



A LITERATURE REVIEW REGARDING DOMESTIC VIOLENCE AMONG WOMEN OF DIVERSE SOCIO-ECONOMIC BACKGROUND

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ABSTRACT

The SNEHA (Society for Nutrition, Education and Health Action) programme on Prevention of Violence against Women and Children began in 2000 and now includes ten counselling centres across Mumbai, linked with community mobilisation, health services, police, and legal support. The programme history follows global developments. The emphasis of the first wave of interventions, driven largely by feminist activism, was support for survivors of violence, reduction in secondary perpetration, strengthening legal recourse, and advocacy. This led to the consolidation of services such as women's shelters, counselling, legal advice, and laws such as India's Protection of Women from Domestic Violence Act (PWDVA) 2005. The second wave of interventions, led by groups such as SNEHA, emphasises primary prevention and community activism and takes a public health position: population-based, interdisciplinary, and intersectoral. In the present review study we have utilized the available resources in collected data related to domestic violence among women in various aspects and made a prospective approach in understanding and extracting the maximum reported outcomes of the research studies carried out among women. 5 studies on each topic have been collected, assessed and reviewed in the present article for better understanding.

Keywords: Domestic Violence, Women, Review Study, Literature Review, Protecting Rural/Urban Women from Violence.

INTRODUCTION

The SNEHA (Society for Nutrition, Education and Health Action) programme on Prevention of Violence against Women and Children began in 2000 and now includes ten counselling centres across Mumbai, linked with community mobilisation, health services, police, and legal support. The programme history follows global developments. The emphasis of the first wave of interventions, driven largely by feminist activism, was support for survivors of violence, reduction in secondary perpetration, strengthening legal recourse, and advocacy. This led to the consolidation of services such as women's shelters, counselling, legal advice, and laws such as

India's Protection of Women from Domestic Violence Act (PWDVA) 2005. The second wave of interventions, led by groups such as SNEHA, emphasises primary prevention and community activism and takes a public health position: population-based, interdisciplinary, and intersectoral [1].

Various intervention studies in countries such as the USA, Australia, Hong Kong and Peru have provided substantial evidence by evaluating the interventions on the role of healthcare providers (HCPs) in responding to pregnant women either reporting or at risk of DV. The interventions which have been implemented and



evaluated include screening pregnant women for violence in the antenatal clinic (ANC) setting, referral to the services, safety planning, cognitive behavioural therapy, home visits by nurses, and offering empowerment counselling. Studies using empowerment counselling as an intervention showed a significant reduction in violence, improved health status, and increased use of safety measures by women [2].

The public health impact of marital violence is well documented, with robust multicounty analyses and meta-analyses document associations between marital violence and poor health outcomes at a global scale a concern all the more problematic given that those with lower access to health services are at a greater risk for violence and its health consequences. Injury is an important consequence of marital violence that may go untreated in contexts with poor health care access (e.g., rural areas), as well as due to impediments placed by husbands. National data indicate that among those reporting physical and/or sexual violence in the past 12 months, 26 per cent of urban women and 39 per cent of rural women have been injured by marital violence. More than one in 20 of these women report very severe injury such as deep wounds, broken bones, broken teeth or other serious injuries [3]. During the COVID-19, increasing rates of domestic violence are beginning to surface around the world. Notably, domestic violence has tripled during the stay-at-home order issued by the country. The universal trend of reports on the increasing domestic violence cases is likely to continue throughout the pandemic and may only represent a “tip of the iceberg” as many victims still find themselves trapped with the perpetrator and unable to report the abuse [4, 5]. Although the lockdowns and movement restrictions imposed by countries around the world are slowing down the infection rate of Covid-19, data suggests that “domestic abuse is acting as an opportunistic infection, flourishing in the conditions created by the pandemic.” Research suggests that social isolation is one of the most prominent tactics used by abusers to distance victims from their support networks. Now that physical isolation is a government-sanctioned approach; it is seen that cases of domestic violence have increased significantly [6, 7]. With more countries undergoing lockdown to reduce the spread of COVID-19, the danger of another public health crisis, domestic violence, is becoming apparent. Countries have responded by starting online support, web counselling, WhatsApp helpline, telephonic counselling services, etc. to help the victim of such violence. It seems to be a timely and good preventive step that may lead to adverse health and mental health outcomes, including a higher risk of anxiety, stress, depression, post-traumatic stress disorder and risky sexual behaviour such as sexually transmitted infections, HIV, unplanned

pregnancies and substance use behaviours. The World Health Organization, United Nations, American Psychological Association and other agencies have speculated that the pandemic may increase domestic violence, asked governments to ‘put women’s safety first as they respond to the pandemic’ and suggested resources that can help [8].

REVIEW REPORTS:

- ❖ **Bhattacharya, Yasmin, Bhattacharya, Baur, and Madhwan (2020) [9, 10]** conducted an observational cross-sectional study on Domestic violence against women a hidden and deeply rooted health issue in India. A total of 320 ever-married women were included. A census population of convenient sampling technique was used. The data were collected by using predesigned pretested proforma. The results showed that the overall prevalence of any form of violence during life among the study population was 35.63%. Verbal/psychological violence was the most common form of domestic violence (91.23%) followed by physical (82.46%) and sexual violence (64.91%). The study concluded that to develop appropriate and culturally relevant public health interventions to increase awareness.
- ❖ **Zheng et al. (2020) [11]** conducted a cross-sectional survey study on the prevalence of domestic violence and its association with family factors among pregnant women in urban communities of Hengyang City, China. A total of 813 women were included. A multi-stage cluster random sampling technique was used. The data were collected by using an Abuse Assessment Screen Questionnaire. The results showed that 127 (15.62%) participants were identified as victims of DV. The study concluded that women in late pregnancy were at higher risk of DV in the family with tensions, medium household debt, and family dysfunction, which may help medical personnel, intervene in cases of domestic violence against pregnant women in a reasonable and timely manner.
- ❖ **Ghosh and Mog (2020) [12]** conducted a National Family Health Survey-IV 2015-2016 study on the Prevalence and regional disparity of women’s autonomy and intimate partner violence in India. A total of 62,716 currently married women were included. A systematic random sampling technique was used. The data were collected by using a Computer Assisted Personal Interviewing technique questionnaire. The results showed that 69% of the currently married women live with any autonomy, whereas, 27%, 12%, and 7% of them suffer from



physical, emotional, and sexual violence respectively. The study concluded that government needs to give more attention to gain progress in every development field and enhance rural education for rural women particularly.

- ❖ **Kyvuhbjn Daruwalla, Kanougiya, Gupta, Gram, and Osrin (2020) [13]** conducted a Cross-sectional survey study on the Prevalence of domestic violence against women in informal settlements in Mumbai, India. A total of 5122 women aged 18–49 years were included. A cluster sampling technique was used. The data were collected by using a structured questionnaire. The results showed that 644 (13%) women had experienced physical domestic violence, 188 (4%) sexual violence, and 963 (19%) emotional violence. Of all married women, 13% had experienced physical or sexual intimate partner violence in the last year. Most physical (87%) and sexual violence (99%) were done by partners. 1816 women (35%) had experienced at least one instance of coercive control and 33% said that they were afraid of people in their home. 10% reported domestic neglect of their food, sleep, health, or children's health. The study concluded that the need to include the spectrum of perpetrators and forms of domestic violence, particularly emotional violence and coercive control in data gathering.
- ❖ **Ram et al. (2019) [14]** conducted a community-based cross-sectional Study on Domestic Violence and its Determinants among 15–49-Year-Old Women in a Rural Block in South India. A total of 120 women were included. A simple random sampling technique was used. The data were collected by using an interviewer-based semi-structured questionnaire. The results showed that the prevalence of all forms of domestic violence among women was 77.5%, and forty percent of women were classified as having ever been subjected to severe domestic violence. Prevalence of physical violence was 65.8%, sexual abuse was 17.5%, and emotional abuse was 54.2%. The study concluded that tacit implications on socioeconomic well-being, physical and mental health of a woman, her family, and thereby, society as a whole.

Literature Review Related To Assess The Degree Of Domestic Violence Among Women Of Diverse Socio-Economic Background

- ❖ **Tiruye et al. (2020) [15]** conducted a retrospective study on the Determinants of intimate partner violence against women in Ethiopia. A total of 3,897

married women were included. A two-stage stratified cluster sampling technique was used. The data were collected by using a pretested semi-structured open-ended questionnaire. The results showed that 34.1% experiencing IPV a composite measure of physical, sexual, and emotional abuse. The study concluded that although individual-level factors were significant determinants of IPV, higher-level factors, including female education and IPV acceptance in the community, were also important influences on this major public health issue in Ethiopia.

- ❖ **Sanz-Barbero, Baron, Vives-Cases (2019) [16]** conducted an observational Study on Prevalence, associated factors, and health impact of intimate partner violence against women in different life stages in Spain. A total of 8,935 ever-partnered women were included. A convenient sampling technique was used. The data were collected by using Poisson regression models. The results showed that Unemployment increases the probability of IPV in adult women physical/sexual-IPV, PR: 1.7; psychological-IPV, PR: 1.3. Being an immigrant increases the likelihood of physical/sexual IPV in adult women PR women: 1.91. Women exposed to current physical/sexual IPV have a greater likelihood of reporting poor self-perceived health PR young people: 2.59; PR adults: 1.68; PR elderly: 1.28. For psychological IPV only, there is an increase in the probability of poor self-perceived health, PR adults: 1.37; PR elderly: 1.19. The study concluded that the need to link gender violence prevention with the social circumstances of the population across different life stages.
- ❖ **Raj (2019)** conducted a review study on the Public health impact of marital violence against women in India. The study reported that there are promising efforts and important advancements in India that could be built on for more effective prevention and support for women. Men and boys should be engaged in gender-transformative interventions with male role models to alter men's attitudes of acceptability of and justification for marital violence and consequently their actual abusive behaviours. The study concluded that the pervasiveness of attitudes accepting husbands' marital violence against women, and the fact that these have remained largely unchanged in India for a decade, large-scale community and social change efforts are needed.
- ❖ **Ahmadi Z et al. (2018)** conducted a descriptive-analytical study on the Surveying the Degree of Domestic Violence against Women and Its Effective



Factors in Married Women in Sabzevar. A total of 360 married women were included. A cluster sampling method technique was used. The data were collected by using a pretested semi-structured questionnaire. The results showed that the average rate of violence against women was reported by 85.40 ± 39.55 . Social factors ($\beta = 0.072$), family factors ($\beta = 0.075$), and related factors of couples ($\beta = 0.640$) which explained 39% of total variance of violence. Violence rate against women includes legal violence (19%); verbal violence (18%) and emotional violence (15%) were the most significant type of violence in the community. The study concluded that the degree of violence in the investigated society was significant and reducing unemployment and economic problems, and also the government can help reduce the risk of violence between couples.

- ❖ **Rahnavardi (2017)** conducted a cross-sectional study on Investigating Types and Causes of Domestic Violence against Women and Identifying Strategies to Deal with It from the Perspective of Victims in Iran. A total of 110 women were included. A convenience sampling technique was used. The data were collected by using a pretested semi-structured questionnaire. The results showed that the average age of the participants was 33.94 ± 6.92 years and the most prevalent type of domestic violence was psychological violence (44.13%), including shouting and swearing as the most common forms (61.8%). From the perspective of women victims of domestic violence, the main causes of domestic violence were economic problems (47.3%) and drug/alcohol abuse (43.6%). A majority of the examined women (68.09%) believed that logical talk is a good strategy to reduce domestic violence. The study concluded that considering the high rate of domestic violence against Iranian women, preventive measures must be included in mental health policies and resources must be dedicated to reducing the rate of violence against women. It is also important to identify the causes of violence and strategies to deal with it.

Literature Review Related To Assess The Quality Of Life Of Domestic Violence Among Women Of Diverse Economi Background

- ❖ **Naghizadeh, Mirghafourvand, and Mohammadirad (2021) [17]** conducted a cross-sectional study on Domestic violence and its relationship with quality of life in pregnant women during the outbreak of COVID-19 disease in Tabriz city. A total of 250 pregnant women were included. A Simple random sampling technique was used. The

data were collected by using a three-part questionnaire consisting of the socio-demographic and obstetrics information, the domestic violence questionnaire developed by WHO, and the SF-12 quality of life questionnaire. The results showed that the mean score of the physical health department of quality of life in the group of women exposed to violence (50.21) was lower compared to the unexposed group (53.45), the mean score of the mental health department of quality of life in women exposed to violence (46.27) was significantly lower compared to unexposed women (61.17) ($P < 0.001$). The study concluded that the importance of screening pregnant women in terms of domestic violence in respective centres as well as the necessity of conducting proper interventions to address domestic violence to improve the quality of life in women.

- ❖ **Hisasue, Kruse, Raitanen, Paavilainen, and Rissanen (2020) [18]** conducted a population-based study on Quality of life, psychological distress, and violence among women in close relationships in Finland. A total of 22,398 women were included. A convenient sampling method was used. The data were collected by using the EUROHIS-QOL 8-item index. The results showed that the prevalence of exposure to violence in any type of close relationship during the past year was 7.6%. Strong associations were found between combinations of violence and both quality of life (coefficient -0.51 , $p < 0.001$) and mental health (odds ratio 4.16, 95% confidence interval 3.44–5.03). Compared with women who had been exposed to violence by a stranger, women who had been exposed to violence by someone in a close relationship had significantly lower quality-of-life scores ($p < 0.001$). The study concluded that preventive policies in primary care settings aimed at screening and educating young people should be considered as an early form of intervention to reduce the negative mental health consequences of violence.
- ❖ **Roa, Dalaqua, Filizola, Cordeiro (2020)** conducted a descriptive study on Quality of life and risk of femicide in women victims of intimate partner violence in Campinas. A total of 78 women were included. A convenient sampling method was used. The data were collected by using the Danger assessment Scale and WHOQOL-BREF. The results showed that the domain most affected in the assessment of the quality of life was the environment (average 42% /100%) and psychological domain (42%/100%). The study concluded that the service, in general, receives very vulnerable women with a low perception of their quality of life, precarious material



conditions, and a high risk of femicide.

- ❖ **Le, Morley, Hill, Bui, and Dunne (2020)** conducted a case study on the evolution of domestic violence prevention and control in Vietnam from 2003 to 2018. A total of 63 policy documents, 36 key informant interviews, and 4 focus group discussions were conducted. The study reported that major themes that emerged in the analysis include policy content, policymaking, and implementation processes, the nature of actors' involvement, contexts, and mechanisms for policy implementation. The study concluded that the policy is revised to emphasise a rights-based approach.
- ❖ **Alsaker, Moen, Morken, and Baste (2018)** conducted a cross-sectional study on Intimate partner violence associated with low quality of life in Norway. A total of 1500 women were included. A random sampling method was used. The data were collected by using intimate partner violence and health-related quality of life. The results showed that the experience of psychological and physical violence was significantly different between the groups ($p < 0.0001$). The domains in SF-12 were significantly below ($p < 0.001$) the norm for the female population in Norway in all dimensions among the abused women in the random population sample, and even lower among the women seeking help because of IPV. The study concluded that Intimate partner violence is associated with low quality of life.
- ❖ **Carvalho et al. (2019)** conducted a qualitative study on coping strategies for domestic violence: Testimony of women involved with drugs in Brazil. A total of 19 women were included. The data were collected by using Discourse of the Collective Subject. The results showed that given the context of domestic violence and drug use, women confront their partners; they try to have a conversation; they seek family and institutional support and take responsibility and blame for the aggression suffered. The study concluded that the strategies listed may support actions to prevent and cope with the phenomenon, especially from the intersectoral articulation.
- ❖ **Mahapatro and Singh (2019)** conducted a prospective intervention study on Coping strategies of women survivors of domestic violence residing with an abusive partner after registered a complaint with the family counselling centre at Alwar, India. A total of 299 married women were included. The data were collected by using SRQ-20, Spouse Abuse Questionnaire, and a Semi-Structured Interview Schedule. The results showed that there is a differential impact of DV, psychological distress, and coping strategy based on contextual factors; women having an informal support system have a better result in coping, and intervention at the formal system resulted in improving coping strategy and simultaneously reducing psychological distress. The study concluded that the mediation period is interminable and traumatic, the institutional support to women survivors of DV is an important policy alternative for improving survivors' well-being, especially in an unsupportive informal context.
- ❖ **Koolae, Bagherian, and Masoumeh Rahmatizadeh (2018) [20]** conducted a descriptive and cross-sectional research study on Stress and Coping Strategies in Women with and Without Intimate-Partner Violence Experiences in Iran. A total of 70 women with IPV and 70 women without IPV were included. A convenience sampling method was used. The data were collected by using the Ways of Coping Questionnaire and Perceived Stress Scale. The results showed that a significant difference between coping strategies used by the two groups; women with IPV employed more emotional-focused coping strategies compared to women without IPV ($P < 0.001$). Moreover, vulnerability to stress in women without IPV was less than the women with IPV experiences ($P < 0.001$). The study concluded that

Literature Review Related To Assess The Self- Esteem And Coping Strategies Regarding Domestic Violence Among Women Of Diverse Socio-Economic Background

- ❖ **Putten and Nur-E-Jannat (2020) [19]** conducted a case study design study on Coping with domestic violence: women's voices in Bangladesh. A total of 25 recently married women were included. Purposively sampled by snowballing were used. The data were collected by using a semi-structured questionnaire. The results showed that women adopt a range of responses to domestic violence. Two key aspects of coping surfaced in the narratives are emotion-driven and problem-driven approaches to abusive situations reported such as domestic violence and taboo; somatization; structural gender inequalities; male perpetrators; family dynamics and the intersections of these issues and contexts. The study concluded that is salience amidst an abusive environment, whereas passive ways of copying led to a life in distress.



the coping strategy skills of women experiencing IPV be enhanced and their marital conflicts be resolved.

- ❖ **Itimi, Dienye, and Gbeneol (2014)** conducted a cross-sectional design on Intimate Partner Violence and Associated Coping Strategies among Women in a Primary Care Clinic in Port Harcourt, Nigeria. A total of 384 participants were included. A random sampling method was used. The data were collected by using the Brief COPE Inventory). The results showed that 161 (41.9%) were physically abused. IPV was significantly common among women ≤40years of age, married couples (78.5%), and unemployed and Christians. It was precipitated by an argument with the husband (19.25%) and financial demands (44.10%). The employed coping strategy with the highest score was religion. The least score was found in substance abuse. The study concluded that routine screening is advocated by family physicians to elicit abuse to avoid the more devastating psychological consequences after the incidence to institute appropriate treatment as multiple episodes of abuse appear to be cumulative in effect.

LITERATURE REVIEW RELATED TO ASSESS IMPACT OF COVID – 19 CRISIS ON DOMESTIC VIOLENCE AMONG WOMEN OF DIVERSE SOCIO-ECONOMIC BACKGROUND

- ❖ **Krishnakumar and Verma (2021)** conducted a Routine Activity Approach study on Understanding Domestic Violence in India during COVID-19. The data were collected by using components of a motivated offender, suitable target, and absence of capable guardian. The study reported that sources of motivation in domestic violence perpetrators during the lockdown were alcohol and unemployment. The symbolic value that perpetrators associated with women, lower inertia, visibility, and accessibility to the perpetrators made women suitable targets of domestic violence. Lastly, the shortage of police force and travel restrictions on formal and informal sources resulted in the absence of capable guardians. The study concluded that changes in the routine activities of people during the COVID19 lockdown provided more opportunities for the perpetrators of domestic violence.
- ❖ **Sharma and Bikash Borah (2020)** conducted a review study on Covid-19 and Domestic Violence: An Indirect Path to Social and Economic Crisis. The study reported that Countries across the world are battling Covid-19 by enacting measures to reduce the speed of transmission. Layoffs, loss of income, extended domestic stays, and exposure to habits due to stay-at-home orders are driving up the incidence of domestic violence. Moreover, these domestic violence increases are driving economic and social crises due to the form and severity of the violence, the burden placed on government, a crisis of resources, and decreases in the productivity of workforces. The study concluded that the Domestic violence increase resulting from Covid-19 is an indirect driver of economic and social crisis.
- ❖ **Kumar (2020)** conducted a review study on COVID-19 and Domestic Violence A Possible Public Health Crisis. The study reported that the concerns raised by these agencies, interventions introduced, and their future implications. It also argues that apart from reported cases of domestic violence and its negative consequences on individuals and families, it would be interesting to study the positive impact of living together as this pandemic is different from other emergencies. The study concluded that need for further research to understand the reason and dynamics of such violence considering men and women both are engaged in such violence against each other and bear its consequences together.
- ❖ **Singha and Bhattacharyya (2020)** conducted a review study on Domestic Violence against Women in India during Lockdown. The study reported that the primary reasons for increased instances of DV are unemployment and frustration due to restricted access to and or availability of alcohol after a lengthy ban. Nonetheless, inadequate evidence poses a current challenge to link DV and lockdown. The Domestic Violence Act has failed to reduce DV cases not only during lockdown but also during pre-and post-lockdown in India. The study concluded that a comprehensive nationwide study, utilising the data available by government organizations that record DV complaints.
- ❖ **Krishnan, Hassan, Satyanarayana, and Chandra (2020)** conducted a review study on Domestic Violence during the COVID-19 Pandemic: Lessons to be learned. The study reported that The UN Women has reported increased rates of violence against women and children during the COVID-19 pandemic. Women have reported difficulty in help-seeking, while professionals have reported difficulties in assessment, service delivery, and in linking women to appropriate services. This article explores the possible mechanisms behind DV during COVID-19, its manifestations, difficulties in



providing help during this pandemic, and recommendations for health professionals and mental health service providers. It also discusses the challenges in data gathering and research and provides recommendations for various stakeholders to address DV in future pandemics.

Literature Review Related To Evaluate The Effectiveness Structured Teaching Program On Quality Of Life, Self-Esteem And Coping Strategies Regarding Domestic Violence Women Of Diverse Socio-Economic Background

- ❖ **Chadambuka (2020)** conducted an exploratory study on Coping Strategies Adopted by Women Who Experienced Intimate Partner Violence in the Context of Social Norms in Rural Areas in Zimbabwe. A total of 25 women were included. A purposive sampling technique was used. The study reported that social norms influenced participants' covert coping behaviour, which includes acceptance of abuse and prayer. There is a need to strengthen the existing coping strategies that are utilized by women as these could be the starting point for intervention efforts. This is important as it enables practitioners to develop context-specific and context-driven intervention strategies that will effectively serve the victims in their distinctive situations.
- ❖ **Sapkota, Baird, Saito, and Anderson (2019)** conducted a systematic review study on Interventions for reducing and/or controlling domestic violence among pregnant women in low- and middle-income countries. A total of only five studies (two randomized trials and three non- randomized trials) were included. The results showed that the interventions consisting of supportive counselling demonstrated a reduction in DV and an improvement in the use of safety behaviours. One study has embedded the DV intervention into an existing program on the human immunodeficiency virus. The study concluded that participatory involvement of the stakeholders is recommended to refine the current Interventions to support its further development for practice.
- ❖ **Daruwalla (2019)** conducted a SNEHA-TARA pragmatic cluster randomised controlled trial study on Community interventions to prevent violence against women and girls in informal settlements in Mumbai. The study reported that Systematic reviews of interventions to prevent violence against women and girls suggest that community mobilisation is a promising population-based intervention. Already implemented in other areas, our

intervention has been developed over 16 years of programmatic experience and 2 years of formative research. Backed by public engagement and advocacy, our vision is of a replicable community-led intervention to address the public health burden of violence against women and girls.

- ❖ **Arora, Deosthali, and Rege (2019)** conducted a Pre-experimental study with a pre-test post-test design on the Effectiveness of a counselling intervention implemented in antenatal setting for pregnant women facing domestic violence in Mumbai, India. A total of 2778 pregnant women were included. A Simple random sampling technique was used. The data were collected by using the Woman Abuse Screening Tool, Hurt Insult Threat Scream, and Abuse Assessment Screen. The results showed that in all, 60–65% of women reported cognitive changes such as recognizing the impact of violence and the need to speak out against it. In all, 50.7% of women took action at the individual level to address domestic violence during pregnancy. 35.9% adopted at least one safety measure, and 84% of the women reported better health status post- intervention. The study concluded that Routine inquiry and counselling for domestic violence during pregnancy are effective in improving women's ability to cope, safety, and health.
- ❖ **Chhabra (2018)** conducted a review Study on the Effects of Societal/Domestic Violence on the Health of Women. A total of 144 study participants were included. The results showed that between 1-20% of women have been victims of DV during pregnancy too. Besides DV/SV, mental, financial violence also continues as decisions about financial spending, health care is made by men. Physical violence may cause a fracture, other injuries abdominal, on private parts, or a pregnant uterus. Many psychological consequences, suicides have been reported. The cost of violence in terms of health care is tremendous. The study concluded that for prevention, the awakening of society, tackling inequalities, empowerment, integration of post violence care into reproductive health services are needed.

CONCLUSION:

From the retrospective review carried on we understood that there are a large number of reports proving there is domestic violence among married women, especially married women with low income group and under-educated families. This can be overcome only by providing good living facilities for the lower middle class people and by teaching the men and women understand on domestic violence and its hardship.



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