cook, Rebecca J. 'State accountability for wife-beating: The challenge', *The Lancet*, Vol. 349. London. 1997.

Kannan, K. P. 'Political Economy of Labour and Development in Kerala', *Economic and Political Weekly*. 33 (52). 1998.

Kholler Riessman, (Catherine). 'Stigma and everyday resistance practices: Childless women in South India', *Gender & Society*, 14 (1). Thousands Oaks. 2000.

Lawyers Collective Women's Rights Initiative. *Domestic Violence and Law: Report of Colloquium on Justice for Women-Empowerment through Law*. New Delhi: Butterworths. 2000.

Leiten, G. K. 'The Human Development Puzzle in Kerala', *Journal of Contemporary Asia*, 32 (1). 2002.

Levinson, D. *Violence in Cross-Cultural Perspective*, Newbury Park, CA: Sage. 1989.

Martin, S. L, et al. 'Sexual Behaviors and Reproductive Health Outcomes: Associations with Wife-Abuse in India', *Journal of the American Medical Association*, 282 (20). 1999a.

_____. 'Domestic Violence in Northern India', *American Journal of Epidemiology*, Vol. 150. 1999b.

Parameswaran, Radhika. 'Coverage of "Bride Burning" in the Dallas Observer: A cultural analysis of the "other"', *Frontiers*, Boulder, 16 (2-3). 1996.

Prasad, Devi, B. 'Dowry-Related Violence: A Content Analysis of News in Selected Newspapers', *Journal of Comparative Family Studies*, 25 (1). 1994.

Ramfrez J; Vazquez G. Mujer. "Y Violencia: un hecho cotidiano", *Salud Publica Mex*. Vol. 35. 1993.

Rao, V. 'Dowry Inflation in Rural India: A Statistical Investigation', *Population Studies*, Vol. 47. 1993.

———. 'Wife-beating in Rural South India: A Qualitative and Econometric Analysis', *Social Science and Medicine*, Vol. 44. 1997.

Saradhamoni, K. "Kerala Society and Politics", International Congress on Kerala Studies. Vol. 1. Thiruvananthapuram: AKG Centre for Research Studies. 1994.

Sen, Purna. 'Development Practice and Violence against Women', *Gender and Development*, 6 (3). 1998.

———. 'Enhancing Women's Choices in Responding to Domestic Violence in Calcutta: A Comparison of Employment and Education', *European Journal of Development Research*, 11 (2). 1999.

Strauss, M. A. 'Sexual Inequality and Wife-Beating'. In Strauss, M.A and D. Hotelling (Eds.) *The Social Crisis of Husband-Wife Violence*. Minneapolis: University of Minnesota Press. 1980.

Strauss, M.A., R. Gelles and S. Steinmetz. *Behind Close Door: Violence in the American Family*. Garden City, NY: Doubleday. 1980.

United Nations Development Fund for Women. *With an End in Sight: Strategies from the UNIFEM Trust Fund to Eliminate Violence Against Women*. New York: UNIFEM. 2000.

United Nations Development Programme. *Human Development Report 2000: Human Rights and Human Development*. New York: Oxford University Press. 2000.

Visaria, Leela. 'Violence against Women in India: Evidence from Rural Gujarat', *Domestic Violence in India: A Summary Report of Three Studies*, Washington, DC: International Centre for Research on Women. 1999.

World Health Organization. *World Report on Violence and Health*. Geneva: WHO. 2002.

Xu, Xiaohu. "The Prevalence and Determination of Wife-Abuse in Urban China", *Journal of Comparative Family Studies*. 1995.