

ORIGINAL ARTICLE**WOMEN UNDER DURESS: A CROSS-SECTIONAL STUDY ON VIOLENCE AGAINST WOMEN IN DISTRICT DEHRADUN****Vidisha Vallabh¹, Ashok K Srivastava², Ruchi Juyal², Jayanti Semwal³****Author's Affiliations:** ¹Resident, ²Professor, ³Professor & Head, Department of Community Medicine, Himalayan Institute of Medical Sciences, Dehradun, Uttarakhand**Correspondence:** Dr Ashok K. Srivastava Email: drsrivastavaak@gmail.com**ABSTRACT**

Introduction: Violence against women is a significant public health problem, as well as a fundamental violation of women's human rights. It is one of the most common forms of violence globally and includes physical, sexual, emotional and economic violence.

Aims and Objectives: 1.To study the prevalence of Violence against Women (VAW) amongst ever-married women of reproductive age group in district Dehradun.2. To study their awareness regarding protection from such violence.

Methodology: The community-based, cross-sectional study was conducted using multistage random sampling method, amongst 880 ever married women aged 15-49 years, in the rural & urban areas of district Dehradun.

Results: Out of the surveyed sample of 880 women, receiving obscene phone calls was reported by 11.8 %; eve teasing by 9.4 %; being followed home by 5.7% and unsolicited advances by 3.9%. About 1.0% women reported being forced into unsolicited sexual activity by a person other than a spouse. Overall only 19.2% women had any knowledge about protection laws and agencies for victims of VAW.

Conclusion: Nearly 37% women in our study reported suffering from any harassing activity ever in life, it was disheartening to see that only one-fifth had knowledge regarding protection laws. Primary prevention in this scenario becomes very important to disjoin VAW from cultural acceptance.

Keywords: Violence against women, harassment, eve teasing, gender-based violence, perception of safety

INTRODUCTION

Violence against Women (VAW) is defined as "violence that is directed against a woman because she is a woman or violence that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty".¹ It is a contemptible fact that around the world at least one woman in every three has been beaten, coerced into sex, or otherwise abused in her lifetime.²

Ensconcing women to their rightful position requires a deep insight into the dynamics of gender-based oppression and violence but unfortunately, most studies conducted on GBV are set in nations in high-income group. The dearth of studies in middle and low-income group poses an obstacle in ascertaining the problem statement for the world as well as individual nations. In India, only a few community-based micro level studies are available. There is also very limited empirical evidence of its various determinants, outcome, and their relationships.³

AIMS AND OBJECTIVES

1. To study the prevalence of Violence against Women (VAW) amongst ever-married women of reproductive age group in district Dehradun.
2. To study their awareness regarding protection from such violence.

METHODOLOGY

A community based, cross sectional study was conducted under the department of Community Medicine, Himalayan Institute of Medical Sciences (HIMS), Dehradun amongst ever married women aged 15-49 years, in the rural & urban areas of district Dehradun from 1st May 2015 to 30th April 2016. The study was approved by Ethical Committee, SRHU. Based on the prevalence of GBV of 33.5 % according to National Family Health Survey-III findings, the sample size calculated by using the follow-

ing formula: $n=4pq/l^2$ [l= relative allowable error (10 % of prevalence)] was 794.⁴ Assuming 10% for non-responses, the sample size was equated to 873. A sample of 880 was equally allocated to rural and urban areas i.e. 440 subjects in each area. Multistage random sampling method was adopted. The rural area of Dehradun district has 6 community development blocks, out of which one block (10%), Doiwala was selected by simple random sampling.

Doiwala block has five Nyay Panchayats out of which 10% i.e. one Nyay Panchayat (Markham Grant) was chosen by simple random sampling. In Markham Grant Nyay Panchayat there are 38 villages, out of which 10% i.e. four villages were selected by simple random sampling. In the urban area out of 4 municipalities 10% i.e. one municipality (Rishikesh) was selected randomly that has a total of 20 wards, out of which 10% wards were randomly selected for the study. Study houses were selected by systematic random sampling. Sampling interval (k) was calculated as - total number of households in rural / urban area divided by sample size. Thus study houses were selected by visiting every “kth” house (rural area-every 4th house; urban area- every 3rd house).

Adult and adolescent ever married females aged 15-49 years who were ready to give written consent for the study and were permanent residents of district Dehradun for past 12 months were included in the study. In every selected household, one ever married female fulfilling the inclusion criteria was interviewed after taking informed written consent. A pre-designed, semi-structured questionnaire [modified version of questionnaire from the United States Agency for International Development (USAID)] was used to carry out the survey.⁵ The participants were interviewed face-to-face in their homes in private space using the pre-tested and pre- designed data collection tool. Confidentiality of participants’ data was maintained at all levels of the study and was strictly anonymised. A database was constituted using SPSS Version 20.0 and MS Excel to store and manage the collected data. Percentages and proportion were calculated for all the variables, while Chi-square test was applied for testing significance of association between two variables. Statistically significant level was assumed at $p < 0.05$.

RESULTS

Table 1 shows the age-wise distribution of respondents in age groups of 15-19, 20-29, 30-39 and 40-49 years. Majority of the women in the study were in their early adulthood i.e. 20-29 years (43.4%). The mean age of the respondents was 32.5 years \pm 7.16 years.

Table 1: Age wise distribution of respondents

Age group in years	Rural (%) (n=440)	Urban (%) (n=440)	Total (n=880)
15-19	1 (0.2)	15 (3.4)	16 (1.8)
20-29	185 (42.0)	197 (44.8)	383 (43.4)
30-39	183 (41.6)	141 (32.0)	324 (36.8)
40-49	71 (16.1)	87 (19.8)	158 (18.0)

Table 2: Bio-social profile of the respondents

Variables	Rural (%) (n=440)	Urban (%) (n=440)	Total (n=880)
Religion			
Hindu	252 (57.3)	425 (96.6)	677 (76.7)
Muslim	82 (18.6)	14 (3.2)	96 (10.9)
Sikh	106 (24.1)	1 (0.2)	107 (12.2)
Family type			
Nuclear	305 (69.3)	300 (68.2)	605 (68.8)
Joint	135 (30.7)	140 (31.8)	275 (31.2)
Socioeconomic class			
I	15 (3.4)	0 (0.0)	15 (1.7)
II	47 (10.7)	74 (16.8)	121 (13.8)
III	91 (20.7)	112 (25.5)	203 (23.1)
IV	145 (33.05)	251 (57.0)	396 (45)
V	142 (32.3)	3 (0.9)	145 (16.5)
Literacy status			
Illiterate	92 (20.9)	108 (24.5)	200 (22.7)
Primary education	64 (14.5)	66 (35.9)	130 (14.8)
Junior high school	85 (19.3)	73 (16.6)	158 (18.0)
High school	92 (20.9)	64 (14.5)	156 (17.7)
Intermediate/ diploma	47 (10.7)	46(10.5)	93 (10.6)
Graduate &above	60 (13.6)	83 (18.9)	143 (16.2)
Occupation			
Housewife	357 (81.1)	381 (86.6)	738 (83.9)
Unskilled worker	31 (7.0)	20 (4.5)	51 (5.8)
Skilled and Semi-skilled worker	26 (5.9)	26 (5.9)	52 (5.9)
Sales/clerical/ Self employed/ business	19 (4.3)	6 (1.4)	25 (2.8)
Semi-professional and above	7 (1.6)	7 (1.6)	14 (1.6)

Table 2 shows the bio-social profile distribution of the surveyed population. **Religion:** Out of the 880 respondents surveyed, around three-fourth (76.9%) were Hindus, followed by Sikhs (12.2%) and Muslims (10.9%). **Family Type:** Most of the surveyed women belonged to nuclear family (Nuclear – 68.8%, Joint 31.2%). **Socio-economic status:** Lower middle class dominated the study population with maximum respondents (45%) followed by the middle class (23.1%) and lower (16.5%). The trend was same in the rural and urban settings. **Literacy Status:** More than three-fourths (77.3%) of the surveyed women were literate with 16.2% women acquiring a degree of graduate and above. Only 22.7% women were illiterate in the surveyed population and this difference was found to be statistically significant ($\chi^2 - 24.485$, $df - 2$, $p - 0.000$). **Occupational status:** Majority of the women (83.9%) were not employed in

the formal or informal sector but restricted themselves to household work. In the case of employed women, the unskilled (5.9%) and skilled workers (5.8%) were nearly equally distributed. Only 2.8% women were engaged in clerical work/business/ self-employment. Even in this era of technology, only 1.6% of women were involved in professional and semi-professional work.

Table 3 shows the perception of safety after dark in various situations by the studied subjects. Half of the women felt unsafe using public transport after dark (53.4%). They also felt their safety was compromised while walking alone (20.1%) after dark or walking past teenage boys/men (21.9%).

Table 4 shows the harassing activities suffered by women in the course of their life. Out of the surveyed sample of 880 women, receiving obscene phone calls was reported by 11.8 %; eve teasing by 9.4 %; being followed home by 5.7% and unsolicited advances by 3.9%. With India being labelled as a very unsafe nation for women, it was very unusual that only 1.0% women reported being forced into unsolicited sexual activity by a person other than a

spouse. Of the 9 women who reported the occurrence of an unsolicited sexual activity, perpetration of crime was 66% (6 cases) by relatives, 24% (2 cases) by neighbours and 12% (1 case) by a stranger. Women belonging to rural areas were more forthcoming in acknowledging suffering from harassing activities than women of urban setting.

Table 5 depicts the distribution of interviewed women according to their awareness regarding protection agencies against such violence. Only 19.2% of studied women had any knowledge about protection laws and agencies for victims of VAW. It was more amongst the urban women (21.4%) than rural women (17.8%).

About 8.3% women knew of a public figure/leader in their area that assisted the victims of GBV, followed by the women's helpline (4.7%). The rural women were more aware of NGO /Mahila Mangal Dal for victims of VAW (5.0%), after the public figure/leader (8.9%). Amongst the urban women too, public leaders too were most commonly known agency (7.7%) for protection against VAW followed by Women's helpline (5.5%).

Table 3 - Respondents by Perception of Safety in their Residential Area after Dark (N=880)

Feel unsafe after dark while	Rural (%) (n=440)	Urban (%) (n=440)	Total	p-Value
Using public transport	263 (59.8)	207 (47.0)	470 (53.4)	0.001
Walking alone	70 (15.9)	107 (24.3)	177 (20.1)	0.000
Walking past teenage boys, men	35 (8.0)	158 (35.9)	193 (21.9)	0.000

Table 4 - Respondents by Types of Harassment Activities Ever in Life (N=880)

Harassment activity	Rural (%) (n=440)	Urban (%) (n=440)	Total
Obscene phone calls	54 (12.3)	50 (11.4)	104 (11.8)
Eve teasing	48 (10.9)	35 (8)	83 (9.4)
Been followed home	25 (5.7)	25 (5.7)	50 (5.7)
Unsolicited advances *	22 (5.0)	12 (2.7)	34 (3.9)
Forced into unsolicited sexual activity **	7 (1.6)	2 (0.5)	9 (1.0)

Multiple responses*Man got too close, touched in a sexual way (touching, grabbing, fondling, and kissing); ** As a child or adult, by person other than husband, forced to perform sexual intercourse/sexual acts

Table 5-Respondents by Awareness Regarding Protection from VAW (N=880) (Multiple response)

Knowledge About	Rural (%) (n=440)	Urban (%) (n=440)	Total
NGO /Mahila Mangal Dal for victims of GBV	22 (5.0)	0 (2.3)	32 (3.6)
Public figure/leader	39 (8.9)	34 (7.7)	73 (8.3)
Women's helpline	17 (3.9)	24 (5.5)	41 (4.7)
Women's commission/ shelter	12 (2.75)	8 (1.8)	20 (2.3)

DISCUSSION

The NCRB figures for Uttarakhand reveal that the crime rate against women was only 8.8% in 2001 (a year after the state was formed), which has gone up to 27.4% in 2014, showing a jump of over 200%.⁶ Haridwar, Dehradun and Udham Singh Nagar com-

prise for nearly two-third of the total crime targeting women.⁷

The present study involving 880 women in age group 15-49 years in rural and urban areas of Dehradun, Uttarakhand were interviewed for the experience of VAW ever in life.

Majority of women in our study felt unsafe using public transport after dark (53.4%). This is similar to the findings from a baseline survey conducted by JAGORI foundation in Thiruvananthapuram and Delhi (2010) where 54% of women felt unsafe in public transport.⁸ In our study women felt that their safety was compromised while walking alone (20.1%) after dark or walking past teenage boys/men (21.9%). These figures are lower than reported by women in a baseline survey conducted by JAGORI foundation in Thiruvananthapuram and Delhi (2010) where 39.9% avoided going out alone after dark.⁸ Gallup's annual Crime Survey (2014) on safety after dark revealed that 45% of women do not feel safe walking alone at night which are much higher than findings from our study.⁹ Women's fear of rape further circumscribes their use of public space and public transport.

Although eve teasing is cognitive, it has always been considered as a minor nuisance, a jocular practice validated both culturally and sub-culturally across India.¹⁰ In our study, receiving obscene phone calls were reported by 11.8 %; followed by reports of eve teasing (9.4 %); being followed home (5.7%) and unsolicited advances by (3.9%). Our figures are on the lower side when compared to a Tamil Nadu-based study by Jaishankar and Kosalai (2007) where being followed and obscene phone calls were experienced by 55.3% and 30.7% urban women.¹¹ In a Lucknow-based urban study by Singh and Singh (2010), 5.79% women reported receiving obscene calls which are lower than our findings of 11.4%.¹² When compared to a study by Reen and Kaur (2013) done in Chandigarh, 65% women had experienced eve teasing, 33% had been followed which is higher as compared to our figures.¹³ Our figures are very low when compared to the multi-nation study in 2016 by ActionAid on street harassment in a number of countries. They found 79% of women living in cities in India, 86% in Thailand, and 89% in Brazil and 75% of women in London, the United Kingdom have been subjected to harassment or violence in public.¹⁴

In a Lucknow-based urban study by Singh and Singh (2010), 22.6% women reported unsolicited advances as which is considerably higher than our findings of 2.7%.¹² This may be due to reluctance in reporting due to shame and social acceptance of eve-teasing in day to day life. This also may be the cause why only 1.0% (rural-1.6%; urban – 0.5%) women in our study reported being forced into unsolicited sexual activity by a person other than a spouse, although according to NCRB data for Uttarakhand, there has been a sharp increase in the rate of crime against women in the state over the past few years. While 119 rape cases were reported in various districts of the state in the first ten months of 2012, the figure went up to 181 in the corresponding period of 2013. In 2014, the number of rape cases reported was 205.⁷ Over

151 rape cases have been registered by police in the first six months of 2016, a rise from 131 such cases reported in 2015. A quarter of rape cases this year have been filed in Dehradun and Haridwar alone.¹⁵ Our study results are also lower than findings from a urban baseline survey by JAGORI (2010) where the prevalence was 3.8% for rape.⁸ Our results are comparable to sexual abuse statistics stated in a multi-nation study (2011) by Abramsky where the prevalence was 0.4% in rural Bangladesh and 2% each in urban Serbia and rural Thailand, yet highly contrasting with Peru (11%).¹⁶ Figures for sexual abuse by a person other than the husband in our study are much lower than the estimated 7 % of women who have experienced sexual violence perpetrated by someone other than an intimate partner in their lifetime according to World's Women Report (2015) by UN.¹⁷ This may not only be due to the reason that the sample covered by this study was small but also that the nature of the question being sensitive, therefore many women might not have felt comfortable in disclosing the information.

All 13 districts in the state have a dedicated Mahila Helpline and a Mahila desk to look into such matters.⁷ Still, overall only 19.2% of 880 women had any knowledge about protection laws and agencies for victims of GBV in our study, the urban women (21.4%) being overall more knowledgeable than rural women (17.8%). This is in contrast with a Lucknow-based urban study by Singh and Singh (2010) where 45% women had some knowledge about protection laws and agencies for victims of VAW.¹² A report published in 2009 by Executive Council Office – Women's Issues Branch, Government of Canada showed that 31 % women were aware of health and social services as a source of assistance and information to women and women with children who are abused which is higher than our findings. When women were specifically asked if they knew where to turn to if they were ever victimised, the police (39%) were most widely cited.¹⁸

CONCLUSION

It can be concluded from our study that though Dehradun is a small and peaceful city, the prevalence of VAW amongst women of district Dehradun is on the rise. Therefore it is only judicious that effective strategies are employed to combat the medusa that is VAW. The multi-faceted nature of the factors that influence VAW highlight the need for a multi-sectoral response that combines development activities, including improved access to secondary education for girls and boys, with initiatives to transform gender norms and attitudes.

RECOMMENDATIONS

The importance of primary prevention of violence by intimate partners cannot be denied. Schools are also an important setting for primary prevention activities, with the potential to address issues of relationships, gender roles, power and coercion within existing youth violence and bullying programmes. Strengthening informal sources of support can help lower the consequences of VAW as according to our study many women are not aware of assistance from the official services or systems that are available to them. Governments and other donors should be encouraged to invest much more in research on violence by intimate partners over the next decade.

LIMITATION

There are limitations in this study, as usual to this type of research topic. The topic of the interview is very sensitive and participants may not express their views openly, as they think that their responses may damage the reputation of themselves and their families. Sometimes in this type of research, participants may also report the behaviour that is believed to be consistent with their culture, rather than the actual circumstances.

Obviously, the cross-sectional nature of this study limits the extent to which we can draw conclusions regarding temporality or the causal nature of observed associations. Also as the sample size is limited, the generalisation of results is not advisable.

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