A Two-Year Experience of Gender-Based Violence at a Pioneer One Stop Crisis Center: Sukoon

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ABSTRACT

This paper examines violence against women, with a special focus on domestic violence, along with sexual violence and sexual assault, in multidimensional perspective for the period of two years so as to understand its magnitude and its impact on the rights of women in the northern part of India. Among all such cases, there were 57.2% cases of domestic violence, 20.3% cases of sexual violence and sexual assault, 17.8% cases of attempted poisoning, 1.5% cases of homicidal burns, and 1.2% cases of attempted suicide. The greatest number of cases was recorded during the spring, followed by summer. It was observed that the greatest number of cases (60.24%) was recorded under the homemaker (housewife) category of women followed by the working category (26.80%). The greatest number of cases is seen in the age group of 20 to 30 years (42.77%), followed by the age group of 30 to 40 years (23.49%). A slightly higher number of cases (51.20%) was reported from rural areas. The greatest number of cases was recorded under the domestic violence category. The second highest percentage of cases reported involved sexual violence and sexual assault. The greatest number of married cases had a duration of zero to ten years (43.37%), followed by the unmarried category (19.87%). With reference to duration of violence, the greatest number of cases is seen in the age group of zero to six months (32.53%). The greatest number of cases is seen under the no child category (40.96%). Regarding the alleged perpetrator, the greatest number of cases is seen under the husband category (23.79%), followed by unknown category (22.28%). *Acad Forensic Pathol.* 2019 9(3-4): 172-180

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INTRODUCTION

Even though violence against women (VAW) is widespread, it is least recognized. It is a profound health problem, sapping women's energy and compromising their physical and mental health (1, 2). The position and status of women has gone through many great changes over the ages. With the roots of VAW traced throughout the history, it is the commonest human rights violation which continues to linger. VAW has been a buzz issue throughout the world.

Internationally, one in three women has been beaten, coerced into sex, or abused in her lifetime by a member of her own family (2). National Crime Records Bureau revealed that every 33 minutes one Indian woman is being abused by her husband. It also revealed that one dowry death occurred every 125 minutes. The percentage share of domestic VAW among registered cases of crime has shown a rise from 3.8% in 2007 to 4.3% in 2011 (3).

The World Human Rights Conference in Vienna first recognized gender-based violence (GBV) as a human rights violation in 1993. United Nations declaration, 1993, defined VAW 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 deprivations of liberty whether occurring in public or private life." GBV or VAW is defined as violence that is directed against a woman or that affects women disproportionately. It is a manifestation of unequal power and relationship between man and woman. Violence against women and girls includes physical, sexual, psychological, and economic abuse. It is often known as "gender-based" violence because it involves in part from women's subordinate status in society (4, 5).

The different types of VAW include, but are not limited to, dating violence; domestic and intimate partner violence; physical, psychological, cultural, spiritual, verbal, financial, or emotional abuse; human trafficking; same-sex relationship violence; sexual assault and abuse; stalking; violence against immigrant and refugee women; VAW at work; VAW with disabilities; isolation; and neglect (6, 7).

Violence may be experienced by women throughout their life span including prebirth, infancy, girlhood, adolescence, reproductive age, and even when elderly (1). The present study aimed to analyze VAW specifically concentrating on domestic and sexual violence to further identify the factors contributing toward VAW, with a special focus on their education and occupation status.

MATERIAL AND METHODS

The study was undertaken in the One Stop Crisis Center named "Sukoon" attached to a government-run district hospital in a metropolitan city in the northern part of India (lead author is the coordinator of the center). "Sukoon" is a vernacular term for comfort, relief, and respite. The hospital caters to a wide population of patients, both rural and urban, not only from the same district but also from the adjoining districts. The duration of the study was a period of two years from January 2015 to December 2016. The study included all of the cases of VAW that were reported at this unit of the hospital. Demographic and social factors regarding age, sex, marital status, residential area, education status, occupation status, season, and months were collected by interviewing the patients (by a female physician along with a psychologist), along with their due consent, apart from the records. The relevant information obtained in every case was recorded in a proper manner and was kept confidential.

OBSERVATIONS

Only females are examined at this center. The total number of cases reported during the two year period was 332; of which there were 190 cases of domestic violence (physical assault within family or household), 68 cases of sexual violence and sexual assault, 59 cases of attempted poisoning, 5 cases of burns (homicidal), 4 cases of attempted suicide (cases of physical self-harm as an outcome of emotional abuse or other forms of violence), and 6 other cases of assault. Only nonfatal cases were included in this study. Year on year, the cases have increased (**Table 1**). The age of the victims ranged from four to 75 years.

The greatest number of cases in the year 2015 was recorded in the months of June followed by December, August, and September, respectively. While in the year 2016, the greatest number of cases was recorded in the month of July followed by April, December, August, and November, respectively (**Table 1**).

The greatest number of cases was recorded during the spring, followed by summer (**Table 2**). It was observed that the greatest number of cases, 200 (60.24%), was recorded under the homemaker (housewife) category of women followed by the working category, 89 cases (26.80%; **Table 3**).

The greatest number of cases was seen in the age group of 20 to 30 years, 142 cases (42.77%), followed by the age group of 30 to 40 years, 78 cases (23.49%). The lowest number of cases was reported in the age group of zero to ten years and in the above 60 years age group comprising of four cases each (1.20%). The oldest victim was aged 75 years and the youngest victim was aged 4 years (**Table 4**).

Of the 332 cases reported, 170 cases (51.20%) were from a rural background, while 159 cases (47.89%) were from an urban background. For the remaining three cases, the details were unknown. The greatest number of cases was recorded under the domestic violence category from both urban, 85 cases (44.73%), and rural backgrounds, 105 cases (55.26%). Second highest percentage of cases was reported of sexual violence and sexual assault. Forty-three cases (63.23%) were from an urban background and 24 cases (35.29%) were from a rural background (**Table 5**).

The primary education category had the greatest number of recorded cases (115 cases, 34.63%), followed by the illiterate category (97 cases 29.21%; **Table 6**). The greatest number of married cases is seen in the group of zero to ten years' duration (144 cases; 43.37%), followed by the unmarried category (66 cases; 19.87%) The lowest number of cases was reported in the group of above 40 years' duration (3 cases; 0.90%; **Table 7**).

Table 1: Types of Violence and Monthly Distribution of the Victims

Month	Domestic Violence		Sexual Violence/Assault		Poisoning		Burns		Suicide		Others	
	2015	2016	2015	2016	2015	2016	2015	2016	2015	2016	2015	2016
January	1	6	5	2	1	4	-	1	1	1	-	1
February	7	4	1	1	-	5	-	-	-	-	1	1
March	6	8	1	-	1	2	-	-	-	-	-	-
April	8	12	1	4	1	5	-	-	-	-	-	-
May	7	5	2	2	2	5	-	-	-	-	1	-
June	13	4	5	2	2	1	-	1	-	-	-	-
July	7	24	2	8	1	3	-	1	-	-	-	-
August	9	9	3	6	1	2	-	-	1	-	-	-
September	7	5	3	3	3	2	-	-	-	-	-	-
October	4	10	1	4	2	2	-	-	-	-	1	-
November	6	12	2	3	2	2	1	-	-	-	1	-
December	7	9	3	4	6	4	1	-	-	1	-	-
Total	82	108	29	39	22	37	2	3	2	2	4	2
	190 (57.2%)		68 (20.3%)		59 (17.8%)		5 (1.5%)		4 (1.2%)		6 (1.8%)	

Table 2: Seasonal Distribution of Incidents of Violence

Type of Violence	Winter	Spring	Summer	Autumn
Domestic Violence	34	78	46	32
Sexual Violence/Assault	16	32	10	10
Total	50 (15.1%)	110 (33.1%)	56 (16.9%)	42 (12.7%)

Table 3: Distribution of Victims By Occupational Status

Type of Violence	Working	Homemaker	Student	Not known
Domestic Violence	57	127	4	-
Sexual Violence/Assault	19	22	19	8
Poisoning	9	46	5	1
Burns	-	4	1	-
Suicide	1	1	2	-
Others	3	-	2	1
Total	89 (26.8%)	200 (60.2%)	33 (9.9%)	10 (3.0%)

Table 4: Age Distribution of the Victims By Type of Violence

Type of Violence	0-10 Years	10-20 Years	20-30 Years	30-40 Years	40-50 Years	50-60 Years	> 60 Years	Not Known
Domestic Violence	-	19	92	53	16	6	4	-
Sexual Violence/Assault	4	37	15	9	3	-	-	-
Poisoning	-	15	30	12	2	-	-	-
Burns	-	1	4	-	-	-	-	-
Suicide	-	2	-	2	-	-	-	-
Other	-	2	1	2	-	-	-	1
Total	4 (1.2%)	76 (22.9%)	142 (42.8%)	78 (23.5%)	21 (6.3%)	6 (1.8%)	4 (1.2%)	1 (0.3%)

Table 5: Demographic Particulars of the Victims

Type of Violence	Urban	Rural	Not Known
Domestic Violence	85	105	-
Sexual Violence/Assault	43	24	1
Poisoning	23	36	-
Burns	1	4	-
Suicide	3	1	-
Other	4	-	2
Total	159 (47.9%)	170 (51.2%)	3 (0.9%)

With reference to duration of violence, the greatest number of cases is seen in the group of zero to six months 108 cases (32.53%), followed by the one to five years category, 107 cases (32.22%) The lowest number of cases was reported in the above 20 years group, 10 cases (3.01%; **Table 8**).

For sex of living children of the victims, the greatest number of cases was seen under the no child category, 136 cases (40.96%), followed by the both sons and daughters' category, 98 cases (29.51%; **Table 9**).

Table 6: Distribution of Victims By Education Status

Type of violence	Illiterate	Primary	Secondary	Senior Secondary	Graduate and Above	Not Known
Domestic Violence	66	60	25	4	35	-
Sexual Violence/Assault	15	26	13	4	9	1
Poisoning	14	22	19	-	4	-
Burns	-	5	-	-	-	-
Suicide	-	1	2	1	-	-
Other	2	1	1	1	-	1
Total	97 (29.2%)	115 (34.6%)	60 (18.1%)	10 (3.0%)	48 (14.5%)	2 (0.6%)

Table 7: Distribution of Victims By Marriage Duration

Type of Violence	Duration of Marriage					Unmarried	Not Known
	0-10 Years	10-20 Years	20-30 Years	30-40 Years	> 40 Years		
Domestic Violence	97	36	15	10	3	10	19
Sexual Violence/Assault	10	5	1	-	-	40	12
Poisoning	31	7	3	-	-	11	7
Burns	3	1	-	-	-	1	-
Suicide	2	-	-	-	-	2	-
Other	1	-	-	-	-	2	3
Total	144 (43.4%)	49 (14.8%)	19 (5.7%)	10 (3.0%)	3 (0.9%)	66 (19.9%)	41 (12.3%)

Table 8: Duration of Violence

Type of Violence	0-6 Months	6-12 Months	1-5 Years	5-10 Years	10-20 Years	>20 Years	Not Known
Domestic Violence	49	9	63	29	16	9	15
Sexual Violence/Assault	31	1	19	4	1	-	12
Poisoning	21	1	22	2	2	1	10
Burns	4	-	1	-	-	-	-
Suicide	1	-	2	-	-	-	1
Other	2	-	-	-	-	-	4
Total	108 (32.5%)	11 (3.3%)	107 (32.2%)	35 (10.5%)	19 (5.7%)	10 (3.0%)	42 (12.7%)

Regarding the alleged perpetrator, the greatest number of cases was seen under the husband category, 136 cases (23.79%), followed by the unknown category, 74 cases (22.28%; **Table 10**). Not all perpetrators were males; the perpetrators included females in the category of in-laws, acquaintances and friends, and neighbors. The woman's family included the blood relatives of the female from her parents' side and her own children.

DISCUSSION

Violence against women, be it sexual violence, sexual assault, domestic violence, suicide, poisoning, or burn cases, has become a major medicolegal and socioeconomic problem in our country. Comparison between various studies on VAW is very difficult because pattern of violence differs from country to country and region to region due to differences in the demographic profile (8).

The United Nations Declaration on the Elimination of Violence Against Women, General Assembly Resolution of December 1993, states that "Violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women."

Violence against women continues to be a global epidemic that kills, tortures, and injures them physically, psychologically, sexually, and economically. It is one of the most prevalent human rights violations, cutting across boundaries of culture, class, education, income, ethnicity, and age, denying women their equality, security, dignity, self-worth, and right to enjoy their fundamental freedoms (9). Domestic violence is usually perpetrated by males who are, or who have been, in positions of trust and intimacy and power with women—husbands, boyfriends, fathers,

Table 9: Gender of Living Children of the Victims

Type of Violence	No Children	Sons Only	Daughters Only	Both Sons & Daughters
Domestic Violence	45	37	32	76
Sexual Violence/Assault	56	2	4	6
Poisoning	26	11	6	16
Burns	3	-	2	-
Suicide	2	1	1	-
Other	4	-	2	-
Total	136 (41.0%)	51 (15.4%)	47 (14.2%)	98 (29.5%)

Table 10: Alleged Accused or Perpetrator

Type of Violence	Husband	In-Laws	Husband and In-Laws	Acquaintance and/or Friend	Neighbour	Victim's Family	Unknown
Domestic Violence	60	49	27	7	33	6	8
Sexual Violence/Assault	7	3	2	25	12	5	14
Poisoning	9	-	2	-	2	3	43
Burns	1	-	-	-	-	-	4
Suicide	2	-	-	-	-	-	2
Other	-	-	-	-	3	-	3
Total	79 (23.8%)	52 (15.7%)	31 (9.3%)	32 (9.6%)	50 (15.1%)	14 (4.2%)	74 (22.3%)

fathers-in-law, stepfathers, brothers, uncles, sons, or other relatives.

An equal helpful effort needs to be put in by law enforcement agencies, social welfare societies, and healthcare service providers so that no case goes unreported due to social pressure from family members or social stigma of defamation. We can bring about a major change only by changing the mind-set of society through education and better law enforcement (10).

An increase in overall incidence of VAW has been noted in the present work. Establishment of this unique center has caused increase in awareness, which could have contributed in better reporting and therefore showing increase in overall incidence of violence in this study. Children who are subjected to abuse are likely to behave similarly as adults. Socioeconomic status and substance and alcohol abuse also leads to VAW in India. Sometimes children who witness one parent abusing the other tend to abuse later in life (11).

It is important to realize that links between economic dependency and abuse go hand in hand. High economic dependency may lead some women to tolerate physical abuse. The women who are economically independent, and are not dependent on their in-laws for their livelihood, easily come out of an abusive relationship (12).

The young adults (20-30 years) are more involved as it is the most preferable marriageable age in Indian society. This is the most active period of life and people have a tendency to take undue risk and face mental, psychological, social, and physical stress (13).

Rural women are more vulnerable to violence than their counterparts in urban areas. Domestic violence cases were too recorded more in rural area. This could be due to illiteracy and economic dependence of women on their husbands in rural areas. Suppression of the female voice is still prevalent especially in the rural areas where the awareness of the rights of the female is still overlooked (14).

Higher educational status of women has been associated with lower levels of violence. This is justified by the idea that education might confer social empowerment and greater female autonomy, which in turn helps change norms and improve socioeconomic conditions (15).

Longer duration of marriage or cohabitation or partnership has been associated with lower incidence of violence. As duration increases, victims may feel pressured into staying in violent relationships under the guise of “healthy marriage” goals and family responsibilities.

Possible reasons for seeing the greatest number of cases with violence duration under the zero to six months and one to five years categories could be due to societal pressure, keeping up with their respective parents’ expectations, and expecting that things may get sorted out over a period of time.

Study of sex of living children concluded that there is no direct relevance between the sex of living children and the duration of violence. This is in contrast to the commonly presumed victimization of a women who does not bear male children as a manifestation of pervasive son preference of rigid patriarchal family systems (1).

There is widespread prevalence of VAW in India, as majority of married women tend to justify the same as part of routine married life. A lot of variables such as age, education of women, age at first marriage, ethnic and religious categories, women’s autonomy, exposure to mass media, work status of women, and standard of living besides place of residence contribute significantly to the prevalence of violence (16, 17).

On average, a woman leaves her abusive partner two to five times before finally ending the relationship (18). Institutional changes to enhance training and support providers working in the front line of this epidemic may improve services for victims of violence (19).

There are some limitations that should be acknowledged before concluding. Privacy or trust issues with the interviewer or the center leading to underreporting would attenuate the results. A number of factors that have been found to be associated with increased risk of violence, including dowry harassment, love marriage, socioeconomic status and age at marriage, were not included in the analyses; this may bias the results.

The experience of violence undermines the empowerment of women and certainly is a barrier to the socioeconomic and demographic development of the country. In view of the prevalence of the problem, it is suggested to have programs that take into account involvement of the community and especially the males for effective as well as fruitful amelioration of the issue. It can again be suggested that education of the girls should be encouraged, which will undoubtedly work as deterrent to domestic violence. Again, though the present findings are silent about the legal side of the issue, stringent laws against the perpetrators of the violence and laws giving more rights to the women will always be beneficial to curb the issue. As it is found to be deep rooted in the sociocultural practices, both the perpetrator and victim take it for granted; there is need of major transformation in the sociocultural milieu. In order to address the problem, social norms and values toward gender roles should be transformed to facilitate the implementation of appropriate and meaningful responses to domestic violence and ultimately to prevent it from happening altogether (10, 16, 20).

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