

**IMPACT OF DOMESTIC VIOLENCE AGAINST  
WOMEN AND THEIR HEALTH STATUS: A CASE  
STUDY IN LUCKNOW CITY**

**THESIS**

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## ABSTRACT

Violence against women includes all verbal, physical, and sexual assaults which violate a woman's physical body, sense of self and sense of trust, regardless of age, race, ethnicity, or country. Violence against women has been identified as a major public health and human rights issue and have been estimated by the World Health Organization (WHO) to account for between 5–20% of healthy years of life lost in women aged 15 to 44 (WHO 1997). Violence in the domestic sphere is usually perpetrated by males who are, or who have been, in positions of trust and intimacy and power husbands, boyfriends, fathers, fathers-in-law, stepfathers, brothers, uncles, sons, or other relatives. Domestic violence is in most cases violence perpetrated by men against women. Women can also be violent, but their actions account for a small percentage of domestic violence. Violence against women is often a cycle of abuse that manifests itself in many forms throughout their lives. Even at the very beginning of her life, a girl may be the target of sex-selective abortion or female infanticide in cultures where son preference is prevalent. According to World Bank (1993) Worldwide, domestic violence is as serious a cause of death and incapacity among women aged 15–49 years a cancer, and a greater cause of ill health than traffic

accidents and malaria combined (The World Bank 1993). Studies have shown that the rate of intimate partner violence is still a public health problem in informal settlements. It has both physical and psychological consequences to the victim. Domestic violence is a criminal offense in India. The Indian Parliament passed the Protection of Women from Domestic Violence Act in 2005. Yet only a minority of women seek recourse when faced with domestic violence because of their own and broader societal tolerance and acceptance of violence, social stigma associated with being divorced or separated, and economic dependence and lack of alternatives. This study was conducted with the aim of determine sign and symptoms of domestic violence, extent and nature of mental health of affected women the nature and extent of violence, impact of violence on women health, relation between violence and physical health of affected women, reason for which affected women stay in abusive relationship.

The present study has been conducted in the luck now city. Total 300 respondents were selected from the population. A cross sectional, multistage random sampling was used in the present study to the participant. Data were collected through in-depth interview of women using a pre- structured and pre-design interview schedule to collect information on domestic violence. For the assessment of mental health status of affected women WHO SRQ-20 was used.

The findings show that 78.7% sign and symptom of physical violence and 87.7% sign and symptoms of psychological violence were present. 67.7% health consequences of violence were present. 17.3% respondent reported family involvement and 15.3% stated employment of wife was the main causes of domestic violence. Husband was the main instigator of violence i.e.40.3% and 54% respondent stated that frequency of violence was uncertain. Earning status and working status was significantly associated with frequency of violence and the person who inflict violence on women. A significant relationship was found between physiological condition and mental health of the women. A significant difference was also found between economical, educational, marital status and reason to stay in abusive relationship.

The study finding indicate that rate of domestic violence was high, Prevalence of psychological violence was greater than physical violence and it's very difficult to capture or report the complain of psychological violence. Its findings also revealed

that domestic violence affected mental health status of the women greater than physical violence.