

Research Article

Study on Domestic Violence against women in Nepalese village of Terai Region

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ABSTRACT

Background and Objectives: The South East Asian Region has one of the highest incidences of gender based violence in the world which deprives women from the use of their right and liberty. This study was under taken to explore the causes and consequences of domestic violence against women in Meghanath Gorhanna VDC in Mahottari district of Nepal.

Material and Methods: : An explorative quantitative and qualitative research design based study was conducted from September to December 2014 in married female of ward, No. 1, 2 and 4 of Meghanath Gorhanna VDC which is located in Mahottari district of Nepal suffering from domestic violence. Sample size consisted of 20 in each ward and sum of total was 60. In-depth interviews, focused group discussion and observation were tools used for data collection.

Results: The result of this study reveals that 40% of victims were between age group 20 to 29 years. Domestic violence was higher among illiterate 20(33%). 12(20%) of the women were victimized due to alcoholism of their husband followed by male honor and patriarchal social values. Similarly, majority of the respondents 47(78.3%) suffered from psychological abuse followed by physical assault. 20(33.3%) women were suffered from physical violence. 10% women were suffered from sexual abuse and harassment. The findings also suggest 23(35%) had mental health problem and 14(23 %) women were suffered from reproductive health problem.

Conclusion: The study highlights that various factors such as excessive intake of alcohol, patriarchal system of the society, polygamy, sexual dissatisfaction and dowry contributes for the domestic violence in women. The adverse effects of the violence on women are physical health problem, mental health problem, reproductive health problem, chronic conditions and negative health behavior.

Key Words: Domestic violence, Women, Terai, Mental health Problem, Village

INTRODUCTION

The World Health organization (WHO) defines violence is the intentional use of

physical force or power, threatened or actual, against oneself, another person, against a group or community that either results in or

has a high likelihood of resulting injury or death, psychological harm, mal-development or deprivation [1]. Each year, more than million people lose their lives, and many more suffer from injuries due to violence. Over all, violence is among the leading cause of death worldwide for people aged 15- 44 years [2].

Domestic violence is home-based violence, which disproportionately affects women more than men. This includes physical and psychological abuse, deprivation and marital rape. In the Nepali context, domestic violence stems from the assumption that once a man marriage a women he has absolute control over her. It is usually due to the right to domination on females which principally owes to the influence of the tradition idea that "Men are superior to women". It has severe effect on human rights and dignity of women. It is the result of unequal power relation between women and men [3]. Globally, it is estimated that, one on every three women is beaten, raped and otherwise abused during lifetime. [1,12].

The South East Asian Region has one of the highest incidences of gender based violence in the world. This is a result of overall inferior status of women and girls and of unequal power relation between the genders [4]. The Nepal Ministry of Health's 2011 Demographic Survey found that on average, more than 40% of men thought that one of the following was a justification for beating their wife: burning food, answering back, going out with telling him, neglecting the children, and refusing to have sex [5]. Although some studies have been carried out previously in Terai of Nepal but there is lack of authenticity on data information of domestic violence in this region of Nepal. Therefore, this study was designed to explore

the causes and consequences of domestic violence against women in Meghanath Gorhanna VDC of Nepal.

MATERIAL AND METHODS

The explorative quantitative research design based on complexity & sensitivity of the subject matter which was conducted from September to December 2014 in ward, No. 1, 2 and 4 of Meghanath Gorhanna VDC located in Mahottari district of Nepal. The married women as victim of domestic violence were selected for the study. Case inventory sheets were completed based on the incidents happened in the past in different corners of the district and registered in different concerned offices. Non-probability purposive sampling technique was adopted in selecting the respondents. The size of the sample consisted of 20 in each ward and sum of total was 60. In-depth interviews, semi-structured questionnaire, focused group discussion and observation checklist, field note were used for data collection. The researcher developed open ended interview guide after reviewing the related literature. Approval from VDC office was taken before the study. Written consent was taken from the participants and confidentiality was maintained.

Data was collected in the convenient time of the respondents generally at 12:00-2:00 PM. Their verbal expression and emotional status was also observed at the time of interview. Second visits were also made for respondents as it was not possible to get needed information in one visit. Supporting data was also collected from both male and female key informant in different settings. Collected data were checked and organized daily for completeness and accuracy. Number and percentage were calculated with the help of SPSS version 21.0 software.

RESULTS

Majority of victim of domestic violence were adult and young adult respectively (20-29 yrs & 30-49 yrs) in this study. Table 1 shows that maximum number of respondents was found to be in between 20-29 yrs with 40% and lowest number was in age group 15-19 yrs with 6.6%. The majority of victim of domestic violence were found in 20-29 years followed by 30-49 years. Educational status of respondents depicts that domestic violence was more due to illiteracy 20(33.3%) followed by 18(30%) who can only read and write.

Table 1: Distribution of Respondents by Age

Age	Respondents	
	Number	Percentage
15-19	4	6.6
20-29	24	40.0
30-49	20	33.3
50 and above	12	20.0

The educational status was found to be lowest among intermediate and bachelor level with 6.6 % as shown in table 2. The lack of education can increases vulnerability to domestic violence and exploitation.

Table 2: Educational Status of Respondents

Educational Status	No.	Percent
Illiterate	20	33.3
Only can read and write	18	30.0
Primary level	7	11.6
SLC	7	11.6
Intermediate level	4	6.6
Bachelor	4	6.6

Figure 1 shows the highest numbers of respondents (38.3 %) were from Tharu

community and the lowest numbers of respondents (13.3%) were from other community. Figure 2 highlights highest number of respondents had arranged marriage 73.3 % followed by love marriage (18.3%).

Figure 1: Caste/ Ethnicity of Respondents

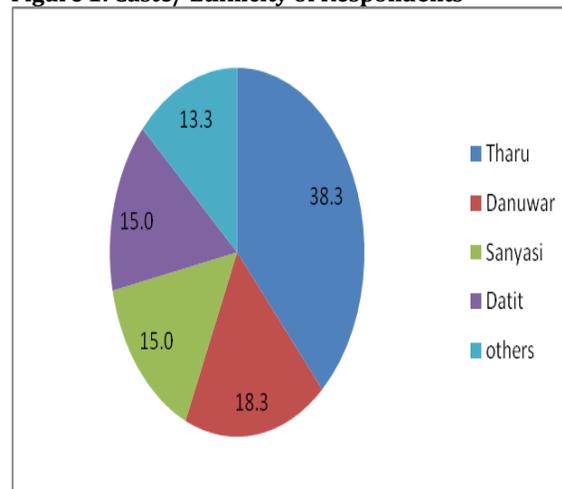


Figure 2: Types of Marriage

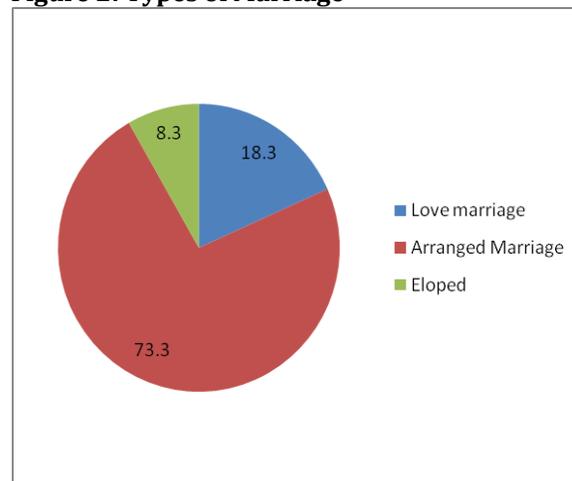


Table 3 indicates that the type of violence was faced by women. Psychological abuse was seen more than 47(78.3%). Least were abused as marital rape and sexual harassment 6(10%) and moderately as physical assault.

Table 3: Types of violence

Types of violence	No.	Percentage (%)
Psychological abuse	47	78.3
Physical assault	20	33.3
Marital rape and sexual Harassment	6	10

Table 4 indicates that the main Perpetrator involved in domestic violence was husband 34(56.6%) in domestic violence. The least number of perpetrator involved in domestic violence was husband and co-wife.

Table 4: The Perpetrators

The perpetrators	No	Percentage (%)
Husband	34	56.6
Husband and mother- in-law	9	10
Mother in-law and Father- in- Law	8	13.3
Husband and co-wife	2	3.3
Sister- in-law	2	3.3
Husband, Mother- in-law, Father- in-law, Sister- in-law	4	6.6

Table 5 shows that the main root cause of domestic violence was use of alcohol by husband of 12 (20%), being male 9(15%) followed by dowry system 7(11.6%). Table 6 indicates that the main reason of domestic violence was tolerating as their own fate 22(36.6%) and weeping and sharing with friends in village 11(18.3%). Table 7 showed the major consequence of domestic virulence. The highest number of consequences was found due to mental health problems 23(35%) followed by

reproductive health problem 14(23%).

Table 5: The Root Cause

Causes	No	Percentage (%)
Use of alcohol by husband	12	20
Husband's habit of gambling	2	3.3
Polygamy	2	3.3
Unemployment of husband	4	6.6
Extra marital affair of husband	4	6.6
Husband listen to others	2	3.3
Son preference	4	6.6
Suspicious attitude of husband	4	6.6
Sexual dissatisfaction	5	8.3
Dowry	7	11.6
Being male	9	15
Inter caste marriage	3	5
Widowhood	2	3.3

Table: 6 Coping Mechanism

Coping Mechanism	No.	Percentage (%)
Tolerating as their own fate	22	36.6
Seeking help from maternal house	3	5
Living Separately	4	6.6
Handle with fight	3	5
Report to the paralegal committee	4	6.6
Weeping and sharing with friends in village	11	18.3
Cope Intellectually	4	6.6
Suicidal attempt	3	5
Listening to music	3	5
Staying alone silently for a while	3	5

Table 7: Consequences of domestic violence

Consequences	No.	Percentage (%)
Physical health problem	9	15
Mental health problem	23	35
Reproductive health problem	14	23
Chronic conditions	8	13
Negative health behavior	6	10

Most of the women had pelvic inflammatory disease, unwanted pregnancy, abortion and also had premature birth baby due to severe beating by her husband during pregnancy. Among respondents with chronic condition, most of them had complained about irritable bowel syndrome and chronic pain syndrome.

DISCUSSION

Domestic violence includes both physical and psychological abuse and deprivation and marital rape [6]. Domestic violence stems from the assumption that once a man marries a women he has absolute control over her. Table 3 highlights that majority of the respondents 47(78%) were suffered from psychological abuse. Second major type of violence faced by women was 20(33%) physical assault. 10 % women were suffered from Sexual abuse and harassment. A research report from Hebert Laura (1997) on “Monitoring the domestic violence Act” also revealed that domestic violence as recognized by the knowingly placing or attempting to place the victim in fear of physical and psychological injury [7]. Table 4 seen that majority of the perpetrators 34(56.6%) were husbands. A report of violence against women and girls in South Asia shows the incidence of women physically assaulted by their abusive husband [8].

The findings revealed that root cause of domestic violence against women was use of

alcohol by their husbands 12(20%). Up to 50% women reported physical violence by their husbands or partners in South East Asian Region [9]. Partner violence accounts for 40-70% murders, where women are killed by their husband or boyfriend, often during ongoing abusive relationships [10].

Second major cause as reported by the respondents was the traditional notions of male honor, felling of supremacy and control over family. Domestic violence in the family stems from the concept of male superiority and power. In most countries, the male has been historically and traditionally considered the provider and more powerful figure, and that is the basis for the exercise to control over the female [11]. Report shows that in Peru 70% of all crimes reported to police are of women beaten by their husband [12]. Third leading cause of domestic violence was Dowry.

The study highlights that majority of the victim were tolerating it and staying with own way. A situation analysis conducted by SAATHI (1997) on violence against women in Nepal revealed that 93% had exposed to mental and emotional torture, 82% were beaten, 30% raped, 28% forced in to prostitution, 64% reported polygamy[3]. The maternal mortality study conducted by Family Health (1998), revealed that higher suicide rate among women of reproductive age group [13].

The study reports consequence of domestic violence in women mental health problem high and other are Reproductive health problem and physical health problem. A similar report has been given that many more are injured and suffer from a range of physical, sexual, reproductive and mental health problems [14].

Studies by McCauley (1995) showed that women who have experienced physical or sexual abuse in childhood or adulthood experienced ill-health more frequently than other women-with regard to physical functioning, psychological well-being and the adoption of further risk behaviors, including smoking, physical inactivity, and alcohol and drug abuse [15].

CONCLUSION

This study concludes that there are various factors which contribute for the domestic violence against women such as excessive intake of alcohol, patriarchal system of the society, polygamy, sexual dissatisfaction and dowry. The adverse effects of the violence on women are physical health problem, mental health problem, reproductive health problem, chronic conditions and negative health behavior.

LIMITATIONS

The study population was limited to some of the specific wards only in a single VDC and cannot be correlated with other wards. The purposive and snowball sampling technique of non-probability strategies, which might reduces the external validity. Information bias may have occurred due to sensitive issues regarding hidden problems. Strategy for awareness, advocacy, effective law enforcement, mobilizing communities to prevent violence, empowerment of women and girls, gender sensitization should be improved on governmental policy to reduce, prevent and control the gender based violence.

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AUTHOR'S CONTRIBUTION

SSG- Research design, Survey, script, interview, data collection; **JKS**- Data Analysis and revision of the manuscript; **RG**- Did support in scripting the manuscript; **LKJ**- Did data analysis; **SKY**- Designed the concept of study, supervised the research and final manuscript approval.

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