

# **Domestic Violence against Women in Bangladesh: A Review of the Literature and the Gaps to fill-in by Future Interventions**

**Anisur Rahman Khan**

National Institute of Development Administration, Thailand

## **Introduction**

Although domestic violence against women is pervasive worldwide, there is no universally accepted definition or terminology. Unfortunately, domestic violence is a complicated and difficult issue to study and the research findings are inconsistent. There is no truly objective way to think about the issue because values, beliefs, and emotions affect how we see it or if we see it at all (Levy, 2008). For example: although women may feel that violence used against them is painful or wrong, they may not necessarily define it as a crime. On the other hand, many women do not define forced sex by the husband or intimate partner as rape (WHO, 1997). Consequently, the definitions of domestic violence or violence against women also differ in line with various perspectives and orientations, such as, the various theoretical, political, and policy responses of human rights and developmental organisations (Pickup, William & Sweetman, 2001), as well as the various local, national and time-specific perspectives shaping and influencing the definition. In addition, an act that is not treated as violence in one situation or time may be treated as violence in another situation or time (Hearn, 1998).

The general concept of “domestic violence” includes many different categories and meanings, such as: “intimate partner violence”, “domestic abuse”, “domestic assault”, “battering”, “partner abuse”, “marital strife”, “marital dispute”, “wife beating”, “marital discord”, “women abuse”, “dysfunctional relationship”, “intimate fighting”, “mate beating” (McCue, 2008), “spouse abuse”, “wife abuse” and “wife assault” (Ellesberg, 1997; Mears, 2003), “conjugal violence”, “marital violence”, “family violence” (Hearn, 1998), ‘gender violence’ (Harne & Radford, 2008), “partner aggression”, and “intimate terrorism” (Aldarondo & Castro-Fernandez, 2011). Domestic violence is defined as a subset of violence perpetrated by intimate partners (Kishor & Johnson, 2004). Specifically, it refers to the acts that are perpetrated by intimate

partners or other family members, resulting in, great cost on the physical, sexual, psychological and economic wellbeing of women and girls (UNICEF, 2000). UNIFEM (2009) defines domestic violence as a form of violence against women that is perpetrated by intimate partners and family members.

Domestic violence often occurs in private spaces and is often tacitly condoned by society as a private or family matter. Though some feminists are critical of the use of the term domestic, spousal and family violence as they hide the gendered nature of the problem (Dobash & Dobash, 1992), the term domestic violence is widely used in many parts of the world as violence by a man against a woman (Romito, 2008). The concept of domestic violence is often considered gender specific because it is most commonly experienced by women and perpetrated by men and that any type of woman can experience domestic violence regardless of race, ethnicity, religion, class, disability or lifestyle. Most importantly, domestic violence is repetitive, life-threatening, and destructive to the lives of women and children (Women's Aid, 2009).

The term "domestic" refers to the family home where such violence is perpetrated against women. Violence against women in the home is especially dangerous because while the home is said to be the safest palace for men, the home can be the least safe place for women (Edwards, 1989). Violence against women in their home is a unique phenomenon in the world of violence and only in a prison or similar institution would an individual be likely to encounter such persistent abuse or violence (Dobash & Dobash, 1992).

Domestic violence against women is a serious problem in Bangladesh. Although the term "domestic violence" is now being replaced by the term "intimate partner violence" (WHO, 2005a) in the global literature, this article shall use the term "domestic violence" since some features of the concept of intimate partnerships or relationships, such as the idea of civil partnerships - living together without marriage, are not culturally accepted, socially practiced or religiously permitted in the context of Bangladesh. Although the idea of intimate partners may or may not be legally married, domestic violence is present in both marital and cohabiting relationship (Hattery, 2009). Intimate partner violence usually includes a range of sexually, psychologically and physically coercive acts used against adult and adolescent women by a current or former intimate partner (UN, 2006). However, the referential meaning of violence against women within intimate relationships as "domestic violence" or "spousal abuse" is now well established (UN, 2006). In fact, the term domestic violence remains the most popular way of talking about men's violence against

their female partners throughout much of the world (Hearn, 1998). In this review of the literature, the author focuses on the marital relationship, i.e., the husbands' violence against their own wife. The term "domestic violence against women", is meant violence that is perpetrated against a woman by her husband.

### **Objectives of the Paper**

1. To review the existing major literature on domestic violence against women in Bangladesh;
2. To identify the major gaps in the existing literature on domestic violence against women.

### **Methodology**

Through a heuristic document search, this study reviews a significant number of major academic articles on domestic violence against women in Bangladesh. The articles are categorised into three broad domains: i) forms, practices and factors of domestic violence, ii) consequences of domestic violence and iii) coping strategies/help-seeking practices. This literature review is intended to identify the major gaps in the existing academic literature in order to design effective interventions for the critical problem of domestic violence in Bangladesh.

### **Domestic Violence against Women in Bangladesh: Mapping the Relevant Literature**

Although the issue of violence against women can be traced back to the 1980s in Bangladesh (Yasmin, 2000), the issue is actually a re-emergence and an outcome of the worldwide women's movement throughout the 1970s (Salam, Alim, and Noguchi, 2006). The re-emergence is in the form of organised protests from women's groups that pressure the government to punish the perpetrators of violence. The organized protests involve both female and male concerned citizens and have contributed to the recognition of the need for action by the government and the public against violence against women (Jahan, 1994). The pressure from women's groups also resulted in the media and local newspapers reportage of violence against women starting the 1980s (Guhathakurta, 2004).

Over the years, some agencies and scholars, based on newspaper reports, court cases, reported incidents to the police, have produced and analysed data and

information on their own ways about various incidents/events of violence against women in Bangladesh. But due to the lack of standard reporting practices, the majority of the studies are contradictory, uneven, selective and, in some cases, overlapping. For example: the BNWLA (2002), as well as, Naripokkho & Bangladesh Mahila Parishad (n.d.) found discrepancies among figures on domestic violence from by different newspapers. Farouk (2005) identified that newspapers have a tendency to cover sexual crimes rather than domestic violence. Of late, Bangladesh Police and Multi-sectoral Programme on Violence against Women (MSPVAW) of Ministry of Women and Children Affairs have started to collect and maintain statistical information about incidents of violence against women. For example: in 2013, Bangladesh Police recorded 19,601 various incidents of violence against women (Bangladesh Police, n.d.). However, based on newspaper reports, MSPVAW collects information only on three categories of violence such as; physical assault, sexual assault and burning. In 2013, MSPVAW reported 4476 various incidents of physical violence (MSPVAW, n.d.). Then again, the main problem with Police statistics is that it does not give segregated information on various types of violence. As such, no specific or concrete statistical information can be obtained about the problem of domestic violence.

Another problem with reporting incidents of domestic violence is that the MSPVAW's database is not self-explanatory. Since the database does not state anything specific about domestic violence, no substantial information can be gathered about the prevalence of domestic violence in Bangladesh. Pickup et al. (2001) notes that globally, there is a problem with accurate reporting of domestic violence because it is too often considered as just a normal part of gender relations and not considered a priority in many countries. Therefore, since the official and media reporting is unreliable, field based empirical research is required in order to have an objective idea about the various aspects of domestic violence in Bangladesh. Only field-based research can capture an objective picture of domestic violence, at least in the geographical areas where the studies are conducted. Unfortunately, it is difficult to conduct field-based research on domestic violence in a country like Bangladesh. Husbands usually do not allow their wives to talk to strangers and, due to the sensitivity of the topic, respondents are often very reluctant to answer questions or answer honestly (Farouk, 2005).

In the next section, a review of the empirical studies will indicate how much research has been undertaken on the topic of domestic violence in Bangladesh, as well as identify the gaps within the existing research.

### **Literature on the Forms, Practices and Factors of Domestic Violence**

One of the early empirical attempts to investigate violence against women was made by Jahan (1994). She interviewed 50 self identified female victims of marital violence around Dhaka city. The researcher combined both qualitative and quantitative approaches in the study. The study identified physical violence as the most prevalent form of violence. The most common forms of physical violence were found as pushing and shoving. Around 56% women reported to have been beaten once within the past year while 20% reported to have been beaten three to five times. The researcher's conclusions noted a sense of desperation, fear and helplessness were more pronounced among the survivors who suffered severe beatings. Disagreements over household matters, provocation of in-laws, different situational factors, husband's sense of superiority, and demand for dowry were identified as some of the major factors of marital violence. In the study, verbal/emotional abuse was also found as a frequent feature of domestic violence.

In Khan, Rob, & Hossain (2000), using both qualitative and quantitative methods, revealed a high prevalence of violence against women by their husbands in two sub-districts of Bangladesh. In the study, women admitted to have been scolded, mentally tortured or physically abused by their husbands. Some of the common forms of violence were identified as scolding 40%, mental torture 24%, slapping 44%, severe beating 19% and forced sex 15%. The study further found five important factors that contribute significantly in triggering violence: not meeting the husband's expectations in managing household works, sexual relationship, poverty, dowry demand and economic dependence of women.

In another study, a comprehensive rural study on marital violence was conducted by Mannan (2002) in two different geographical areas. The study focused on the forms, nature, extent and consequences of domestic violence by using both qualitative and quantitative research methods. The researcher found that women are at their greatest risk at home where 46% of the respondents reported to have been physically abused while 67% women reported to have been psychologically abused by their husbands. The most common factors of domestic violence included: meals not ready on time, meals not well prepared, children not well cared for, house not well managed, instigation of others, economic constraints, dowry demands, husband's second marriage and suspicion. The most common practices of physical violence were identified as slapping, beating, pulling the hair while the most common practices of psychological abuse were identified as excessive controlling, verbal abuse,

curtailing or disrupting routine activities, social relationship and access to money.

Bhuiya, Sharmin, & Hanifi (2003) using quantitative techniques investigated the nature, extent, and correlates of domestic violence in a remote rural area of Bangladesh. In the study of female respondents, it was revealed that 66.8% of the women were verbally abused by their husbands while 50.5% of the women reported to have been physically battered. The women respondents also mentioned 73 reasons for verbal abuse by their husbands, and 53 reasons for their husbands hitting them, and 50 reasons why the women continued to live with violence. The most frequently-mentioned reasons for violence included: questioning the husbands in day-to-day matters (29.1%), followed by failure to perform household work satisfactorily, economic hardship of the family, poor childcare, not conforming to veil or other expected behaviour, and refusal to bring dowry from natal home.

Koenig, Ahmed, Hossain, & Khorshed (2003), a study in two geographically and socio-culturally distinct areas of rural Bangladesh, found that physical abuse by husbands is common for a large segment of the population in both areas. The prevalence of physical violence is higher in the cultural conservative areas, (47%) prevalence compared with the less conservative area (39%). Among the women who reported violence, 9 out of every 10 reported its occurrence as occasional, with the remaining 1 in 10 indicating that it occurred frequently. But the study identified verbal abuse as representing an almost universal event among wives (79%). Fortunately, the study found that increased education, higher socioeconomic status, non-Muslim religion, and extended family residence to be associated with lower risks of violence.

Bates, Schular, Islam, & Islam (2004), a study conducted in 2001-2002, using both quantitative and qualitative approaches, examined the severity of physical domestic violence, socio-economic factors and the processes associated with domestic violence. Out of 1200 women surveyed in six villages, 67% had experienced domestic violence by their husbands while one third of the women reported having experienced major violence such as: kicking, burning or use of a weapon. In addition, the practice of dowry was recognised as a common tool of extraction and exploitation. It was reported that experience of domestic violence was significantly higher among women with a dowry arrangement than women with no arrangements (46% vs 25%).

Using data from a population-based survey of 2702 women of reproductive age followed by in-depth interviews a study conducted by Naved & Persson (2005) during 2000–2001 explored the factors associated with spousal physical violence in urban and rural areas in Bangladesh. It was revealed that dowry or demands in marriage and a history of physical violence against a woman's mother-in-law by her father-in-law were positively associated with domestic violence in both urban and rural areas. One explanation of the latter case is that violence is a learned behaviour. On the other hand, based on the data and findings of the preceding study, Naved & Persson (2010) further confirmed that dowry is an indicator of patriarchal attitude of marital relations and dowry demand predicts the extent, frequency and severity of domestic violence in households. Women are more likely to be physically abused if the dowry demand is not met. About 61% of the rural women and 20% of the urban women in the lowest income quartile reported dowry demand at marriage. Other than dowry, family problems such as: trouble, dispute, or altercation arising between the couple in regard to marital or natal family, disobedience, any fault in carrying out household chores, and financial problems also invite violence by the husbands.

In WHO's (2005b) Multi-country study of 10 countries including Bangladesh, confirms that Bangladeshi women experience the greatest amount of physical and sexual violence by their intimate partners. The life time prevalence of physical and sexual violence was reported as 62% in the rural site and 53% in the capital city. Interestingly, sexual violence was reported more frequent than physical violence in rural sites. Moreover, in all ten countries, including Bangladesh, between 20% and 75% of women experienced various types of emotional acts such as: insult, humiliation and threat. The study further confirmed that the experience of physical and/or sexual violence tends to be accompanied by more controlling behaviour by an intimate partner.

Khan & Aeron (2006), on the other hand, using both quantitative and qualitative techniques in four districts in Bangladesh, attempted to investigate the prevalence, nature and determinants of violence against women and found that 80% women in the survey and 71% women in the in-depth interview reported to have been physically, sexually, emotionally, mentally or sexually abused throughout their marital lives. Physical violence included slapping, hitting, beating, punching, depriving food or clothing; sexual violence included forcing sex physically or through threats and persuasion; while emotional violence included insulting women and their parents, criticising, scolding, and restricting

movement. Refusal of sex, influence of in-laws, failure to meet husband's expectations and poverty are some of determinants of domestic violence.

Sambisa, Angeles, Lance, Naved, & Thornton (2011) explored the prevalence and correlates of physical violence in slum and non-slum urban areas through a population based survey on 9122 currently married women, revealing that the prevalence of self-reported past-year physical spousal violence is 31% higher in slums (35%) than in non-slums (20%). Slapping/arm-twisting and pushing/shaking/throwing something at the women are the most commonly reported acts of physical abuse. The risk of spousal physical abuse is lower among older women, women with post-primary education, and those belonging to rich households.

From a different approach, Schular & Islam (2008), through both quantitative and qualitative approaches in six rural villages, examined the prevalence of physical violence within marriage. In the study, it was found that 67% women "have ever" experienced physical violence. In addition, the researchers found that having no alternative, women have to accept violence condoned by their husbands as an inevitable part of marital life. As a matter of fact, women are vulnerable to domestic violence because they have no options other than marriage and are absolutely dependent upon their husbands in all respects.

Schular, Hashemi, Riley, & Akhter (1996) using ethnography and survey data in six Bangladeshi villages found that falling short of patriarchal roles expectations, demand of dowry, husband's perceived legitimacy over wife are some of the major factors of wife beating. It was found that 47% women "have ever" been beaten by their husbands and younger women are more likely to be beaten by their husbands. The findings suggest that women's participation in credit programmes with NGOs can substantially reduce men's violence against women. But later, in an ethnographic study, Schuler, Hashemi, & Badal (1998) found that participation in credit programmes can both reduce and provoke violence against women in the family. Micro-credit sometimes generates tensions since women break traditional patriarchal norms by participating in economic activities in the public spheres. The explanation given is that men do not usually like to see their wives' with independent income, allowing them to be more mobile and autonomous. The study also reveals that men beat their wives over trivial matters, out of husband's frustrations and in most cases for demands of dowry.



Ahmed (2005) through a cross-sectional survey also examined the relationship between micro-credit and perpetration of domestic violence against women. The study reveals that around 17.5% women suffered from the same type of violence in the preceding four months of the study. The prevalence of violence was greater among women from members of Bangladesh Rural Advancement Committee (BRAC) households than among those from non-members households. He found that compared to non-members, female members face a greater level of violence when they first joined BRAC as micro-credit recipients. The increase in violence is reportedly caused by the fact that men think women are breaking traditional patriarchal norms when participating in micro-credit schemes. The study further revealed that violence subsequently reduced when the micro-credit participants were exposed to awareness building activities, made interaction in public area, developed skills for self-employment through training and had access to information. All these contexts place women in a position to gain power and autonomy and curtail the likelihood of husband's violence. However, the study also identified some common forms of physical domestic violence, including slapping, kicking, beating, and emotional violence, including verbal abuse, threat of violence or second marriage, taking away women's resources, and not allowing women to visit the natal home. Poverty, patriarchy, systematic discrimination and early marriage are some of the predictors of domestic violence.

In a recent survey conducted by Bajracharya & Amin (2013) on 4195 women revealed that microcredit group members reported a significantly higher level of physical domestic violence (28.03 %) than nonmembers (21.48 %). Higher level of violence among members is contributed to selection bias that is largely driven by poorer women selecting into microcredit groups. The study asserts that domestic violence is more likely among people from poor backgrounds, the very same people who are targeted by and select into microcredit programs. That is to say poorer women are already exposed to domestic violence and various context-specific factors such as; gender role, poverty lead to domestic violence. Micro-credit, thus, makes no significant difference in reducing domestic violence.

On the other hand, Rahman, Hoque, & Makinoda (2011) found that women's empowerment does not guarantee reduction in the risk of intimate partner violence (IPV). The findings indicate that along with the increase in the number of decision participated by the wife, the wife experienced an increase in physical and sexual violence from her husband. The cross-sectional investigation of this study on 4181 currently married women confirmed that the

likelihood of all forms of domestic violence increased with increase of number of participation in household decision-making. Consequently, promoting women empowerment in the household without their husband's support may put women at more risk of domestic violence. The research also indicate that nearly 1 in every 4 (24%) married Bangladeshi women experienced both physical and/or sexual violence during the 12 months preceding the survey while 10.5% experienced sexual violence in the absence of physical violence, and 19.4% experienced physical violence in the absence of sexual violence by husbands. Sexual violence was significantly lower in urban (9%) than in rural (11.3%) areas. Among different forms of IPV, the most common act of physical violence was slapping.

Using both the survey and in-depth interviews, Hadi (2005) studied that the prevalence of marital violence such as: mental torture and physical assault by the husbands in 70 villages in 10 districts of Bangladesh. In the study, nearly 28% women were mentally abused and 22% were physically assaulted by their husbands at least once in the last year of the study. Mental torture is defined as the threat to beat, divorce and/or abandon the wife. The physical assault, on the other hand, included the event of beating, pushing, slapping or throwing things at the wife by the husband. Situation that invoked violence against women had most often been the husband's perception that his wife failed to perform her expected role in the household. Using similar techniques, Hadi (2000) had earlier studied the context of marital sexual violence in 70 villages in 10 districts of Bangladesh. The study revealed that 27% women had been sexually abused such as: coerced sex, intercourse during pregnancy and during the neonatal period by their husbands. The probability of a woman being sexually abused by her husband increased if the wife is young, illiterate and hails from a landless, poor family. Notably, both studies conducted by Hadi (2005 & 2000) confirmed that women's productive roles through participation in credit programmes and making financial contributions to their families not only improved women's position in their households but also significantly reduced domestic violence. It is also noteworthy that the findings of Hadi's research contrast with the studies conducted by Rahman et al. (2011) and Bajracharya & Amin (2013) who found women's empowerment through participation in productive activities does not make a significant imprint on reducing domestic violence.

Recently, Naved (2013) explored the magnitude and nature of marital sexual violence and the factors associated with physically forced sex by husbands in urban and rural Bangladesh using a population-based survey data from 2001.

Results of the study showed high prevalence of lifetime sexual violence: 37% in urban and 50% in rural areas. An overwhelming majority of the women reported being sexually abused by husbands more than once. The study further revealed that about 75% of the sexually abused women experienced other forms of violence by husbands as well. For example: 51% urban women and 38% rural women experienced three forms of violence: physical, sexual and emotional. The common factors positively associated with physically forced sex by husbands were: dowry demand, history of physical abuse of husband's mother by his father and controlling behaviour of the husband.

### **Literature on the Consequences of Domestic Violence on Women**

Some studies were conducted with a dominant focus on the consequences of domestic violence on women's mental, sexual, reproductive and physical health. Ahmed, Ginneken, Razzaque, & Alam (2004) surveyed the trends of the types of death women suffered during the period of 1982-1998 in a rural sub-district of Bangladesh. The researchers found that deaths caused due to violence at the domestic level remained the same while deaths caused due to other factors decreased during the study period. In addition, the researchers found that suicides and homicides were often preceded by oppression, physical and mental abuse by husbands and relatives. Half of the suicide deaths (45.7%) were caused due to quarrels and serious tensions with the husbands.

Other studies revealed different associations such as the WHO's (2005b) Multi-country study that revealed a strong association between violence and both physical and mental symptoms of ill-health. Physically and sexually abused women in Bangladesh reported experience with various health related problems as a result of violence such as injury, losing consciousness, emotional distress and suicidal ideation. Moreover, women who reported being abused during pregnancy were more likely to report a miscarriage. In two research venues (rural and urban) in Bangladesh, on average, approximately 11% of the women were beaten during pregnancy and 4% of the women were not only beaten during pregnancy but also kicked and punched in the abdomen. Again, on average, around 18% of the women in both the venues who "have ever" experienced physical and/or sexual violence thought of committing suicide. Abused women were three times more likely to have thought of committing suicide than the non-abused women.

The main purpose of the study conducted by Salam et al. (2006) was to find whether there is an association between spousal violence and the reproductive

health of women by conducting a quantitative study on 496 women in urban slums. The study revealed that spousal sexual violence adversely affects women's health. It caused pelvic pain, reproductive tract infection (RTI), irritable bowel syndrome, injuries and unwanted pregnancy. In this study, about one third (30.4%) of the women were found to be abused physically and/or sexually and about one third (30.9%) of their births in the last 5 years were reported unintended. The study further confirmed that about 50% of the physical injuries were minor while 10% of the injuries were serious.

The above findings are supported by the study by Naved & Akhter (2008) which explored the prevalence of lifetime suicidal ideation among reproductive aged "ever-married" women. By conducting a survey on 2702 women, the study confirmed that life time suicidal ideation among reproductive-aged women in Bangladesh was high (11%–14%) in comparison to other countries in the world, and rural women who were physically and mentally abused by their husbands were four times more likely while urban women were twice as likely to report suicidal ideation, compared with women who were not exposed to such violence.

In Bangladesh, domestic violence not only threatens the health and well-being of women but also has a negative impact on the health and well-being of their young children. For example: Silverman, Decker, Gupta, Kapur, Raj, & Naved (2009) conducted a survey on 1592 younger mothers from both rural and urban areas found that women who experienced IPV were more likely to report acute respiratory tract infection (ARI) and diarrhoea among their young children compared with those who did not experience IPV. Both direct and indirect mechanisms are likely responsible for elevated diarrhoea and ARI risk among children based on maternal experience of IPV. The experience of trauma and anxiety are more common among children who are exposed to violence against a parent, and the exposure to this violence is likely to compromise the immune systems of young children.

In another survey on 2677 women who were currently married and living with their husband, Silverman, Gupta, Decker, Kapur, & Raj (2007) found that three out of four (75.6%) Bangladeshi women experienced violence from husbands. The most common form of domestic violence reported was physical violence in the absence of sexual violence (47.4%) followed by both physical and sexual violence (24.0%). Sexual violence without physical violence was experienced by 4.2% of the married women. The less educated, poorer, and Muslim women were at the greatest risk. In addition, women experiencing violence from

husbands were more likely to report both unwanted pregnancy and a pregnancy loss in the form of miscarriage, induced abortion, or stillbirth. Assessed individually, miscarriage was more likely among victimised women. In the same year, Åsling-Monemi, Tabassum, & Persson. (2007) conducted a survey on 2691 women which revealed that severe spousal violence and controlling behaviour in marriage increased the risks of under-five deaths among daughters of educated mothers in rural Bangladesh. The study suggested a child mortality gender-bias consequence of partner violence.

Unwanted pregnancy is a serious public health concern for women. Of late, using a cross-sectional investigation on 4181 currently married women, Rahman, Sasagawa, Fuji, Tomizawa, & Makinoda (2012) found that 64% of the women who were sexually abused by their husbands were more likely to have an unintended pregnancy than those who did not suffer IPV. The study suggests that women were more likely to experience unintentional pregnancy as a result of sexual violence. Again, women who had experienced severe physical IPV were 60% more likely to classify their pregnancy as unintended. The prevalence of unintended pregnancy among married women who experienced severe physical violence was 1.60 times higher than those who reported no abuse.

### **Literature on Women's Coping Strategies or Help-seeking Practices**

Only a very few studies have focused exclusively on various aspects related to women's help-seeking behaviours or coping strategies in the event of domestic violence. Some studies focused this issue as part of other objectives. For example: one of the objectives of WHO's (2005b) Multi-country study was to document and compare the strategies and services that women use to deal with violence by an intimate partner. The study noted that two-thirds (66%) of women who had been physically abused by their partner in Bangladesh had not told anybody about the violence prior to the interview. In effect, the study identified Bangladesh as one of the lowest self-reporting countries in terms of reporting to different agencies and service providers about incidents of domestic violence. Only 12% of women reported the incident of severe physical violence to at least one agency. The most common reason for not seeking help was either the women considered violence as normal or that they feared consequences such as; further violence, losing their children, or bringing shame to their family. Some women felt they would not be believed or that it would not help.

In another study, Bhuiya et al. (2003), examining the family and/or community centred approach to alleviate domestic violence, found that women seek some

help from family and neighbours rather than formal justice system. For example: in 23.9% of the cases family members directly took a mediating role by requesting the husband not abuse his wife verbally or physically. The study also found that women try to cope with the violent situation because of the children (32.1%), followed by having no place to go (12.7%) and social stigma (12.2%).

Naved, Azim, Bhuiya, & Persson (2006), in their population-based survey of 2702 women and in-depth interviews conducted in both rural and urban area, confirmed that women keep silent about their abuse due to fear of further assault, uncertainty of their own and children's future, stigma and belief of men's right to be violent as well as other reasons. In their study, two-fifths of women reported to have been physically abused by their husbands but 66% of them never told anyone of their abuse. This study found a higher prevalence of physical violence and a higher percentage of silence. Only 2% of women ever sought institutional help, doing so only when the violence was life-threatening.

Schular, Bates, & Islam (2008), using both qualitative in-depth interviews and small group discussion during the period from 2001 to 2004 in three rural areas, found abused women rarely seek recourse in the event of domestic violence. The majority of the women confirmed they had few options for preventing or stopping domestic violence. Interestingly, when they sought recourse they had very little success. In fact, having no alternative, women have to accept violence condoned by their husbands as an inevitable part of their marital life. In addition, the study further explored that poverty, gender inequality, patriarchal attitude discourage abused women from seeking recourse. The study found that women even avoided *salish*, a community-level dispute resolution mechanism traditionally dominated by men and elites, because women often do not like to make family matters public and the decisions made in *salish* are often biased towards men.

Sayeem & Khan (2012) made an attempt through a qualitative inquiry in a rural area to explore women's strategic responses to physical violence perpetrated by an intimate partner and found that the majority of the women can "most often" anticipate potential violence and the usual strategic measure adopted by women is abstaining from the household, especially using the no-talk strategy with their intimate partners. In some cases, women leave the scene or try to divert attention of the husbands. But when physical abuse is harsh, women go to their parental home but come back after some time. The other strategies of abstinence include not talking to other family members, not talking to children, abstaining

from food preparation, and abstaining from food intake, ranging from a few hours to a few days but women were found less likely to seek help from others. Women who sought help from others mostly turned to family members and neighbours; and no one sought formal social or legal support.

Recently, Sayem, Begum, & Moneesha (2015), in a quantitative study conducted among 308 married women in five selected slum areas of Dhaka city, examined women's attitudes towards informal and formal social and formal legal support-seeking strategies against intimate partner violence (IPV). Multivariate analyses revealed that women's attitudes significantly varied by women's age, women's working status, experience of violence, receipt of micro-credit, women's decision-making authority, husband's age, husband's education, family economic status and family type. Amongst the participants, 72.4% were in favour of seeking advice from social services about ways to improve her behaviour toward husband, 68.8% were in favour of asking social services to persuade the husband to seek therapy and 71.1% were in favour of going to a battered women's shelter. Interestingly, a greater percentage of women wanted to change their own behaviour in order to change their husbands' violent behaviour. Findings of the study further revealed that working women were more likely to seek help from both formal and informal agents compared to that of non-working women.

### **Conclusion: In Search of the Gaps**

As shown above, almost all the major empirical works on domestic violence so far conducted in Bangladesh have been thoroughly reviewed. The review suggests that domestic violence is a subtle multifaceted problem in contemporary Bangladesh and it inflicts trauma on women from a number of perspectives. Various scholars have captured many important dimensions of this problem in their respective research. Obviously, because of their scholarly efforts we now have some concrete information about many aspects of this problem. However, many issues of domestic violence against women are yet to be explored. Future researchers should put efforts into unearthing the important unexplored areas of domestic violence. Upon reviewing the literature on domestic violence in Bangladesh, several gaps in the existing studies of domestic violence are identified. The prior researches have a number of limitations regarding the choice of research methodology, research scope, methods of analyses, and of course, policy preferences.

Firstly, the empirical studies on domestic violence against women in Bangladesh have limitations in that most of the studies have been conducted using quantitative research approach such as in Ahmed (2005), Sayeem et al. (2015), Johnson & Das (2009), Åsling-Monemi et al. (2007), Ahmed et al. (2004), Bhuiya et al. (2003), WHO (2005b), Sambisa et al.(2011), Rahman et al.(2011), Bajracharya & Amin (2013), Naved (2013), Salam et al.(2006), Naved & Akhter (2008), Silverman et al. (2009), Silverman et al. (2007), Koeing et al. (2003) and Rahman et al. (2012). Although some studies have used both qualitative and quantitative approaches such as in Jahan (1994), Mannan (2002), Khan et al. (2000), Bates et al. (2004), Hadi (2000 & 2005), Naved & Persson (2005), Khan & Aeron (2006), Schuler et al. (1996), Naved et al. (2006) and Schular & Islam (2008), under closer inspection, the purpose of qualitative approach was simply to support the quantitative approach. Although the scholars' use of the quantitative or mixed methods approach in their studies is fully appreciated, it is evident that these studies are unable to grasp an inclusive picture of the subjective experiences of women on one of their most sensitive personal experiences. Arguably, quantitative measures may permit researchers to define the acts that contribute to the understanding of the types of violence, but may not accurately represent the experiences of the participants (Gondolf & Beeman, 2003). Although quantitative research has been proved to be useful for understanding the magnitude and some of the main features of wife abuse, including its effects on women's health and well-being, it usually fails to contribute much to the understanding of how women themselves experience violence (Ellesberg, 1997). Moreover, accurately quantifying domestic violence is often difficult and does not provide sufficient rigor since it is inextricably linked with socio-cultural contexts, norms, beliefs and practices (Shaikh, 2013). It is only women's subjective experience that can better describe women's own experiences of domestic violence living in a particular socio-cultural context. Understanding the experiences of domestic violence from women's subjective point of view may also greatly help in the development need-based intervention modalities (Varnda, 2013) and contribute to the long-term goal of preventing and ameliorating the effects of violence against women (Cromwell & Burges, 1996). Thus, future researchers must deliberately fill-in such an important methodological gap in the existing literature.

Secondly, in Bangladesh, only a very few attempts have so far been made to explicitly use qualitative approach in studying domestic violence. Schuler et al. (1998) used such approach specifically to explore the prevalence of wife-beating in the event of women's use of micro-credit and Schuler et al. (2006)



and Sayeem & Khan (2012) used the approach in order to explore women's help-seeking practices. However, even if these two studies adequately explored the topics, they leave a huge dearth of literature which excavates women's subjective experiences of domestic violence. Consequently, it can be surmised that the exploration of women's subjective experiences of domestic violence are needed in the current context of Bangladesh.

Thirdly, upon reviewing the existing literature in Bangladesh, it is found that no attempt has been directed towards providing a comprehensive overview in a single survey on how women experience the different forms of domestic violence (physical, sexual, economic, emotional & psychological), the various practices, antecedent causes and consequences of domestic violence. Evidence suggests that the existing studies have covered various forms and practices of domestic violence and their antecedent causes in a quite disperse & uneven manner. For example: some studies focused exclusively on physical violence and its antecedent causes such as Schular et al. (1996); Schular et al. (1998), Bates et al. (2003); Naved & Perrson (2005), Naved et al. (2006), Ahmed (2005), Schular & Islam (2008) and Bajracharya & Amin (2013). A few studies concentrated on only two forms of violence such as Jahan (1994), Bhuyia et al. (2003), and Koeing et al. (2003) which studied physical and psychological/verbal abuse or in Sambisa et al. (2011), Rahman et al. (2011) and Rahman et al. (2012) which examined physical and sexual violence. Hadi (2005), on the other hand, examined physical and mental/emotional torture. However, studies conducted by Jahan (1994), Mannan (2002), WHO (2005b), Khan & Aeron (2006) & Khan et al. (2000) studied physical, sexual and psychological and/or emotional forms of violence while Naved (2013) and Hadi et al. (2000) exclusively examined the magnitude of within marriage sexual violence. Finally, Naved (2013) examined the prevalence of both physical and emotional violence within marriage.

It is true that all forms of violence might not be experienced by all women within the same scale or intensity but it is only the prolonged in-depth interview of the research participants which can explore the women's experiences of the different forms of domestic violence. Moreover, all the forms of domestic violence are inextricably interlinked and interwoven. For example: if a woman refuses sex with her husband, she might be physically battered, emotionally or psychologically tortured, not given money for household expenses or her income might be taken away by her husband. Unfortunately, the existing studies have failed to exhume the important dynamics underlying the problem. Furthermore, it is noteworthy that no attempt as yet has been made to

specifically explore women's experiences of economic violence. Economic violence has already been recognised as a specific form of violence within the major international documents. For example: the In-depth Study Report (UN 2006) has already recognised this type of domestic violence. The major policy intervention of the Government of Bangladesh, the Domestic Violence (Prevention & Protection) Act 2010, has specified the various practices of economic violence. In the current context of Bangladesh, this particular form of domestic violence must be studied in order to have a substantial understanding of its nature and extent.

Some studies in Bangladesh have examined psychological or emotional abuse interchangeably. These studies used some practices of psychological violence that are more appropriate for the category of emotional violence or vice versa. In these circumstances, readers might get confused on the distinction between psychological and emotional violence. For example: Khan & Aeron (2006) included insulting women and their parents, criticising, scolding and restricting movement as emotional violence whereas Mannan (2002) included excessive controlling, verbal abuse or scolding, curtailing or disrupting routine activities, social relationship and access to money as psychological abuse. Surely, some of these practices mentioned above are overlapping. Therefore, what is needed is a clear demarcation between these two forms of violence. Many international documents have made vivid distinctions between them.

A qualitative study would also give women the opportunity to talk about their own experiences regarding the factors and consequences of domestic violence, resulting in a more distinctive picture of the problem. Since qualitative studies in Bangladesh are very limited, factors and consequences of domestic violence arrived through quantitative approach in the existing literature appear to be very mechanistic and straightforward. If the factors or consequences identified by these studies are examined critically, it would be evident that the factors and consequences are almost similar across studies. But we must understand that the social world of each woman is different, so each woman's experience of domestic violence must be different from other women experiencing the violence. Unfortunately, the positivist approach is unable to internalise this important dynamic of the social world. Unfortunately, the studies which aimed at exploring the consequences or impacts of domestic violence such as Ahmed et al.(2004), WHO (2005b), Silverman et al. (2009), Naved & Akhter (2008), Salam et al. (2006), Åsling-Monemi, et al. (2007), Silverman et al. (2007) and Rahman et al. (2012) used exclusive quantitative tools and techniques. These studies also provide straightforward or linear understanding of the

consequences. But it must be recognised that the social world is very complicated and even more complicated for abused women. Without digging into that complexity we only produce a partial picture of the social world. It is suggested that research will need to become much more nuanced and comprehensive to capture the complexity of domestic violence and to help draw the blueprints for its elimination (Perillia, Lippy, Rosales, & Serrata, 2011).

Fourthly, this research confirms a big lacuna in the existing literature in respect to victims' coping strategies or patterns of help-seeking in Bangladesh. Although Bhuiya et al. (2003), Naved et al. (2006), WHO (2005b), Schular et al. (2008), Sayeem & Khan (2012), and Sayeem et al. (2015) studied the issue either as part of other research objectives or solely to explore survivors' responses to domestic violence, none of the studies portrayed a comprehensive picture covering all forms of domestic violence as well as the types of strategies women adopt to cope with each form of domestic violence. For example: Bhuiya et al. (2003), Naved et al. (2006) and Sayeem & Khan (2012) studied only women's patterns of responses in the event of physical violence. Schular et al. (2008) & WHO (2005b) examined patterns of responses as a whole without considering their interface with a particular form of domestic violence. Correspondingly, Sayeem et al. (2013) examined women's attitude towards formal and informal support seeking strategies but did not mention anything about the strategy that women take on in response to a particular form of domestic violence. A woman might cope differently to different forms of violence and those strategies must be captured systematically. Then again, there is no evidence of women's experiences both at home or outside when they seek formal or informal support. Moreover, studies conducted by Naved et al. (2006), Bhuiya et al. (2003), Sayeem et al. (2013) and WHO (2005b) are fundamentally based on quantitative approach, as such, cannot go deeper into the issues related to women's coping or help seeking practices. Therefore, in order to grasp a comprehensive subjective understanding of the women's coping strategies and help-seeking practices in response to all the different forms (physical, sexual, emotional, psychological and economic) of violence as well as their experiences in both formal and informal help-seeking strategies, the need for conducting further study is an obvious demand. Without a comprehensive study on domestic violence in Bangladesh, no substantial policy design or intervention is possible.

Fifthly, it is arguable that the nature of domestic violence and the victims' coping strategies/help-seeking practices has a robust interface with the perceptions and experiences of local communities. This is an area which is

largely ignored by the researchers in Bangladesh. In this connection, Ellesberg & Heise (2005) state that if a research is to help plan a policy intervention, it may be more constructive to use available resources to understand community attitudes toward violence and the responses and experiences of various institutional actors. Three key literature on women's help-seeking/coping strategies in Bangladesh, Naved et al. (2006), Schular et.al. (2008) and Sayeem & Khan (2012), mentioned to whom women usually seek formal or informal supports. These studies found other than family members or friends women sometimes seek help from immediate social networks but very rarely form institutional support mechanisms. For example: Naved et al. (2006) mentioned that in rural areas the sense of community is very strong and a greater proportion of women seek help from the community. Therefore, apart from the views and experiences of survivors of domestic violence, the perceptions and experiences of the local community is of paramount importance to understand the nature of the problem. It can further provide important judgements about the effectiveness of the existing policy intervention at the local level. In this regard, Perilla et al. (2011) stated that research that exclude or at least significantly reduce participation of the community means creating knowledge about domestic violence that only pertains to certain groups. Therefore, inclusion of the community in future research has some valuable implications.

Finally, no academic study (except an institutional monitoring report prepared by Bangladesh Woman Lawyers Association in 2013) has ever been made to assess how the existing specific policy intervention of Bangladesh, the Domestic Violence (Prevention & Protection) Act 2010, is being implemented at the local level, and in particular, the experiences of frontline implementers in implementing the policy. In the this section, a critical look into the implementation of the Domestic Violence (Prevention & Protection) Act 2010 from the local level is imperative. Over the years, the problem of domestic violence has not only increased but taken newer and more morbid forms and shapes in Bangladesh. It has, thus become urgent to investigate the policy protection available to women experiencing domestic violence and the effectiveness of the policy so that policy makers are able to make systematic judgements about the existing policy intervention.

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## Summary

### **Domestic Violence against Women in Bangladesh: A Review of the Literature and the Gaps to fill-in by Future Interventions**

**Anisur Rahman Khan**

National Institute of Development Administration, Thailand

Although Bangladesh maintains inadequate records of the various forms of violence against women, it is clear that domestic violence against women is the most insidious problem for women in Bangladesh. For many Bangladeshi women, home is a place of pain and humiliation and violence is an integral part of everyday life. Domestic violence against women, perpetrated by their husbands, is a multi-faceted problem in Bangladesh. The efforts of the scholars to empirically investigate the problem are inadequate and a lot of issues are yet to be explored. This review is an attempt to present the findings of the major empirical research that has so far been conducted in Bangladesh. It broadly categorises the prior research into three major areas, which include: i) forms, practices and factors of domestic violence; ii) consequences of domestic violence; and iii) help-seeking and coping strategies. In addition, the review explores some of the major gaps in the existing literature. It is hoped that future research will address the gaps and make a significant contribution in expanding the research on domestic violence in Bangladesh.

**Key words:** Bangladesh, Domestic violence against women, literature review, research gaps