European Scientific Journal September 2015 edition vol.11, No.26 ISSN: 1857 - 7881 (Print) e - ISSN 1857-7431

DOMESTIC VIOLENCE AGAINST WOMEN: A HISTORIC AND SOCIO-CULTURAL REALITY IN BANGLADESH

Mohiuddin Ahsanul Kabir Chowdhury, MBBS, MPH
International Centre for Diarrhoeal Diseases Research, Bangladesh (icddr,b),
Salma Morium, LLB, LLM
Premier University, Chittagong

Abstract

Domestic violence against women is prevalent throughout the world in different forms even in this twenty first century. Though the view towards domestic violence varies across the countries the World Bank has already spotted it as a global epidemic. Domestic violence, whether in urban or rural areas, puts women community at vulnerable position as it causes both physical and psychological grievances. Several forms of domestic violence including physical, psychological, sexual and economical violence have been illustrated by different organizations worldwide. In Bangladesh, the patriarchal capitalism puts women in such a position that they always remain subservient under mail domination and in many cases this is reflected through violence against them. This was criminalized in Bangladesh in 2010. But the laws are not enough alone to protect the women from sufferings. Strategies should be taken to raise the awareness among the general population along with effective implementation of the law. This paper depicts an overview on domestic violence against women from socio-cultural and legal perspective emphasizing especially over the situation in Bangladesh.

Keywords: Domestic violence, Women, Impact, Legal aspects, Sociocultural, Historic, Bangladesh

Introduction

Violence against women has been treated as a global epidemic which is as fatal as any serious disease or accidents (World Bank, 1993). According to a multi country study conducted by World Health Organization (WHO), most women in the study area experience violence against them in their lifetime (Garcia-Moreno, 2005). The social view towards violence against women varies from country to country. For instance, in 2010, the United

Arab Emirates' Supreme Court ruled that a man possesses the right to physically discipline his wife and children as long as he does not leave physical marks (Elsaidi, 2011). This attitude is simply unimaginable in the western society. But even then physical, psychological and sexual violence against women by their intimate partners is widespread around the countries (Garcia-Moreno, 2005).

In a study it was found that women are at higher risk to experience violence from an intimate partner than that from any other person (Rapps, 2012). This domestic violence is regarded as a serious human rights violation and an important global public health problem with negative consequences for women's health (Rapps, 2012). The mentionable health consequences are injuries, pain, gastrointestinal problems, gynecological problems, sexually transmitted diseases, depression, post-traumatic stress disorder etc. (Campbell, 2002). In addition, this undermines the socio-economic development of a nation as well as acts as an obstacle in the path of achievement of the Millennium Development Goals (MDG).

(Campbell, 2002). In addition, this undermines the socio-economic development of a nation as well as acts as an obstacle in the path of achievement of the Millennium Development Goals (MDG).

Domestic violence against women, especially beating wives by husbands, has been common in all culture perhaps in all times (Bhuiya, 2003; Burton, 2000; Dobash, 1979; Goode, 1971). Like many other low income countries this phenomenon is also common in Bangladesh (Bhuiya, 2003). A number of studies show that violence against women is strikingly predominant in Bangladesh. In Bangladesh, women suffer from different forms of violence, ranging from wife abuse to rape, dowry killings, acid throwing, sexual harassment, sexual slavery through trafficking etc. Among all these odious acts against women domestic violence is the commonest one (Khatun, 2012). While the world is moving towards righteousness, this violence against women is being proven as a strong obstacle to establish equity and women empowerment. Almost all the countries of the world have laws against this type of activities. In recent times the Government of Bangladesh passed an act called "The Domestic Violence (Prevention and Protection) Act 2010" for the protection of women and children from family violence and discrimination. But the fact is that the laws are not enough alone. Because without proper execution of law domestic violence will not be eradicated.

Domestic violence

Synonyms: Domestic abuse; Spousal abuse; Battering; Family violence; Intimate partner violence; etc.

Definitions: The definition of domestic violence varies from country to country and culture to culture. The definition depends on the context in which it is used. Such as:

The United Nations Declaration on the Elimination of Violence against Women (United Nations, 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 in private life."

"Domestic violence is a pattern of behavior which involves the abuse by one partner against another in an intimate relationship such as marriage, cohabitation, dating or within the family." (Shipway, 2004)

According to Merriam-Webster dictionary (2013) says "domestic violence is the inflicting of physical injury by one family or household member on another; also: a repeated / habitual pattern of such behavior."

The Convention on preventing and combating violence against women and domestic violence (2003) states that: "domestic violence shall mean all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim". same residence with the victim".

Domestic violence can be defined as a pattern of behavior in any relationship that is used to gain or maintain power and control over an intimate partner (National Domestic Violence Hotline, 2013). Domestic violence can happen to anyone of any race, age, sexual orientation, religion or gender. It can happen to couples who are married, living together or who are dating. Domestic violence affects people of all socioeconomic backgrounds and education levels.

Domestic violence is purposeful, and is commonly used as a form of control, the assertion of one member above the others. However, this violence grows out of inequality within marriage and reinforces male dominance and female subordination within the home and outside it (Yllö, 2005).

Various researchers, advocates, and theorists who have studied and worked with women subjected to abuse have catalogued many types of abuses as domestic violence. Domestic violence is defined as a pattern of behavior in a relationship by which the batterer attempts to control his victim through a variety of tactics. These tactics may include fear and intimidation, any kind of abuse, destruction of property and pets, isolation and imprisonment, economic abuse, and rigid expectations of sex roles (Johnston, 2008).

At present, international conventions and different governments have been using a broader definition of domestic violence against women which include sexual, psychological and economic abuse as well along with physical assault.

Types of domestic violence:

UNICEF (2008) utilized different forms of abuse and exploitation in defining domestic violence perpetrated by intimate partners and other family members. The **physical abuse** includes slapping, beating, arm twisting, stabbing, strangling, burning, choking, kicking, threats with an object or weapon, murder, traditional harmful practices like female genital mutilation in African society or honor killings. **Sexual abuse** such as coerced sex through threats, intimidation or physical force, forcing unwanted sexual acts or forcing sex with others has also been considered as domestic violence by UNICEF. **Psychological abuse** comprises the behavior that is intended to intimidate and persecute, and takes the form of threats of abandonment or intimidate and persecute, and takes the form of threats of abandonment or abuse, confinement to the home, surveillance, threats to take away custody of the children, destruction of objects, isolation, verbal aggression and constant humiliation. Finally UNICEF mentioned another form of violence termed as Economic abuse. Economic violence or abuse includes acts such as the denial of funds, refusal to contribute financially, denial of food and basic needs, and controlling access to health care, employment, etc.

Michael P. Johnson (2006) also argues for these four major types of

intimate partner violence, which is supported by subsequent research and evaluation. Distinctions are made among the types of violence, motives of perpetrators, and the social and cultural context based upon patterns across numerous incidents and motives of the perpetrator.

numerous incidents and motives of the perpetrator.

However, in a recent study (Centre for Policy Dialogue, 2009) it has been observed that mainly four types of domestic violence, i.e. physical, psychological, economic and sexual abuse and violence are prevalent throughout Bangladesh. In that study most of the victims (93%) reported of physical violence; only 13% reported of having experience of sexual violence; 91% victims reported of economic violence and 84% reported psychological violence committed by their husbands.

Hence, we can infer that there are principally four forms of domestic violence reported throughout the world. These are: Physical violence, Psychological violence. Sexual violence and Economic violence.

Psychological violence, Sexual violence and Economic violence.

Factors that perpetuate domestic violence

There are different types of factors which can contribute to the occurrence of domestic violence against women. Some of them are listed below:

Cultural factors

Cultural factors have been considered as very important for the prevalence of domestic violence in a society (Naved & Persson, 2005). Domestic violence has become socially approved in some countries (Elsaidi,

2011). In some countries sexual rights of women are completely ignored. As a result, sexual violence is very common in those societies. Gender specific socialization and belief in the inherent superiority of males are two important cultural factors which drive the males to commit domestic violence against cultural factors which drive the males to commit domestic violence against women (Khatun, 2012). Besides, cultural definitions of appropriate sex roles and expectations of roles within relationships are role-specific cultural factors which promote the continuation of domestic violence in the society (Naved & Persson, 2005). Some societies give men propriety rights over women and girls which precipitate the condition more than ever (Elsaidi, 2011). Moreover, the customs of marriage such as bride price or dowry also contribute for the occurrence of this grievous event (Naved & Persson, 2005). Thus different cultural factors influence physical, psychological and economic violence altogether (Khatun, 2012; Naved & Persson, 2005).

Economic factors

Women are the victims of social discrimination in most of the Low and Middle Income Countries (LMICs) of the world (Garcia-Moreno, 2005). This phenomenon i.e. social discrimination results in economic dependency of the women over the patriarchal society which potentially leads to domestic violence against women. Some mentionable economic factors are women's economic dependency on men, limited access to cash and credit, limited access to employment in formal and informal sectors, limited access to education and training for women (Naved & Persson, 2005). The economic factors are related with the cultural and political factors unswervingly as the cultural norms and political societal views have been fixing the role of women in the society for millennia which have shackled the women and made them economically vulnerable. This fact, in turn, has played a significant role in validating domestic violence against women in different societies.

Legal factors

From the ancient period the patriarchal society made the laws which were discriminatory towards women. Even in this modern world some laws are still prevailing which are not equitable (Khatun, 2012). Those legal discriminations provoke domestic violence in some cases. The notable legal factors are lesser legal status of women either by written law and/or by practice, low levels of legal literacy among women, insensitive treatment of women and girls by police and judiciary, discriminatory laws regarding divorce, child custody and maintenance, inheritance, property rights and use of communal lands (Khatun 2012) of communal lands (Khatun, 2012).

Political factors

Politically women are still lagging behind even in the western world. We can see the example of United States of America. They have not chosen any women head of the state yet in their history of democracy. It has been just a hundred years or so since the women started to get the right to vote. Therefore, there are some political factors too which contribute in domestic violence against women, such as under-representation of women in power, politics, the media and in the legal and medical professions, risk of challenges to status quo/religious laws, limited organization of women as a political force, and limited participation of women in organized political system (Khatun, 2012)

Impacts of domestic violence against women **Denial of fundamental rights:**

Perhaps the most crucial consequence of violence against women is the denial of fundamental rights which are affirmed by Universal Declaration of Human Rights (UDHR), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and other international commissions. The strength of these treaties rests on an international consensus, and the assumption that all practices that harm women must be eradicated. Therefore, domestic violence against women weakens these treaties and also provides difficulties for the corresponding government to cope up with the progressive world (Jejeebhoy, 2010; Khatun, 2012).

Human development goals undermined:

Data on the social, economic and health costs of violence leave no doubt that violence against women undermines progress towards human and economic development. Women's participation has become key in all sorts of social development programs, be the environmental, for poverty alleviation, or for good governance. All the Millennium Development Goals (MDGs) are related directly or indirectly to women and women empowerment. So, domestic violence against women will drag the nation behind to achieve the MDG targets on time (Jejeebhoy, 2010).

Health consequences:

Domestic violence against women may cause numerous health consequences ranging from simple headache to fatal death (Jejeebhoy, 2010; and Khatun, 2012). For better understanding we are going to classify the health consequences into nonfatal and fatal outcomes in broad headings and then sub-classify accordingly [Table 1]. Table 1 shows that there are several health outcomes that might happen following domestic violence ranging from simple scratch marks to fatal homicides. Hence, the government of any country should not be reluctant in handling intimate partner violence strictly.

Table 1: Health consequences of domestic violence against women

Nonfatal outcomes Injury (from lacerations to fractures and internal organs injury) Unwanted pregnancy Gynecological problems STDs including HIV Miscarriage Pelvic inflammatory disease Pelvic inflammatory disease Headaches Permanent disabilities Asthma Permanent disabilities Asthma Irritable bowel syndrome Self-injurious behaviors(smoking, unprotected sex) Pera Pera Anxiety Low self-esteem Anxiety Low self-esteem Sexual dysfunction Eating problems Obsessive-compulsive disorder Post-traumatic stress disorder Post-traumatic stress disorder Suicide Homicide Homicide Maternal mortality Maternal mortality HIV/AIDS	1 aute 1. 116	and consequences of domestic violence against women
Physical health outcome Mental health outcomes Mental health outcomes Physical health outcomes Mental health outcomes Sexual dysfunction Sexual dysfunction Sexual dysfunction Obsessive-compulsive disorder O Post-traumatic stress disorder O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes Maternal mortality		Nonfatal outcomes
Physical health outcome Pelvic inflammatory disease Permanent disabilities Permane		
Physical health outcome O STDs including HIV O Miscarriage O Pelvic inflammatory disease O Chronic pelvic pain O Headaches O Permanent disabilities O Asthma O Irritable bowel syndrome O Self-injurious behaviors(smoking, unprotected sex) Mental health outcomes O Depression O Fear O Anxiety O Low self-esteem O Sexual dysfunction O Homicide O Homicide O Homicide O Maternal mortality		
Physical health outcome Physical health outcome Pelvic inflammatory disease Chronic pelvic pain Chronic		
Physical health outcome Pelvic inflammatory disease Chronic pelvic pain Headaches Permanent disabilities Asthma Self-injurious behaviors(smoking, unprotected sex) Mental health outcomes Mental health outcomes Fatal outcomes Suicidal tendency Fatal outcomes Miscarriage Pelvic inflammatory disease Chronic pelvic pain Headaches Permanent disabilities Asthma Depression Fear Anxiety Sexual dysfunction Eating problems Desermination stress disorder Suicidal tendency Fatal outcomes		
Outcome O Pelvic inflammatory disease O Chronic pelvic pain O Headaches O Permanent disabilities O Asthma O Self-injurious behaviors(smoking, unprotected sex) Mental health Outcomes O Sexual dysfunction Obsessive-compulsive disorder O Obsessive-compulsive disorder O Sost-traumatic stress disorder O Suicidal tendency Fatal outcomes O Maternal mortality	•	
outcome Chronic pelvic pain Headaches Permanent disabilities Asthma Self-injurious behaviors(smoking, unprotected sex) Self-injurious behaviors(smoking, unprotected sex) Fear Anxiety Anxiety Low self-esteem Sexual dysfunction Eating problems Sexual dysfunction Eating problems Obsessive-compulsive disorder Obsessive-compulsive disorder Suicidal tendency Fatal outcomes Fatal outcomes Maternal mortality		
Chronic pelvic pain O Headaches O Permanent disabilities O Asthma O Irritable bowel syndrome O Self-injurious behaviors(smoking, unprotected sex) Pear O Anxiety O Fear O Anxiety O Low self-esteem O Sexual dysfunction O Eating problems O Obsessive-compulsive disorder O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		· · · · · · · · · · · · · · · · · · ·
Permanent disabilities Asthma Asthma Asthma Self-injurious behaviors(smoking, unprotected sex) Permanent disabilities Asthma Depression Fear Anxiety Low self-esteem Sexual dysfunction Eating problems Obsessive-compulsive disorder Obsessive-compulsive disorder Post-traumatic stress disorder Suicidal tendency Fatal outcomes Fatal outcomes Maternal mortality		
Self-injurious behaviors(smoking, unprotected sex) Nental health outcomes Self-injurious behaviors(smoking, unprotected sex)		 Headaches
Self-injurious behaviors(smoking, unprotected sex) Self-injurious behaviors(smoking, unprotected sex) Depression Fear Anxiety Low self-esteem Sexual dysfunction Eating problems Obsessive-compulsive disorder Eating problems Obsessive-compulsive disorder		 Permanent disabilities
o Self-injurious behaviors(smoking, unprotected sex) Pepression Fear Anxiety Low self-esteem Mental health outcomes O Sexual dysfunction Eating problems O Obsessive-compulsive disorder O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes Fatal outcomes Suicide O Homicide O Maternal mortality		
Depression Fear Anxiety Mental health outcomes OSexual dysfunction Eating problems Obsessive-compulsive disorder OBOST-traumatic stress disorder OSuicidal tendency Fatal outcomes Suicide OHomicide OMaternal mortality		 Irritable bowel syndrome
Mental health outcomes O Eating problems O Sexual dysfunction Eating problems O Obsessive-compulsive disorder O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		 Self-injurious behaviors(smoking, unprotected sex)
Mental health outcomes O Anxiety Low self-esteem Sexual dysfunction Eating problems O Obsessive-compulsive disorder O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		 Depression
Mental health outcomes O Sexual dysfunction Obsessive-compulsive disorder O Dost-traumatic stress disorder O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		o Fear
Mental health outcomes O Sexual dysfunction Obsessive-compulsive disorder O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		 Anxiety
outcomes O Sexual dysfunction O Eating problems O Obsessive-compulsive disorder O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		o Low self-esteem
Obsessive-compulsive disorder Obsess		
O Post-traumatic stress disorder O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		
O Suicidal tendency Fatal outcomes O Suicide O Homicide O Maternal mortality		 Obsessive-compulsive disorder
Fatal outcomes Suicide Homicide Maternal mortality		 Post-traumatic stress disorder
SuicideHomicideMaternal mortality		 Suicidal tendency
HomicideMaternal mortality		
 Maternal mortality 		o Suicide
		 Homicide
o HIV/AIDS		
		o HIV/AIDS

Impact on Children:

It has been evident through different studies that the children also can not escape from the malicious impacts of domestic violence against women (Ackerson, 2009; Jejeebhoy, 2010; and Sabarwal, 2011). Children, who have witnessed domestic violence exhibit health and behavior problems, including problems with their weight, their eating and their sleep. They may have difficulty at school and find it hard to develop close and positive friendships. They may try to run away or even display suicidal tendencies. Some researchers have found a relationship between domestic violence against women and chronic malnutrition. For example, Sabarwal (2011) conducted a study on domestic violence and childhood immunization in India, using cross-sectional data from the Indian National Family and Health Survey-3 (2005–06). Accounting for child's gender, child's birth order, mother's age, mother's education, mother's occupation, husband's education, urban/rural status, types of family, religion, caste and wealth index, their findings

indicated that children from families that face partner violence were at an increased risk of low immunization. Sabarwal (2011) also suggested that underlying factors thought to explain associations between domestic violence and child health include the destructive effects of domestic violence on the and child health include the destructive effects of domestic violence on the quality of parenting and childcare because of increased rates of depression and traumatic stress among abused mothers. In another study the association between domestic violence against women and anemia and underweight of their children was documented (Ackerson, 2009). The experience of marital violence clearly limit women empowerment and undermines their ability to make decisions for themselves and their children including the choice and quality of food provided and dietary intake (Jejeebhoy, 2010). It is the low self-efficacy that leads to poor child care (e.g. incomplete vaccination, poor nutritional choices and feeding practices as well as the low emotional attachment) that result in poor health outcomes for the child attachment) that result in poor health outcomes for the child.

Domestic violence against women in Bangladesh

According to a study (Bhuiya, 2003), approximately fifty percent (50.5%) of the women were reported to be battered by their husbands and 2.1% by other family members in rural Bangladesh. Beating by the husband was negatively related with age of husband. Members of micro-credit societies also had higher odds of being beaten than non-members.

In a study conducted by icddr,b (Naved, Azim, Bhuiya & Persson, 2006) showed that 60% of women reported ever being physically or sexually abused during their lives. In those cases, the most common perpetrators were their husbands. This study also showed that two-thirds of the abused women never shared their experience and almost none accessed formal services for support. support.

Several evidences are depicted in the baseline report on violence against women in Bangladesh titled as 'Facilitating the fulfillment of state obligations towards women's equality' prepared by Naripokkho and Bangladesh Mahila Parishad. General evidences suggested that the frequency of different forms of violence against women was in an increasing trend from 1990 to 2001. Among those violence dowries induced violence took place at a higher rate than others. It was also found that about 60% of violence against women takes place within their own homes.

In a recent survey in the capital city of Dhaka city, 60% of the eight hundred and thirty five randomly selected women interviewed reported lifetime experiences of physical violence at the hands of their husbands (Naved et al. 2006). Respondents also reported 13% sexual abuse and 67% verbal abuse by their husbands.

In another Rapid Assessment Study (Siddique, 2011) twenty three percent of respondents said that they were regularly slapped by their husband

and 35% women said their husbands at some point in their lives had beaten them up. 14% women said that their husbands regularly beat them. 20% women said that they have been thrown on the floor and then kicked by their husbands. 74% of the respondents reported they suffered physical violence on a regular basis. 4% of women have said that their husbands have threatened them with knife. 13% of women have said that their husbands have tightened their hands around their throats. Nearly 5% of women say that their husbands have tried to burn them at some point. 21% of women said that during sexual relations their husbands purposely tried to hurt them.

Schuler et al. found that 47% of women of lower socioeconomic

status in six villages in three districts of Bangladesh reported ever having experienced physical domestic violence (Schuler, 1998). In 2001, 42% of women in a rural area reported being physically assaulted by their husbands at some point in the past; 16% reported this over the previous year (Garcia-Moreno, 2005).

Almost one-fifth (19%) of rural and urban Bangladeshi women who experienced physical violence within the past year reported that the violence was severe, including having been hit with a fist, dragged, kicked, or threatened with a weapon (Naved & Persson, 2005). Eighty-nine percent of urban women and 86% of rural women who had ever experienced physical violence reported that the physical violence occurred more than once or many times (Garcia-Moreno, 2005), indicating that these acts of violence are not isolated, but part of a pattern of continuing abuse.

Surveillance data suggest that nearly 10% of deaths of women of reproductive age in Matlab from 1982 to 1998 were directly attributable to

violence from husbands and in-laws (Ahmed, 2004).

Though physical violence is well-documented in Bangladesh, a very few studies have documented sexual violence. The WHO study of 2001 found that 37% of women in the urban study site and 50% of women in the rural study site reported having been sexually violated by their husbands at some point in the past, and 20% of urban and 24% of rural Bangladeshi women reported having been sexually violated by their husbands in the previous year (Garcia-Moreno, 2005).

Physical and sexual violence are more readily quantifiable than

emotional abuse. However, results of qualitative research demonstrated that emotionally-abusive acts might be more devastating than physically abusive acts. The issue of emotional abuse is complex, and data are scarce. In Bangladesh, 44% of urban women and 31% of rural women in 2001 reported ever having experienced emotional abuse in their lifetime whereas 29% of urban women and 20% of rural women reported experiencing emotional abuse in the past year (Garcia-Moreno, 2005). In this study, the emotional abuse was defined as any sort of psychological battering including insults, humiliation, intimidation, or threats.

humiliation, intimidation, or threats.

According to Bangladesh Urban Health Survey (2006), there were high levels of acceptance with various justifications among both men and women for violence. About 48, 32 and 30 percent, respectively, of women in the slums of the city corporations, non-slum areas of city corporations and district municipalities agreed with at least one reason for wife beating. In case of men, it was 39, 24 and 24 percent respectively. About 62% of women from slums reported ever being physically assaulted and the same proportion (62%) of men in slums reported of physically abusing their wives ever. In non-slum areas of the city corporations it was 42% for women and 45% for men correspondingly. In case of district municipalities it was 45% and 49% respectively for women and men. About 23, 16 and 17 percent, respectively, of women in slums, non-slum areas and district municipalities reported forced sex by their husband. In case of domestic violence against wives within the last year the percentages of women who reported were 34.4, 19.3 and 17 percent respectively in slums, non-slum areas and district municipalities.

Occurrence of domestic violence varies little in terms of urban-rural divide. An icddr,b study (Naved et al. 2006) shows that among ever-married women, 40% of those in the urban area and 42% in the rural area reported physical violence by their husband. However, sexual violence by husband is more prevalent in rural areas (50%) than urban areas (37%), according to the study.

A study by CARE Bangladesh, conducted on 483 such women victims from January to June in 2010 in 24 villages of Dinajpur, Tangail and Sunamganj shows that domestic violence costs 2.05 percent loss of Bangladesh's Gross Domestic Product (GDP) worth around tk. 15 crore annually (Siddique, 2011). This amount is equal to the sum spent by the government in the health and nutrition sector in those areas (Siddique, 2011).

Most domestic violence involves male anger directed against their suggestions.

Most domestic violence involves male anger directed against their women partners. Cross-cultural studies of wife abuse have found that nearly a fifth of the peasants and small-scale societies are essentially free of family violence. The existence of such cultures proves that male violence against women is not the inevitable result of male biology or sexuality, but more a matter of how society views masculinity.

matter of how society views masculinity.

The WHO Multi-country Study on Women's Health and Domestic Violence against Women (Garcia-Moreno, 2005) showed that less than 1% of physically abused women reported the matter. It is a matter of concern that a culture of acceptance, even, has grown and is being transmitted from generation to generation to the point of being institutionalized.

A study of BNWLA (Bangladesh National Women Lawyers' Association, 2011) showed that 30 percent of women think that husbands have the "right" to inflict physical violence upon their wives.

According to the report of 'Ain o Salish Kendro' (a Human Right Organization of Bangladesh) from the January 2014 to the June 2014, only 133 cases were filed of 235 incidents reported to them (Ain o Shalish Kendro, 2014). The reported number of women tortured by husband is 14, tortured by husband is 142. tortured by husband's family member is 6, murdered by husband is 112, murdered by husband's family member is 41, murdered by own relatives is 8 and suicide is 54. These numbers suggest that the most of the events of domestic violence remain unnoticed and unreported. In this modern era of civilization still this atrocious act is considered as a customary norms in many areas of Bangladesh.

Therefore, domestic violence against women should be a major concern in Bangladesh. Here most of the abused women experience violence at the hands of an intimate partner. We often focus on grave social and health impact of domestic violence as it creates social instability, insecurity and gender disparity. But the economic impact is also immense, which remains unseen most of the time.

Legal aspects of domestic violence against women in Bangladesh

Though domestic violence is not specifically mentioned in the 1979
CEDAW, General Recommendation 19 states that violence against women is a form of discrimination that inhibits a woman's ability to enjoy rights and freedom on a basis of equality with men (CEDAW, 1979). It asks the governments to take this into consideration when reviewing their laws and policies. As a state party of CEDAW, thus, Bangladesh has the legal obligation to comply with the provisions contained in the convention. Though motivational programs with a view to enhance social awareness in matters relating to women's human rights have been in action, there were no matters relating to women's human rights have been in action, there were no special laws on domestic violence against women. In connection with that there have been calls for a full-fledged legal enactment from the non-governmental organizations and civil societies to safeguard the rights of women from the adverse effects of domestic violence. Women rights groups specifically criticized the government for its inaction on the issue, which was widespread and increased during last year. In October, 2010 subsequently parliament passed the Domestic Violence (Protection and Prevention) Bill that came into force in December of the same year which criminalized domestic violence. This Act is to provide as a signatory state of the United Nations Convention on the Elimination of All Forms of Discrimination against Women, 1979 and the Convention on the Children's Right, 1989 and to establish equal rights for women and children guaranteed in the

Constitution of the People's Republic of Bangladesh prevention of domestic violence, protection of women and children from domestic violence and for matters connected therewith or incidental thereto.

In the introductory chapter of the act there is short title and short definitions of different terminology. Chapter two describes domestic violence comprising physical, emotional and economic components. It is noteworthy that the sexual abuse by intimate partner was not included in this section. Chapter three explains the duties and responsibilities of police officers, enforcement officers and service providers. Chapter four is about the rights of victims and remedies. Chapter five includes disposal of application, trial, appeal etc. Chapter six elaborates the offences and punishments. The last chapter is titled as miscellaneous.

Any woman or child who is or has been at risk of being subjected to domestic violence or any victim who is or has been a family relationship with the respondent or any person representing an handicapped adult who is or has been subjected to domestic violence can seek protection under this act. They can file a complaint against any adult person who has been in a family relationship with the victim or relatives of the husband or intimate male partner including his male and female relatives. After receiving the complaint the enforcement officers or the service providers shall inform the victim about all the available services. Then the first class magistrate will grant an interim protection order or any other order under this act. The Court may pass a decree of compensation ascertainment of victim's injury or damage or loss as a result of domestic violence. The court may also pass at any stage of proceedings for a protection order or for any other relief under this Act, a temporary custody of children of the victim will grant to the victim or the applicant. Breach of protection order is considered as a punishable offence though cognizable and bail able. First contravention may lead to impri occurrence.

But the bills or acts are not sufficient alone. Its effectiveness depends upon the community involvement, community participation, logistic support, improvement of awareness, development of knowledge about existing laws

etc. Moreover the general perception about domestic violence has to be changed. The government should take initiatives along with the non-government organizations to raise awareness and clarify the perception about the women rights and domestic violence against women. The present law should be implemented strongly in order to have a healthier and happier society.

Conclusion

Although there are a number of existing laws in Bangladesh to combat the heinous issue of domestic violence against women, it has long been widely criticized that the laws protecting women are not being implemented properly due to insufficient and ineffectual mechanisms and this has a close connection with the persistence and increase in violence against women in Bangladesh. To give a recent example, as discussed above the Domestic Violence (Protection and Prevention) Act, 2010 was enacted an October 12, 2010 circuits at preventing demostic violence and protecting against women in Bangladesh. To give a recent example, as discussed above the Domestic Violence (Protection and Prevention) Act, 2010 was enacted on October 12, 2010 aiming at preventing domestic violence and protecting women and children from it by enabling any victim to lodge complaint with a judicial or metropolitan magistrate seeking protection from such violence. The law came into effect in Bangladesh from December 30, 2010. But studies suggest that no substantial implementation of the Act has taken place. The rules have not been laid down and the government also has not yet appointed an enforcement officer for every upazila (sub-district), police station, district, and metropolitan area as specified in the said Act. As a result, the victims of domestic violence are being denied of the proper benefits of the law. Effective implementation of the Act could prevent the incidents of domestic violence. Delays in court proceedings, influential power of the accused, and corruption in the law enforcement agencies are impediments to the elimination of crime and violence against women. It is often alleged that the police do not to cooperate with victims, rather favor the accused. Many complaints are dismissed without justice.

Domestic violence against women in Bangladesh is a health, legal, economic, educational, developmental and human rights problem. Therefore multifarious strategies should be designed for implementation of the existing law of the country regarding the domestic violence against women. Moreover awareness needs to be raised among people to make the laws socially acceptable and to encourage victims to register their complaints.

The key areas of intervention can be either direct intervention or indirect intervention. The direct interventions may include advocacy, increase and the contract of law enforcement local reference.

indirect intervention. The direct interventions may include advocacy, improvement of the present condition of law enforcement, legal reforms, making new laws relevant to the current situation, i.e. legal reform, direct service provision to the victims etc., whereas the indirect interventions may comprise awareness raising through advertisements, mass media campaigns

with the help of posters, pamphlets, leaflets, newspapers, radio, television, billboards, plays etc., mass education programs for building a culture of non-violence, training of the community people, resource development for advocacy and law enforcing agency, community mobilization, monitoring interventions, data collection for the research procedures, building up the community knowledge about the existing laws, awareness development programs to eliminate inequity and inequality from the society etc. These strides should include the local community, civil society, the state machinery, national and international non-government organizations.

Beside the aforementioned strategies, the present mindset and attitude

Beside the aforementioned strategies, the present mindset and attitude of the male members of the society have to be reformed. The reason behind this inevitability is that they often try to dominate the women in the family and think themselves superior to them. This masculine psychology has been prevailing from eras to eras. But this is high time to change this medieval mentality. Because in a nation like Bangladesh where almost half of the population are women, the prosperity can never be warranted until the negligence and disregard towards the female members of the society is not abated along with extermination of this clandestine darkness of domestic violence. Therefore the government as well as the non-government organizations (NGOs) should work together to make the society more peaceful, serene and placid without any incidence of domestic violence where women can lead their life upholding their own identity with utmost dignity.

References:

Ackerson, L. K. and S. V. Subramanian (2009). Intimate partner violence and death among infants and children in India. *Pediatrics* 124(5): e878e889.

Ahmed, T., Ahmed, A. M. S. (2009). Reducing the burden of malnutrition in Bangladesh. *BMJ* 2009: 339.

Ain o Shalish Kendro. (2014). Half Yearly report. Dhaka, Bangladesh. Bangladesh Demographic and Health Survey. (2011). National Institute of Population Research and Training. Bangladesh.
Bangladesh National Women Lawyers' Association. (2011). Annual report.

Dhaka, Bangladesh.

Bangladesh Urban Health Survey. (2006). National Institute of Population Research and Training. Bangladesh

Bhuiya, A., Sharmin, T., Hanifi, S.M.A. (2003). Nature of domestic violence against women in a rural area of Bangladesh: implication for preventive interventions. J Health Popul Nutr, 21(1), 48-54.

Campbell, J. C. (2002). Health consequences of intimate partner violence. . *The Lancet*, *359*(9314), 1331-1336. Centre for Policy Dialogue. (2009). Report on domestic violence. Dhaka, Bangladesh.

Dobash, R.E., Dobash, R.P. (1979). Violence against wives: a case against the patriarchy. *New York: Free Press*, 1979, 339.

Domestic Violence (Prevention and Protection) Rules, 2013. (May, 2013). Dhaka, Bangladesh: Ministry of Women and Child Affairs, Government of People's Republic of Bangladesh.

Elsaidi, M. H. (2011). Human Rights and Islamic Law: A Legal Analysis Challenging the Husband's Authority to Punish" Rebellious" Wives". *Muslim World Journal of Human Rights*, 7(2).

Garcia-Moreno, C., Janson, H. A. F. M., Ellsberg. M., Heise, L., Watts, C. (2005). WHO multi- country study on women's health and domestic violence against women: Initial results on prevalence, health outcomes and women's responses. World Health Organization. Geneva, Switzerland.

Goode, W.J. (1971). Force and violence in the family. *J Marriage Fam*, 33,624-36.

ICDDR,B. (2011). An overview of malnutrition in Bangladesh. *Health and Science Bulletin.* 9(1).

Jejeebhoy, S.J., Santhya, K.G., et al. (2010). Health and social consequences of marital violence: a synthesis of evidence from India. New Delhi, Population Council and UNFPA.

Johnson, M. P. (2006). Conflict and control gender symmetry and asymmetry in domestic violence. *Violence against women*, *12*(11), 1003-1018.

Johnston, H. B., Naved, R. T. (2008). Spousal violence in Bangladesh: a call for a public-health response *Journal of health, population, and nutrition,* 26(3), 366.

Khatun, M. T., Rahman, K. F. (2012). Domestic violence against women in Bangladesh: Analysis from a socio-legal perspective. *Bangladesh e-Journal of Sociology* 9(2), 19-29.

National Domestic Violence Hotline. (2013). from US Department of Health and Human Services (HHS). Report on domestic violence.

Naved, R. T., Azim, S., Bhuiyan, A., Persson, L. A. (2006). Women's health and domestic violence against women in Bangladesh. *Health and Science Bulletin*, 4(2):1-6

Naved, R. T., L.A. Persson (2005). Factors Associated with Spousal Physical Violence against Women in Bangladesh *Studies in Family Planning*, 36(4): 289-300., 36(4), 289-300.

Rapp, D., Zoch, B., Khan, M. M., Pollman, T.,Kramer, A. (2012). Association between gap in spousal education and domestic violence in India and Bangladesh. *BMC Public Health*, *21(12)*, 467. Doi: 10.1186/1471-2458-12-467.

Sabarwal, S., M. C. McCormick, et al. (2011). Association between maternal intimate partner violence victimization and childhood immunization in India. *Journal of Tropical Pediatrics*, 2011, 110-113

Schuler, S. R., S.M. Hashemi, S.H. Badal. (1998). Man's Violence against Women in Bangladesh: Undermined or Exacerbated by Microcredit Programmes? *Development in Practice*, 8(2), 148-157.

Shipway, L. (2004). *Domestic violence: a handbook for health professionals*: Psychology Press.

Siddique, K. (2011). Domestic violence against women: cost to the nation. Dhaka, Bangladesh: CARE Bangladesh.

UNICEF. (2009) Tracking progress on child and maternal nutrition: a survival and development priority. New York. USA.

United Nations. (1979). Convention on the Elimination of All Forms of Discrimination against Women. New York. USA.

United Nations. (1993) Declaration on the elimination of violence against women. Paper presented at the United Nations General Assembly, New York.

World Health Organization. (2005). WHO Multi-country Study on Women's Health and Domestic Violence against Women. Department of Gender and Women's Health, WHO.

World Bank. (1993). World Development Report 1993: Investing in Health, Oxford University Press, New York.

Yllö, K. A. (2005). Through a Feminist Lens: Gender, Diversity, and Violence: Extending the Feminist Framework. In R. J. G. Donileen R.

Loseke, Mary M. Cavanaugh (Ed.), Current Controversies on Family Violence. London: Sage.