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Violence against the "fair sex" in India: Protective measures

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Abstract

Women have often been accorded lower status than men worldwide. In spite of women being educated and competent in jobs, men follow social conventions, traditions and restrictions to control the life of women. Since last two decades violence against female gender has become a prominent and intractable social problem across regional, social and cultural boundaries, causing serious human rights violation in all sectors of the society. 'Violence' is an act carried out with the intention or perceived intention of physically hurting another person. Manifestations of violence include physical violence i.e. assault, burn, sexual abuse and rape; psychological violence i.e. humiliation, coercion, emotional and economic threats and deprivation of resources for physical and psychological wellbeing. Right from conception women face many forms of violence like sex selective abortion, female infanticide, assault, sexual abuse, forced prostitution, rape and so on. According to the global poll, India is the fourth most dangerous country for women. Indian statistics (2011) revealed kidnapping (36.4%), molestation (26.5%), rape (26.1%) and dowry (16.97%) to be the most frequent forms of violence against women. Various psychosocial factors contributing to increased violence are patriarchal society, cultural and ideological factors, LSES, poverty, and personality patterns etc. To curb such dreadful acts, Indian constitution has given provisions like Dowry Prohibition Act 1961, Immoral Trafficking Prevention Act 1956, Sati Prevention Act 1987, Section 375 IPC for rape, Section 312-318 IPC for abortion, Prenatal Diagnostic Technique Act 1988 etc. To prevent violence, legal protection and support of mental health professionals is required to foster the lost identity of the victimized women by methods like crisis intervention, supportive therapy, trauma-focused CBT and support from the community and women welfare society. Finally, violence against women bears the economic brunt in treatment and support of abused women and in bringing perpetrators to justice.

Biography

Jayati Simlai did her M.D. in Psychiatry from Central Institute of Psychiatry, Kanke, Ranchi being the premier institute of the Central govt. of India. It was established in 1918 during the British rule and was meant to cater to European patients. It is a 675 bedded tertiary referral center. She did 3 years of Senior Residency after her post-graduation, followed by 3years of private practice. Subsequently she joined RINPAS as Assistant Professor of Psychiatry and is currently Additional Professor and Head of the Department of Psychiatry. RINPAS is a 500 bedded tertiary referral center, established in 1925. It runs postgraduate courses in Psychiatry, Psychology, Social Work and Nursing. She has numerous national and international publications. She also has keen interest in painting, music and loves travelling.