Intimate Partner Violence against currently married women in India: Findings from NHFS 5

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By

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ABBREVIATIONS

VAW – Violence against women

IPV – Intimate Partner Violence

SDG – Sustainable Development Goals

NFHS – National Family Health Survey

ICRW – International Center for Research for Women

WHO – World Health Organization

PTSD – Post Traumatic Stress Disorder

IIPS – International Institute of Population Sciences

MoHFW – Ministry of Health and Family Welfare

PSU – Primary Sampling Units

CEB – Census Enumeration Blocks

UT – Union Territory

NCT – National Capital Territory

SC – Scheduled Castes

ST – Scheduled Tribes

OBC – Other Backward Classes

UNFPA – United Nations Fund for Population (Activities)

ABSTRACT

BACKGROUND: Intimate partner violence in women is a global public health issue. The high prevalence rates of intimate partner violence in women not only affects their health but also has an adverse effect on the health of their children.

The study was done with the aim to assess the occurrence of intimate partner violence, including physical, sexual, and emotional violence as well as the husband/partner's controlling behaviour on currently married women between the ages 15-49 years in India. The study also analyses the factors influencing the experience of violence in women by their intimate partners.

MATERIALS AND METHODS: This is a cross-sectional study where data for the present study were retrieved from the National Health Family Survey-5 (2019-2020) of India. A total of 4,14,279 currently married women (15-49 years) were eligible for the domestic violence module, out of which 60,480 were considered for this study. Analysis was carried out on SPSS using cross-tabulation.

RESULTS: The mean age of the respondents was 33.6 years, with 75.9 % of them residing in rural areas and 71.4 % currently unemployed. The study findings show that 32.4 % of the women had experienced some form of violence by their partner in the last 12 months before the survey. Physical violence was the most common form of violence (21.3 %), followed by the experience of the husband's controlling behaviour (16.1 %), emotional violence (10.5 %) and sexual violence (4.6 %)

IPV ranged from 1.1 % to 55 % across the states, with the highest IPV in the Central and East regions. The findings also show that women's experience of IPV varies with their age at first marriage, marital duration, parity, education level, employment status, household decision-

making, place of residence, religion, caste and husband's education and employment status ($P < 0.05$, 95% CI).

CONCLUSION: The study findings suggest a high occurrence of IPV among currently married women in the reproductive age group across states in India. The study confirms the incidence of all forms of IPV including physical, emotional, sexual and controlling behaviour. Hence, there is need to address IPV issues collectively and must get ample scope and space in national social and health programmes. The results of the study indicate a pressing need for action with regard to the current levels of IPV among women in India.

Keywords: Intimate partner violence, women, currently married women, physical violence, sexual violence, emotional violence, controlling behaviour, India

1. INTRODUCTION

Violence against women (VAW) is a growing public health problem and recognized human rights violation, involving violence by a spouse/partner on the woman in the form of physical, sexual, or psychological as well as those by people other than the spouse or partner. (1,2,3) It may occur both in private or public life, including the threat of harm to women, coercion, and deprivation of liberty. (1,2)

The most common of these is Intimate[1] Partner[2] Violence[3] (IPV) which affects nearly 852 million women globally and poses a serious threat to the health of women as well as their children. (4) One-third of all women worldwide are found to have experienced violence by an intimate partner or a non-partner or both in their lifetime and the latest Sustainable Development Goals report, 2022 says that one in every four women, above 15 years of age, has experienced IPV at least once in their life. (4, 5)

The 1993 "United Nations Declaration on the Elimination of Violence against Women" was an effort started at a global level for the elimination of VAW followed by the 1995 "Beijing Declaration and Platform for Action". (4)

In 2015, 161 countries across the world adopted "the 2030 United Nations Agenda for Sustainable Development Goals (SDGs)" which called for eliminating violence against girls and women in any form, in both public and private spaces. (6)

[1] An intimate partner is defined as a closely related partner (emotionally, physically, sexually or through regular contact), irrespective of the marital status at the time. (7, 8)
[2] Partner includes both current and former husbands/ cohabiting or non-cohabiting male intimate partners (4)

The importance of addressing violence against women as a public health priority was particularly seen during the COVID-19 pandemic in 2020, where an increase in domestic violence was reported, particularly IPV (4)

Although this is a global issue affecting women from all aspects of life, it is "almost universally underreported", as violence against women, especially sexual violence is still considered a sensitive issue, the disclosure of which becomes challenging for victims and the survivors. (1, 4, 9)

2. REVIEW OF LITERATURE

According to the World Health Organization, IPV refers to "any behaviour within an intimate relationship that causes physical, psychological, or sexual harm including acts of physical aggression, sexual coercion, psychological abuse and controlling behaviours, by both current and former spouses and partners". (10, 11)

The prevalence of IPV varies across countries with the highest rates seen in Sub-Saharan Africa and South Asia (12)

The 2018 estimates of the prevalence of intimate partner violence suggest that globally, the lifetime prevalence of physical and/or sexual intimate partner violence is 27% for ever-married women aged 15–49 years and 26% for ever-married women aged 15 years and older. (4) Similarly, the global estimation for the past 12 months prevalence of IPV is 13% for ever-married women aged 15–49 years and 10% for ever-married women aged 15 years and older. (4)

Ending violence against women is now a key priority of the Government of India, which is in line with the Sustainable Development targets of the United Nations on gender equality (Goal

5). (9) Countries are required to regularly report on the proportion of women and girls facing violence by their current or former intimate partners. (6)

Despite several government initiatives, IPV prevalence in India remains high, especially in rural areas with higher IPV reporting from women in the East and Central regions. (13)

The National Family Health Survey (NFHS-4) found that around 31% of ever-married women experienced physical, emotional, and/or sexual violence from their husbands. (1) About 28 % of women reported having been subjected to physical violence which may include acts such as slapping, beating, hitting, and kicking, 12% experienced emotional or psychological violence in the form of constant humiliation, insults, and threats of harm to the woman or those close to them, and 6.8% faced sexual abuse during 2015–2016. (10, 14) Coercive controlling behaviours such as restricting and monitoring a partner's movements and access to education, healthcare, employment, or financial resources as well as isolating them from friends and family were also reported in large numbers by women. (10, 15)

An ICRW[4] study showed that around 45 % of women in India were physically abused by their husbands, while another study found that the rate of violence during pregnancy in India was found to be the highest, indicating an enormous health burden for women. (16) Nearly half the women of the reproductive age group in India have been shown to be affected by their husband's coercive control, which is often viewed as a subset of psychological or emotional abuse. (15, 17, 18)

Studies suggest that the experience of violence from the husband is influenced not only by the socio-demographic characteristics but also by the marital, husband's behavioural and woman's autonomy-related factors (19-23)

[4] International Center for Research for Women

3. RATIONALE FOR THE STUDY

Woman's physical and mental health is affected directly by IPV-related injuries. The impact on a woman's health increases with the severity and frequency of abuse and can have detrimental effects on her health and well-being even after the violence has ended (3, 24)

According to a multi-country study by WHO, emotional distress, suicidal thoughts, and suicidal attempts were more common among women who faced physical or sexual violence. (3)

Other effects of IPV on women include substance abuse, eating and sleep disorders, lack of physical activity, PTSD[5], low self-esteem, self-harm, and unsafe sexual practices, often leading to unintended pregnancy, unsafe abortion, and death. (10, 25)

The direct trauma due to the abuse on a pregnant woman's body, as well as the physiological effects of stress from current or past abuse including fear and a lack of control or autonomy in a relationship, is associated with poor family planning, decreased rates of utilization of maternal health services, adverse maternal and birth outcomes including preterm labour, low birth weight, fetal injury, miscarriage, caesarean section, antenatal hospitalization, and antepartum haemorrhage. (3, 6, 23, 25, 26, 27, 28)

Increases in the likelihood of children's poor mental health, abuse, malnutrition, childhood illness, and sometimes death have been noticed in instances where the mother is exposed to violence. (3,29)

The extensive health implications of IPV support the need for carrying out this research.

Although the WHO defines IPV in terms of physical, sexual, and emotional violence and controlling behaviours of partners/husbands, research has focused primarily on physical, and

[5] Post-Traumatic Stress Disorder

sexual abuse, in some cases on emotional abuse and rarely on coercive controlling behaviours of partners. (15) Therefore, this study aims to study IPV in women using data on all four subtypes of IPV.

The National Family Health Survey (NFHS- 5) of India gives an opportunity to gain better insights into IPV against women in a culturally, socially, and geographically diverse country like India. (15) Obtaining reliable data on violence against women is crucial to accurately understand the burden of the problem and its impact on women and their children's health as well as to monitor changes over time. (4)

4. OBJECTIVES

1. To estimate the past 12-months occurrence of IPV including physical violence, sexual violence, emotional violence, and partner's controlling behaviour in currently married women aged 15–49 years in India.

2. To study the differentials of IPV in currently[6] married women (15-49 years) who reported being exposed to IPV in India.

3. To estimate the past 12-months occurrence of IPV in currently married women aged 15-49 years, across various categories of the selected background characteristics.

5. METHODOLOGY

5.1. Study design, Data and Sampling

[6] Those women who responded to the NFHS question on their present marital status as "currently married" and are not widowed, separated, deserted, or divorced are included under "currently married" women.

This is an analytical cross-sectional study which uses the data from NFHS-5 (2019-2020), India. This large sample survey is carried out by the International Institute of Population Sciences (IIPS), Mumbai, under the support of the Ministry of Health and Family Welfare (MoHFW), the Government of India and across all states and union territories in India. (30)

Sampling in NFHS-5 is based on the 2011 Indian Census, where villages were the Primary Sampling Units (PSUs) in rural areas, while it was the Census Enumeration Blocks (CEB) in the urban areas, in the first sampling. The first stage of mapping and listing households was followed by the second stage in which 22 households in each PSU in rural areas and each CEB in urban areas were randomly selected. The survey covered a total of approximately 6,10,000 households. (30)

The results from 22 States & UTs during Phase-I were released in December 2020. Phase – II of the Survey covering the remaining 14 states and UTs was delayed due to the COVID-19 pandemic and its results were made available in May 2022 (31, 32)

A total of four survey questionnaires, each for 'Household', 'Man', 'Woman' and 'Biomarker' were used in NFHS-5. Information on domestic violence from women between the ages of 15 and 49 was collected using the Woman's questionnaire. (30) Informed consent was obtained from all respondents before the data collection for NFHS-5. Privacy and ethical guidelines from the ethical committee were strictly maintained for violence-related questions.

The design for sampling and survey procedures are detailed in the NFHS-5 national report. (30)

Ethical approval for conducting this research was not required as the data is freely available in the public domain and this study does not involve the direct involvement of any human subjects.

5.2. Study participants

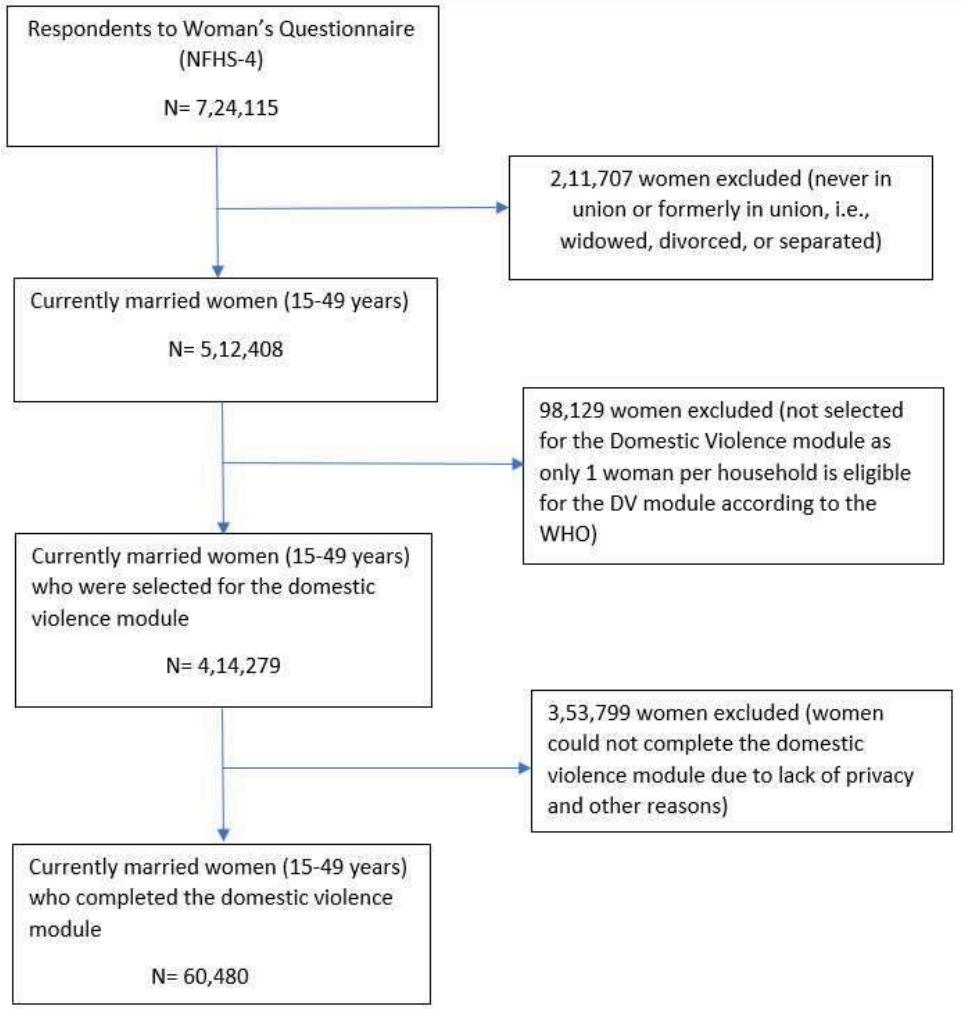
All women between the ages of 15-49 years in the selected sample households were eligible for interviews in NFHS-5.

Out of 7,24,115 successfully interviewed women (15-49 years), 5,12,408 were "currently married" and were considered for this analysis. Women who were not married, widowed, divorced, separated, or not living together with their partners at the time of the NFHS-5 survey were excluded from the study.[7]

As per the WHO recommended guidelines and ethical standards only one woman per household is eligible to be randomly selected for the collection of information on Domestic Violence. (33) . As such, a total of 4,14,279 women were eligible for this module. Due to lack of privacy and other reasons[8], only 60,480 currently married women between 15-49 years could complete the module for domestic violence who were considered for the information on the outcome variables. (Figure 1)

[7] A total of 30,422 women were either divorced, widowed, or separated at the time of the survey.
[8] A total of 3,51,926 women could not be interviewed for the Domestic Violence module of NFHS-5 due to reasons other than privacy.

Figure 1. Flow chart depicting the selection of study participants (NFHS 5, 2019-20)



Source: Designed by the researcher

5.3. Outcome variable

Women's experience of violence by their husband or partner, which may be in the form of physical, emotional, sexual violence or controlling behaviour by the partner, are the study's outcome variables.

The occurrence of IPV has been defined based on participants' responses to a series of questions. (Annexure 'A'). Based on previous studies which used data from NFHS these questions have been identified as those related to IPV. (1,14-22, 30)

For measuring the Controlling Behaviour of partners, women were asked a set of 5 questions (Table A). The responses were either "no" (given code 0'), "yes" (given code '1') or "don't know" (given code '8'). '

The responses were converted into dichotomous measures where "yes" was coded as '1' and "no" and "don't know" were coded as '0'. If the woman responded "yes" to at least three out of five different types of control, she was considered to have experienced some form of controlling behaviour by the partner/husband.

For measuring Emotional Violence, a set of 3 questions was asked to the women. Similarly for measuring Physical and Sexual violence, a set of 7 questions and 3 questions were asked respectively. (Table A) The responses of these were either "never" (Coded as 0), "often" (given code 1), "sometimes" (given code 2), "yes, but not in the last 12 months" (given code 3) or "yes, but the frequency in last 12 months missing" (given code 4).

Dichotomous measures for exposure to each type of IPV were created for these responses where, "often" and "sometimes" were coded as '1' (experience of emotional, physical or sexual violence present), while the rest of the responses were coded as '0' (no recent experience of either emotional, physical or sexual violence)

Hence women reporting "often" or "sometimes" to questions related to any of these three types of violence were considered to have experienced some form of these three types of violence.

A composite variable representing women's IPV experience was created from the responses of all four forms of violence and using a dichotomous measure of "yes" (given code 1) and

"no" (given code 0) where "1" denotes the experience of any of the four forms of violence, and "0" indicates no experience of violence)

A woman experiencing any of the four forms of violence was considered as having experienced IPV.

5.4. Variables used for the background characteristics

The inclusion of variables for the background characteristics was based on earlier studies on intimate partner violence conducted in India as well as other countries. (13, 21, 34-42)

The variables considered include the woman's present age (15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49 years), woman's age at first marriage (less than 18 years or 18 years and above), duration of marriage (0-9, 10-19, and 20 years and more), woman's level of parity (0,1,2,3, 4 or more), residing area (urban or rural), wealth index (poorest, poorer, middle, richer, richest), the region in India (Central, East, West, North, Northeast, South), caste categories (Scheduled Caste/Tribe, Other Backward Classes, and others), religion (Hindus, Muslims, Christians and others), woman's level of education (no education, primary, secondary and higher education), and woman's employment status (currently employed/unemployed).

Other characteristics that were studied included the sex of the firstborn child and husband-related factors such as the husband's age, level of education, employment status and alcohol use.

For assessing woman's decision-making autonomy at home, the women were asked about who makes decisions on "the respondent's healthcare", "household purchases" and "visits to family or relatives". Each question had six categories of responses ("respondent alone", "respondent and husband/partner together", "respondent and other person", "husband/partner

alone", "someone else", and "other"). (30) Woman's participation in making decisions in the family was considered affirmative only if they make decisions alone, jointly with their husband or with another person. Hence the first three responses were coded as "1" denoting the woman's participation and the rest as "0".

Using these three questions, a final score of 0 to 3, was created and categorized into women with high decision-making power (score of three), and women with low decision-making (score of less than three).

The regional classification in India prepared by the NFHS-5, based on geography and cultural settings was used for the study. (33, 43)

5.5. Statistical analysis

The total analytic sample for this study included 60,480 respondents (Figure 1). Data analysis was done using Excel and IBM SPSS Statistics Version 22. The analysis unfolded in a series of four steps.

The first step involved descriptive statistical analysis to study the background characteristics of study participants (Table 1). The second step was to find out the past 12-months occurrence of IPV and each of its forms among currently married women in India and the states/UTs. (Table 2 & 3)

The distribution of currently married women who reported being exposed to IPV, based on the selected characteristics was calculated in the third step. (Table 4)

A cross-tabulation was performed in the fourth step with a chi-square analysis, presented in Table 5 for IPV (dependent variable) and selected characteristics (independent variable) including respective p-values generated by the chi-square tests. The confidence interval was set at 95 %.

6. RESULT

6.1. Background characteristics of the respondents

The distribution of respondents aged 15 to 49 years by selected background characteristics is shown in Table 1.

Only 13.6 % of 60,480 respondents were between 15-24 years of age, with majority of the women (45.6 %) in the age group of 35-49 years and a mean age of 33.6. Over 1/3rd of the women (38.3 %) was married before reaching 18 years of age and majority had been married mor more than 10 years (61 %). Parity ranged from zero to three for 74.5 % of the respondents, while 7.4 % of the women had never given birth before. A total of 56,029 (92.6 %) had given birth before and 58.6 % of those women reported that their first-born child was male.

Around 3/4th of the women in the sample resided in rural areas (75.9 %) and identified themselves as Hindu (76 %) while 44.6 % fell in the poor category of the wealth index. The distribution of the respondents also varied across the NFHS-5 classified residential zones. The central region has the largest percentage of women (21.7 %), followed by the north (19.4 %), east (17.3 %), south (16.4 %), northeast (19.4 %) and west (10.3 %) regions. Among the caste groups, OBC made up 38.7 % of the women, followed by SC/ST (37.9 %).

Almost 46 % of women had completed secondary education, while 28 % of the women had no formal education. However, only 28.6 % of the women were employed at the time of the survey. Compared to this, over half of the women answered that their husbands had completed secondary education and 85 % of them were employed. The husbands of most of the respondents were between the ages of 35-44 years (36.7 %) and about 27.1 % of them consumed alcohol.

It was found that nearly 3/4th of the respondents (72.6 %) had a high degree of autonomy in making decisions related to household activities.

Table 1: Distribution of currently married women (15-49 years) by selected background characteristics, India, NFHS-5 (N=60480)

Background characteristics	Percentage (%)	Number of women in each category (n)
Women's current age (years)		
15-24	13.6	8,235
25-34	40.7	24,642
35-49	45.6	27,603
Women's age at first marriage (years)[9]		
< 18	38.3	23172
>=18	61.7	37,308
Marital duration (years)[10]		
0 - 4	15.3	9,262
5 - 10	23.2	14,015
>10	61.5	37,203
Woman's parity		
0	7.4	4,451
1 - 3	74.5	45,068
>=4	18.1	10,961
Sex of first child[11]		
Male	58.6	32,857
Female	41.4	23,172
Place of residence		
Rural	75.9	45,927
Urban	24.1	14,553

[9] The percentage of women who married more than once was found to be only 1.7 % among the total sample, hence for this study they were not excluded.
[10] Duration of marriage is calculated considering the most recent marriage
[11] Sex of the first child was calculated out of the total number of women who gave birth prior to the study (n = 56029). 7.4 % of the women did not give birth (n = 4,451)

Household Wealth Index[12]		
Poorest	22.0	13,295
Poorer	22.6	13,661
Middle	20.7	12,490
Richer	18.7	11,288
Richest	16.1	9,746
Region/ Zone of Residence		
North	19.4	11,734
Central	21.7	13,135
East	17.3	10,483
Northeast	14.9	9,017
West	10.3	6,215
South	16.4	9,896
Caste		
SC/ST	37.9	22,927
OBC	38.7	23,390
Others	23.4	14,163
Religion		
Hindu	76.0	45,955
Muslim	12.1	7,291
Christian	7.0	4,224
Others	5.0	3,010
Women's education		
No education	28.7	17,366
Primary	14.4	8,729
Secondary	45.9	27,750
Higher	11.0	6,635
Women's employment status		
Currently employed[13]	28.6	17,310
Unemployed	71.4	43,170
Husband's age		
15-24	4.2	2,533
25-34	30.9	18,709
35-44	36.7	22,211
>=45	28.2	17,027
Husband's level of education		
No education	17.1	10,339
Primary	14.6	8,803

[12] Wealth Index is based on the categorization by NFHS. [30]

[13] Currently employed is defined as having done work in the past seven days and includes women who did not work in the last 1 week but who are regularly employed and were absent from work due to illness or other causes. (30)

Secondary	53.9	32,572
higher	14.2	8,575
Don't know	0.3	191
Husband's alcohol use		
Yes	27.1	16,360
No	72.9	44,120
Husband's employment status		
Employed	85.0	51,378
Unemployed	15.0	9,102
Woman's household decision-making power		
Low	27.4	16,542
High	72.6	43,938
Total	**100**	**60,480**

6.2. Past 12-months occurrence of IPV and its forms, as reported by women, in India and states/UTs

Of the total study sample (n=60480) 21.3 % of the respondents reported physical violence, 4.6 % sexual violence, 10.5 % emotional abuse by their partners, and 16.1 % reported experiencing controlling behaviours from their partners. Moreover, 32.4 % reported having experienced at least one form of IPV in the 12 months before the survey. (Table 2, Figure 2)

Table 2. Percentage of currently married women (15-49 years) exposed to IPV and its forms in India, NFHS-5 (as reported by women)

Type of violence	Percentage (%)	Number of women (n)
Sexual Violence	4.6	2754
Emotional Violence	10.5	6360
Husband's controlling Behaviour	16.1	9720
Physical Violence	21.3	12858
Intimate Partner Violence	32.4	19574
Total		**60,480**

Figure 2. Percentage of currently married women (15-49 years) exposed to IPV and its forms in India, (as reported by women in NFHS 5)

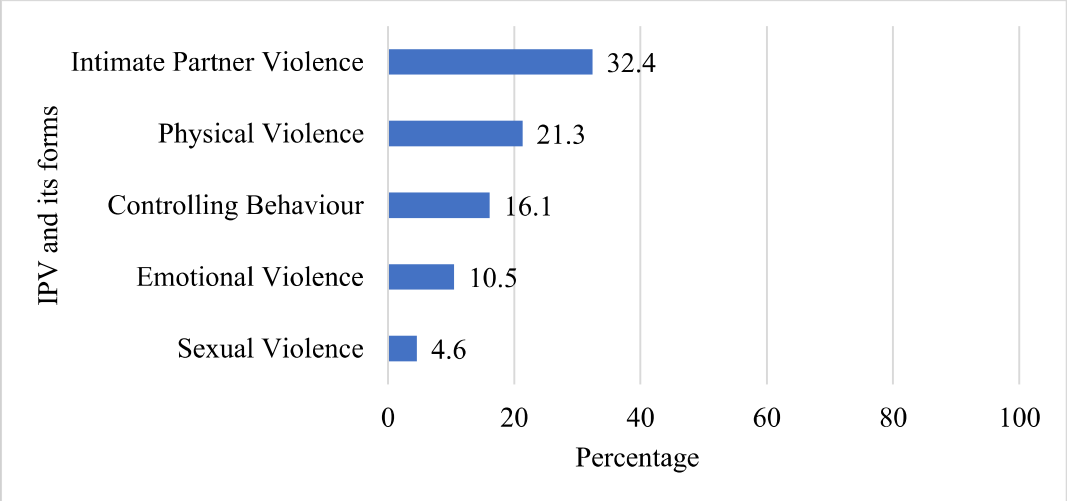


Table 3 shows that, overall, 9 states in India, have a higher occurrence of IPV among currently married women compared to the national value (32.4 %). These include Bihar, Karnataka, Uttar Pradesh, Jharkhand, Telangana, Madhya Pradesh, Tamil Nadu, Maharashtra, and Andhra Pradesh, while states like Lakshadweep, Kerala, Chandigarh, and Nagaland have a low occurrence of IPV.

Sexual violence among currently married women is found to be highest in Karnataka (10.4 %), followed by Bihar, Ladakh, West Bengal, Jharkhand, and Meghalaya.

The occurrence of physical violence is high in states like Karnataka, Bihar, Telangana, Uttar Pradesh, Tamil Nadu, and Jharkhand.

State-wise occurrence of emotional violence ranged between 23.6 % in Karnataka to 1.1 % in Lakshadweep. The highest occurrence of women experiencing husband/partner's controlling behaviour is in the state of Bihar (32.2 %), followed by Jharkhand, Uttar Pradesh, and Karnataka.

On the other hand, Goa which has an overall low occurrence of IPV among women was found to have a high occurrence of husband's controlling behaviour toward women (14.9 %) which is close to the national value of 16.1 %. Similar results were seen in Andaman and Nicobar Islands.

The occurrence of sexual and emotional violence among currently married women in states like Meghalaya and NCT[14] of Delhi were found to be on the higher side while other forms of violence as well as the overall IPV occurrence in these two states are much lower than the national values.

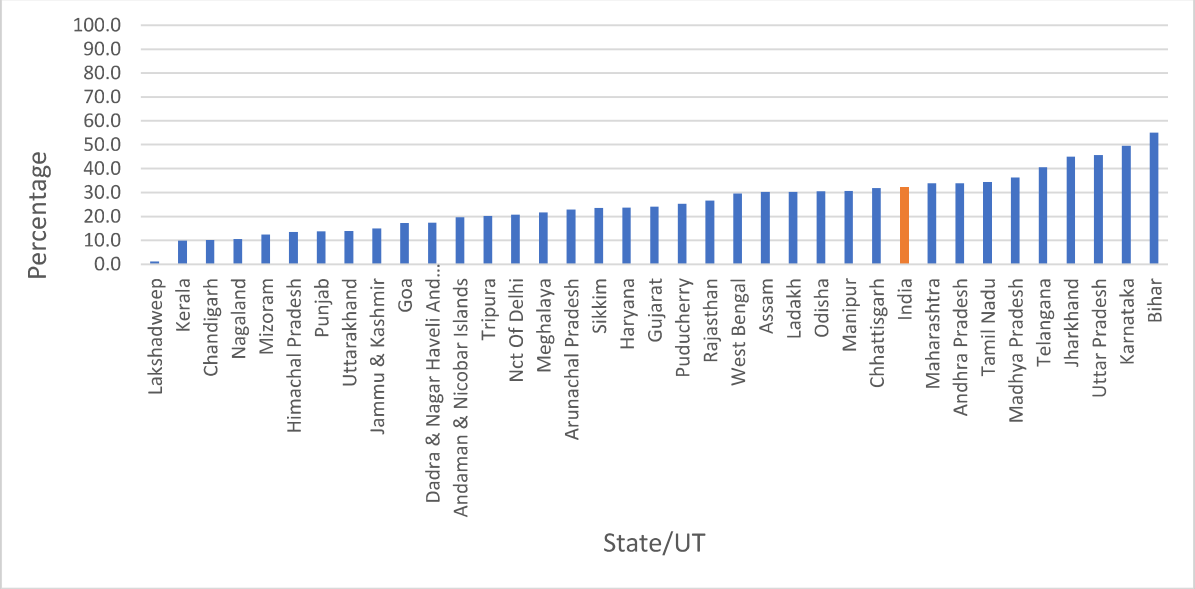
Table 3: Percentage of currently married women (15-49 years) exposed to IPV and its forms across different States/UTs in India, (as reported by women in NFHS 5)

State/union territory	Percentage of women exposed to IPV (%)	Percentage of women exposed to Physical Violence (%)	Percentage of women exposed to Husband's Controlling Behaviour (%)	Percentage of women exposed to Emotional Violence (%)	Percentage of women exposed to Sexual Violence (%)
Andaman & Nicobar Islands	19.6	5.4	15.2	2.5	0.5
Andhra Pradesh	33.9	24.3	14.9	12.9	2.4
Arunachal Pradesh	22.8	16.0	8.2	8.4	4.5
Assam	30.2	23.6	8.4	8.5	5.0
Bihar	55.0	35.9	32.2	16.7	7.6
Chandigarh	10.1	8.7	0.0	1.4	0.0
Chhattisgarh	31.9	19.3	17.2	6.1	3.8
Dadra & Nagar Haveli and Daman & Diu	17.3	10.5	7.6	6.3	3.0
Goa	17.3	5.6	14.2	4.9	4.3
Gujarat	24.2	12.7	13.5	8.0	3.1
Haryana	23.7	12.8	14.2	8.5	3.2
Himachal Pradesh	13.5	5.9	8.2	5.2	2.2
Jammu & Kashmir	15.0	7.6	6.1	7.2	3.3
Jharkhand	45.1	28.9	27.0	11.3	6.2
Karnataka	49.6	39.7	24.2	23.6	10.4
Kerala	9.8	5.4	2.8	5.3	1.2
Ladakh	30.2	13.6	11.7	17.9	6.8
Lakshadweep	1.1	1.1	1.1	1.1	0.0
Madhya Pradesh	36.3	23.6	19.6	12.7	5.2

[14] National Capital Territory

Maharashtra	33.9	23.4	16.8	12.0	4.7
Manipur	30.6	22.8	6.0	8.2	4.6
Meghalaya	21.6	11.1	9.3	11.3	6.1
Mizoram	12.4	5.9	7.7	3.2	0.4
Nagaland	10.6	3.3	1.6	7.8	1.1
NCT Of Delhi	20.7	12.6	8.7	9.7	4.8
Odisha	30.6	20.6	13.2	7.4	4.0
Puducherry	25.3	18.9	5.4	8.0	1.0
Punjab	13.7	8.5	7.1	6.2	2.1
Rajasthan	26.6	16.1	13.4	7.5	4.0
Sikkim	23.5	8.3	13.6	10.6	3.0
Tamil Nadu	34.3	29.1	9.3	9.3	2.0
Telangana	40.5	29.6	14.7	15.4	3.8
Tripura	20.2	10.4	9.0	8.1	3.6
Uttar Pradesh	45.6	29.2	26.9	11.9	5.6
Uttarakhand	13.9	7.0	6.6	6.4	1.3
West Bengal	29.5	16.2	17.4	10.6	6.4
India	**32.4**	**21.3**	**16.1**	**10.5**	**4.6**

Figure 3: Percentage of currently married women (15-49 years) exposed to IPV and its forms across different States/UTs in India, (as reported by women in NFHS 5)



6.3. Distribution of women exposed to IPV, by selected background characteristics

Table.4 depicts the distribution of IPV in currently married women based on the selected characteristics. Of the total 19,574 women experiencing IPV (19,574), 45.0 % of them were between 35-49 years of age. Almost 45 % of them got married before they turned 18 while most of them had been married for more than 10 years (64.2 %). Around 72 % of the women had a parity of one to three and more than half of them reported giving birth to a male first child.

Nearly four in five of those who were more exposed to IPV resided in rural areas (79.8 %) and a majority of these women were found to be from the Central region (27.1 %), followed by East, South, North, Northeast, and West regions.

Four out of five women who reported suffering from IPV identified as Hindu (80 %) and belonged to the marginalized categories of SC/ST and OBC (81.4 %) and more than half of them belonged to the category of poor wealth index. More than 1/3rd of the women exposed to IPV (37.3 %) had husbands between the ages 35-44 years and just over half of them had received secondary education, while almost 86 % of the women reported having husbands who were employed. It was also noticed that only about 2/5th of the women reported having husbands who consumed alcohol and nearly 2/3rd of them had high levels of decision-making power at home.

Table 4: Distribution of currently married women (15-49 years) who reported being exposed to IPV, by selected background characteristics, India, NFHS-5 (2019-2020), (N=19,574)

Background characteristic	Percentage of women experiencing IPV (%)	Number of women experiencing IPV (n)
Women's current age (years)		
15-24	13.8	2,708

25-34	41.2	8,057
35-49	45.0	8,809
Women's age at first marriage (years)		
< 18	44.5	8,715
≥18	55.5	10,859
Marital duration (years)		
0 to 4	12.9	2,532
5 to 10	22.7	4,441
>10	64.4	12,601
Woman's parity		
0	6.1	1,189
1 to 3	71.9	14,065
≥4	22.1	4,320
Sex of first child		
Male	58.5	10,759
Female	41.5	7,626
Place of residence		
Rural	79.8	15,622
Urban	20.2	3,925
Household Wealth Index		
Poorest	28.5	5,573
Poorer	25.3	4,944
Middle	20.5	4,018
Richer	15.9	3,109
Richest	9.9	1,930
Region		
North	11.9	2,330
East	22.5	4,408
Northeast	11.1	2,166
South	18.4	3,595
West	9.0	1,762
Central	27.1	5,313
Caste		
SC/ST	39.3	7,702
OBC	42.1	8,245
Others	18.5	3,627
Religion		
Hindu	80.3	15,717
Muslim	11.9	2,320
Christian	4.5	884
Others	3.3	653
Women's education		

No education	36.0	7,044
Primary	15.6	3,059
Secondary	41.7	8,158
Higher	6.7	1,313
Women's employment status		
Currently employed	32.4	6,344
Unemployed	67.6	13,230
Husband's age		
15-24	4.2	822
25-34	30.7	6,016
35-44	37.3	7,302
≥45	27.8	5,434
Husband's level of education		
No education	22.2	4,342
Primary	16.8	3,296
Secondary	51.0	9,975
higher	9.7	1,898
Don't know	0.3	63
Husband's alcohol use		
Yes	38.1	7,461
No	61.9	12,113
Husband's employment status		
Employed	85.7	16,775
Unemployed	14.3	2,799
Woman's household decision-making power		
Low	34.1	6,683
High	65.1	12,891
Total	**100**	**19,574**

6.4. Past 12-months occurrence of IPV across various categories of the selected background characteristics

The result, in Table 5. shows that the occurrence of IPV varies across women based on their age at first marriage, duration of the marriage, number of births given, education and employment status of both the woman and her husband, decision-making power in the family, place of residence, economic status, caste categories and religion.

Women's exposure to IPV was found to be nearly the same throughout all age categories, ranging from 31.9 % for women between 35-49 years to 32.9 % for those in the age group of 15-24 years ($p = 0.090$). Similarly, the husband's age did not make a significant difference for currently married women being subjected to IPV ($p = 0.202$).

Based on the distribution of women by the age at their first marriage, the proportion of women who reported IPV among those who married before reaching 18 years was higher (37.6 %), while only 29.0 % of those who married after the age of 18 years reported having been exposed to IPV ($p < 0.05$).

Among women who had been married for less than 5 years, about 27 % of women reported IPV and the highest occurrence was seen in those who had been married for more than 10 years.

Almost 40 % of the women who had given birth four or more times before the survey reported having experienced IPV ($p < 0.05$). Although 58.5 % of the women who reported IPV said that they had given birth to a male first child, no significant difference was found between IPV reported by women who gave birth to a male first child and a female first child ($p = 0.681$).

Among the women from the poorest economic group, 41.9 % reported experiencing IPV while among the richest group, only 19.8 % had been subjected to IPV. ($p < 0.05$)

The percentage of women reporting IPV was 34 % in rural areas while only 27 % of the women in urban areas reported IPV. ($p < 0.05$)

Around 35 % of the women belonging to the OBC caste category and identifying themselves as Hindu, had been subjected to IPV.

The highest occurrence of IPV was found to be in women residing in the East followed by Central and South. ($p < 0.05$). Interestingly, it was noticed that the experience of IPV was low in women hailing from the North (19.9 %) ($p < 0.05$).

Employed women as well as those whose husbands were currently working reported a higher occurrence of IPV ($p<0.05$).

Among women with no education, 40.6 % reported IPV while it was only 19.8 % among those who received secondary education ($p < 0.05$).

Lower educational levels of both women exposed to IPV and their partners were associated with a higher experience of IPV among women ($p < 0.05$). It was found that the husbands of 45.6 % of the women who were subjected to IPV consumed alcohol. ($p < 0.05$) Around 40 % of the women with low involvement in household decision-making claimed to have been subjected to IPV ($p < 0.05$).

Table 5: IPV among currently married women (15-49 years) across selected background characteristics, India (as reported by women in NFHS 5) (N=60480)

Background characteristic	Percentage of women experiencing IPV (%)	Total women in each category (n)	[95% CI[15]]	*p*-value *
Women's current age (years)				
15-24	32.9	8,237	[28.4 - 34.0]	**0.090**
25-34	32.7	24,642	[32.1 - 34.2]	
35-49	31.9	27,603	[31.4 - 33.1]	
Women's age at first marriage (years)				
< 18	37.6	22,706	[37.0 - 38.2]	$p < 0.050$
>=18	29.0	36,713	[28.6 - 29.6]	
Marital duration (years)				

[15] Confidence interval

0 - 4	27.3	9,262	[26.4 - 28.3]	$p < 0.050$
5 - 10	31.7	14,015	[30.4 - 32.1]	
>10	33.9	37,230	[32.8 - 34.5]	
Woman's parity				
0	26.7	4,451	[25.4 - 28.0]	$p < 0.05$
1 - 3	31.2	45,068	[30.8 - 31.6]	
>=4	39.4	10,961	[38.5 - 40.3]	
Sex of first child				
Male	32.7	32,857	[32.2 - 33.3]	**0.681**
Female	32.9	23,172	[32.3 - 33.5]	
Place of residence				
Rural	34.0	45,927	[33.6 - 34.4]	$p < 0.05$
Urban	27.0	14,553	[26.4 - 27.9]	
Wealth Index				
Poorest	41.9	13,295	[41.1 – 42.8]	$p < 0.05$
Poorer	36.2	13,661	[35.4 – 37.0]	
Middle	32.2	12,490	[31.4 – 33.0]	
Richer	27.5	11,288	[26.7 – 28.4]	
Richest	19.8	9,746	[19.0 – 20.6]	
Region				
North	19.9	11,734	[19.1 - 20.6]	$p < 0.05$
East	42.0	10,483	[41.1 - 43.0]	
Northeast	24.0	9,017	[23.1 - 24.9]	
South	36.3	9,896	[35.4 - 37.3]	
West	28.4	6,215	[27.2 - 29.5]	
Central	40.4	13,135	[39.6 - 41.3]	
Caste				
SC/ST	33.6	22,927	[33.0 - 34.2]	$p < 0.05$
OBC	35.3	23,390	[34.6 - 35.9]	
Others	25.6	14,163	[24.9 - 26.3]	
Religion				
Hindu	34.2	45,955	[33.8 - 34.6]	$p < 0.05$
Muslim	31.8	7,291	[30.8 - 32.9]	
Christian	20.9	4,224	[19.7 - 22.2]	
Others	21.7	3,010	[20.2 - 23.2]	
Women's education				
No education	40.6	17,366	[39.8 - 41.3]	$p < 0.05$
Primary	35.0	8,729	[34.0 - 36.0]	
Secondary	29.4	27,750	[28.9 - 29.9]	
Higher	19.8	6,635	[18.8 - 20.8]	
Women's employment status				

Currently employed	36.6	17,310	[35.9 - 37.4]	$p < 0.05$
Unemployed	30.6	43,170	[30.2 - 31.1]	
Husband's age				
15-24	32.5	2,533	[30.6 - 34.3]	**0.202**
25-34	32.2	18,709	[31.5 - 32.8]	
35-44	32.9	22,211	[32.3 - 33.5]	
>=45	31.9	17,027	[31.2 - 32.6]	
Husband's level of education				
No education	42.0	10,339	[41.0 - 42.9]	$p < 0.05$
Primary	37.4	8,803	[36.4 - 38.5]	
Secondary	30.6	32,572	[30.1 - 31.1]	
Higher	22.1	8,575	[21.3 - 23.0]	
Don't know	33.0	191	[26.6 - 39.9]	
Husband's alcohol use				
Yes	45.6	16,360	[44.8 - 46.4]	$p < 0.05$
No	27.5	44,120	[27.0 - 27.9]	
Husband's employment status				
Employed	32.7	51,378	[32.2 - 33.1]	$p < 0.05$
Unemployed	30.8	9,102	[29.8 - 31.7]	
Woman's household decision-making power				
Low	40.0	16,542	[39.7 - 41.1]	$p < 0.05$
High	29.3	43,938	[28.9 - 29.8]	
Total		**60,480**		

*All Chi-Square values in this table are statistically significant at level p < 0.05

7. DISCUSSION

Nearly two out of every three women in Asia and the Pacific regions in 2018, experienced IPV in the previous year with the prevalence being 17 %. (21,44)

The current study finding reveals that 32.4 % of currently married women in the reproductive age group in India were subjected to IPV in the last 12 months. The UN report on IPV in India state that 30 % of the women in the same age group have experienced violence by their partner at least once in their lifetime. (34)

IPV remains high in India compared to other countries in the Southeast Asia region such as Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, Bhutan, and Thailand. (44-46)

A majority of the women in the study sample reported physical violence by their partners. However, other forms of violence are not uncommon. Studies from Ghana and China show that women have reported emotional violence more frequently than physical and sexual violence. (47, 48) Differences in socio-cultural contexts between these countries could be the major reason behind these differences.

The results show that IPV varies across the states ranging from 1.1 % to 55 %. The UNFPA[16] 2021 report on IPV in India state that between 2006 and 2016, increases in IPV were noticed in the states of Tamil Nadu, Chhattisgarh, Andhra Pradesh, and Manipur, while decreases were observed in Rajasthan, Kerala, Assam, Arunachal Pradesh, and Tripura. While IPV prevalence decreased only slightly in Bihar it remains the State with the highest prevalence of IPV. (35)

The findings from the present study also show that the states of Uttar Pradesh, Bihar, Madhya Pradesh, Maharashtra, and Karnataka, have a high occurrence of IPV as well as its forms, while states like Lakshadweep, Kerala, Chandigarh, and Nagaland are among the states with the lowest occurrence of past-12-months IPV as well as all four forms of IPV. (Table 3)

Given the social and cultural diversity including geographic variations in female autonomy found in India, the results hold true. (49) Similar studies in the past suggest that factors such as early marriage, women's educational status and alcohol use are the major factors for the lack of female autonomy in some of the states in India. (13)

[16] United Nations Fund for Population (Activities)

One of the reasons for the high rates of IPV in the states of Andhra Pradesh, Karnataka, Bihar and Uttar Pradesh could be the acceptance and justification of wife beating as a punishment for failure to perform household duties. This is seen as a common practice in Dalit and SC/ST women in Bihar and Uttar Pradesh. (50)

Male children who grow up in hostile environments are more prone to act violently toward their partners later in life. (51, 52) This could be a contributing factor to the persistently high rate of violence against women in the states of Tamil Nadu, Andhra Pradesh, Maharashtra, Uttar Pradesh, and Bihar, which have also had some of the highest rates of crime in the country. (53)

According to the literature, IPV is more common in urban informal settlements, and Maharashtra has the greatest slum population in the nation, followed by Andhra Pradesh and Tamil Nadu. As a result, the rates of IPV among women are greater in these regions. (51, 54) However, further research is needed to explain the higher experience of certain forms of IPV in specific states.

Studies on IPV in India show that women's younger age increases the likelihood of experiencing IPV. (16, 19, 35, 36) The prevailing gender-specific roles and hierarchies are one of the reasons for women's exposure to partner violence when she is married at a younger age and enters the household. (26)

However, this study revealed that the experience of IPV is almost the same in all age groups. The growing awareness about violence against older women could have resulted in increased reporting of IPV by women of higher age groups. (5) Further, women who were married at an early age, having high parity, and married for a longer duration among the sample showed to have a higher occurrence of IPV. This is consistent with the findings of IPV in Bihar and Rajasthan, as well as other states in India where early or child marriage was found to be

associated with a higher risk of IPV. (37) Early marriage age and childbearing along with longer marriage duration increase the period of exposure to partners' abuse and controlling behaviour. (36, 38) An increase in the number of births causes an economic burden on the earning member of the household, most commonly the husbands thereby, increasing the level of stress and the likelihood of perpetrating violence against their partners. (36) Another study in Nepal showed that partner violence was lowest in women with no living children. (39)

The findings of this study suggest that IPV did not vary much based on the sex of the firstborn child. A study conducted using NFHS-3 data also shows a similar result. (40) In contrast, findings from other studies show that in deep-rooted patriarchal societies where cultural norms like son preference exist, firstborn daughters are associated with a higher risk of IPV in women. (40,55)

Hence, this study paves way for further research to generate evidence on understanding the extent to which the sex of firstborns is associated with IPV and under what conditions.

A higher rate of IPV in women belonging to rural areas and marginalized castes was found in this study is in line with studies carried out in India and other countries. (16, 36) The UNFPA 2021 report on IPV also states that almost 54 countries across the globe showed a higher rate of IPV in rural women. (56) Scheduled Tribes/ Castes and Other Backward Classes are officially recognized in the Indian Constitution as historically disadvantaged groups where women were at a greater risk of being subjected to any kind of violence compared to those from other caste categories. (16) Respondents belonging to religious minorities reported less IPV which showed a common trend found in previous studies. (19)

Among the sample, those who had no education and those with lower decision-making participation in the family reported higher rates of IPV. Education and employment are seen as a factor in empowering women, thus lowering the risk of IPV in women with high

education levels. (5,16, 35) However, this study showed that IPV was higher in women who were employed. A probable cause for this could be that higher education and economic empowerment in women may threaten partners' dominant position in the family, resulting in violence against women. (12) This may also answer why IPV in women with employed husbands is higher in this study.

Other husband-related factors such as low education levels and alcohol consumption have been shown to increase IPV in women. (16, 23, 36, 42)

8. CONCLUSION

This study has attempted to analyze the extent of violence being faced by women by their spouses, in India

The reported numbers of IPV could be underestimated[17] as the responses to the NFHS domestic violence module are based on woman's self-reported experiences of violence by partners. Despite the limitation, this study has been able to establish a high occurrence of IPV in women in India.

Further, the regional variations in IPV in India point towards emphasizing IPV prevention in the highly IPV-prevalent states, and interventions should be based on the type of violence being faced by the women. Additionally, each type of IPV may have its own correlates, necessitating a different approach to management.

Even though the effects of physical abuse may be more noticeable as compared to the other forms of IPV, equal focus is needed for addressing sexual, and emotional violence, including marital control as they can have detrimental implications on the health and well-being of

[17] Since a large proportion (3,51,926) of currently married women who had been selected for the domestic violence module of NFHS-5, could not be interviewed due to reasons not mentioned and 1.873 women could not be interviewed due to lack of privacy.

women. It is an unfortunate reality that despite advancements made in the fields of women's education, employment and economic empowerment in India, violence against women still persists.

The differences in the experience of IPV in women across various social, and demographic groups and regions in India show that several factors operating within relationships, families, households, and the community influence a woman's exposure to violence by her partner. Thus, it is suggested that a multifaceted approach be used to address the issue of violence against women by their intimate partners.

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ANNEXURE 'A'

Questions asked in the Domestic Violence Module of NFHS-5:

a) In the survey, for measuring **physical violence**, a set of seven questions consisting of "whether her husband ever pushed, shook or threw something at her, twisted her arm or pulled her hair, slapped her, punched her with his fist or something that could hurt her, kicked her or dragged her or beat her up, tried to choke her or burn her on purpose, threatened or attacked her with a knife, gun, or any other weapon" were asked to the women.
b) For measuring **emotional violence**, the women were asked: "whether her husband ever humiliated her in front of others, threatened to hurt or harm her or someone close to her or insulted or made her feel bad about herself".
c) For measuring **sexual violence**, the women were asked "whether her husband physically forced her to have sexual intercourse with him even when she did not want to, physically forced her to perform any other

unwanted sexual acts, forced her with threats or in any other way to perform unwanted sexual acts"
d) For measuring the **controlling behaviour of the male partner**, the questions asked to the women consisted of "whether he was jealous or angry if she talked to other men, frequently accused her of being unfaithful, did not permit her to meet her female friends, tried to limit her contact with her family, insisted on knowing where she was at all times, did not trust her with any money."

*Source**:** National Family Health Survey, India. http://rchiips.org/nfhs/*