

Impact of Domestic Violence on Relationships in Karnataka: A Sociological Study

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Abstract:

Domestic violence is a serious social problem that affects the physical safety, psychological well-being, dignity and quality of intimate and family relationships. It includes physical, sexual, emotional, psychological and economic abuse, as well as controlling behaviours. This sociological study examines how domestic violence influences communication, trust, emotional intimacy, decision-making, conflict resolution, parenting, social participation and the continuity of relationships. The study is primarily based on secondary sources, including national survey findings, scholarly research and reports from international organisations. Evidence from India's National Family Health Survey (NFHS-5, 2019–21) indicates that spousal violence remains a significant concern, while research also shows that help-seeking is limited. Domestic violence should not be understood as an ordinary relationship conflict; it is connected with unequal power, coercive control, social norms, economic dependency and institutional barriers. The study discusses the causes, consequences, gender and rural–urban dimensions, legal and institutional responses, and measures for prevention and support. It concludes that healthy relationship management requires equality, consent, safety, accountability, communication and access to survivor-centred services.

Keywords: Domestic Violence, Intimate Partner Violence, Relationship Management, Patriarchy, Family, Gender, Abuse, Help-Seeking, Social Support

Introduction:

Relationships are important social institutions through which individuals experience affection, companionship, emotional support, care and belonging. Marriage and intimate partnerships are often expected to provide security and mutual respect. However, when violence or coercive control enters a relationship, the foundation of trust and equality is weakened. Domestic violence is not limited to visible physical injury. Threats, humiliation, isolation, financial control, sexual coercion, intimidation and monitoring can also damage the autonomy and well-being of a partner. From a sociological perspective, domestic violence must be studied in relation to power, gender socialization, family structure, economic resources, cultural expectations and institutional responses. Traditional patriarchal arrangements may normalize male authority, prioritise family reputation over individual safety, or discourage survivors from seeking help. At the same time, violence can occur in different relationship forms and affects people across social classes, regions, educational backgrounds and economic groups.

Relationship management refers to the everyday processes through which partners communicate, make decisions, negotiate responsibilities, resolve disagreements, maintain emotional connection and respond to each other's

needs. In a healthy relationship, these processes are based on consent, equality and respect. Domestic violence replaces negotiation with fear and control, making genuine relationship management difficult or impossible.

Meaning and Forms of Domestic Violence:

Domestic violence refers to abusive behaviour occurring within a household or intimate/family relationship. It may be committed by a spouse, intimate partner, former partner or another family member, depending on the legal and social context. The main forms include: Physical violence: hitting, kicking, slapping, pushing, burning, choking or using objects to cause injury. Sexual violence: forced sexual activity, sexual coercion, refusal to respect consent, or reproductive control. Emotional and psychological abuse: insults, humiliation, threats, intimidation, constant criticism and deliberate fear creation. Economic abuse: controlling income, restricting employment, taking wages, creating debt or denying access to essential resources. Social and digital control: isolation from family and friends, monitoring phones, restricting movement, stalking or online threats.

Review of Literature

Sociological literature links domestic violence with patriarchy, unequal access to resources and the social acceptance of authority within intimate relationships. Feminist perspectives argue that violence is not simply an individual problem but is also connected with gendered power structures and norms that legitimise control. Studies of family and kinship show that expectations around marriage, obedience, family honour and women's responsibilities may affect how violence is understood and addressed.

Evidence from NFHS-5 and subsequent analyses demonstrates that intimate partner violence in India is associated with multiple individual, household and community factors. A 2024 analysis based on NFHS-5 reported that approximately 31.2% of women experienced domestic violence in the study's weighted estimate, with physical, emotional and sexual violence occurring in different combinations. Another study found that only a small proportion of women facing physical and/or sexual intimate partner violence sought help, with informal family support being more common than formal support.

The literature also emphasises that domestic violence affects health, mental well-being, children's development, economic participation and social relationships. Research on help-seeking indicates that fear, stigma, economic dependency, lack of information, concern for children, pressure from relatives and limited trust in institutions can prevent survivors from reporting violence.

Statement of the Problem

Domestic violence damages the basic conditions required for healthy relationship management. Instead of open communication and shared decision-making, abusive relationships may be characterised by fear, surveillance, threats, manipulation and unequal control over money or mobility. Survivors may experience isolation and may find it difficult to leave because of economic dependency, children, social stigma or lack of support. The central problem of this study is to understand how domestic violence affects relationship functioning and to examine the social factors that allow violence to continue.

Objectives of the Study

- ❖ To explain the meaning, forms and sociological dimensions of domestic violence.
- ❖ To examine the impact of domestic violence on communication, trust, emotional intimacy and decision-making in relationships.

- ❖ To analyse the physical, psychological, social and economic consequences for survivors and family members.
- ❖ To identify social, cultural and economic factors associated with domestic violence and limited help-seeking.
- ❖ To examine legal, institutional and community-based measures for prevention, protection and support.

Methodology Used:

The study adopts a descriptive and analytical sociological approach and is primarily based on secondary data. Sources include the National Family Health Survey (NFHS-5, 2019–21), peer-reviewed research articles, reports by the World Health Organization and UN Women, and relevant Indian legal and institutional materials. The information is analysed thematically under the areas of power relations, communication, emotional well-being, family life, help-seeking, social support and prevention. Since the study is based on secondary sources, it does not claim to represent the experiences of every community or relationship.

Domestic Violence in the Indian Context:

India's NFHS-5, conducted during 2019–21, included a domestic violence module administered to a representative subsample of women aged 18–49. The survey design prioritised privacy and confidentiality. The available evidence indicates that spousal violence remains widespread, although prevalence differs across states and social groups. Comparisons must be made carefully because survey definitions, age groups and measurement periods differ across studies.

A 2024 peer-reviewed analysis using NFHS-5 data estimated domestic violence prevalence at 31.2% in its weighted analysis and identified education, occupation, household conditions, partner characteristics and community-level factors as relevant correlates. The same research reported substantial variation across states, demonstrating that national averages can conceal regional differences.

Research on help-seeking based on NFHS-5 found that only 14.2% of women who had experienced physical and/or sexual intimate partner violence in the analysed sample sought any help. Informal support, especially from natal families, was more common than formal support. These findings indicate that the availability of laws and services does not automatically ensure access, safety or justice.

Factors Associated with Domestic Violence

Gender inequality and beliefs that one partner should exercise authority over the other.

Economic dependency, unemployment, unequal property ownership and financial control.

Alcohol use by a partner, which research identifies as an associated factor but not an excuse or sole cause.

Social acceptance of violence, victim-blaming and pressure to preserve family reputation.

Limited awareness of rights, weak support systems, fear of retaliation and institutional barriers.

Stress linked to poverty, housing insecurity and family conflict; these conditions may increase vulnerability but do not justify abuse.

Rural and Urban Dimensions: Domestic violence occurs in both rural and urban settings. Rural survivors may face barriers involving distance from services, limited transport, community surveillance and dependence on family networks. Urban survivors may experience isolation, insecure housing, migration-related vulnerability and pressures linked to employment or living away from relatives. Neither rural society nor urban society should be

treated as uniform. Access to support depends on local institutions, social networks, awareness and economic resources.

Gender and Relationship Diversity: Women are disproportionately affected by many forms of documented intimate partner violence, but men, transgender people and people in diverse relationships can also experience abuse. A survivor-centred approach should assess the actual pattern of violence and the person's safety rather than rely only on gender stereotypes. At the same time, gender-sensitive analysis remains necessary because social norms and structural inequalities influence risk, reporting and access to support.

Patriarchy and Power: Patriarchy describes social arrangements in which men as a group tend to possess greater authority and control over resources and decision-making. In relationships shaped by patriarchal expectations, one partner may be treated as the decision-maker while the other is expected to obey. Such unequal arrangements can create conditions in which abuse is justified or hidden. Patriarchy does not mean that every man is violent or every woman is powerless; rather, it provides a framework for examining how social structures influence individual behaviour.

Intersectionality: Domestic violence is experienced differently depending on caste, class, disability, age, religion, region, migration status, sexuality, education and access to resources. A survivor who lacks independent income or social support may face different barriers from someone with financial independence and supportive networks. Sociological analysis must therefore avoid treating survivors as a uniform group.

Impact of domestic violence on Relationships:

1.Communication Breakdown:

Healthy communication involves speaking openly, listening, negotiating and respecting disagreement. Domestic violence interrupts these processes because the survivor may fear punishment for expressing an opinion. Conversations may become focused on avoiding the perpetrator's anger rather than solving problems. Silence in such a context should not be interpreted as agreement; it may be a survival strategy.

2.Loss of Trust and Emotional Intimacy

Trust requires predictability, safety and respect. Threats, repeated abuse, deception and controlling behaviour undermine trust and create emotional distance. Survivors may experience anxiety, shame, helplessness or hypervigilance. Even when violence is not occurring, fear of a future incident can prevent emotional closeness and honest self-expression.

3.Unequal Decision-Making

Domestic violence often involves control over household finances, mobility, employment, friendships, clothing, reproductive choices and children's education. This reduces the survivor's participation in decisions and turns partnership into domination. Relationship management becomes one-sided because the abusive partner imposes decisions rather than negotiating them.

4.Conflict Resolution and Coercive Control

Ordinary disagreements can be addressed through discussion, compromise and time apart. Violence is not a legitimate conflict-resolution method. Coercive control makes the survivor responsible for preventing the

perpetrator's anger, while the perpetrator avoids accountability. Couples counselling alone may be unsafe when violence and intimidation are present; safety assessment and survivor-centred support are essential.

5.Effects on Parenting and Children

Domestic violence can affect children even when they are not directly assaulted. Children may witness threats, hear arguments, experience instability or be used as instruments of control. Possible consequences include fear, behavioural difficulties, concentration problems, disrupted schooling and difficulties in forming relationships. Protective responses should prioritise children's safety and avoid blaming the non-abusive parent.

6.Economic and Social Consequences:

Economic abuse can prevent survivors from working, accessing money or leaving an unsafe relationship. Violence may lead to medical expenses, loss of employment, reduced productivity, housing insecurity and dependence on relatives. Social isolation can weaken access to information and support. These consequences show that domestic violence is both a private relationship issue and a wider social and development concern.

Legal and Institutional Responses in India:

India has legal and institutional mechanisms addressing domestic violence and related harms. The Protection of Women from Domestic Violence Act, 2005 provides a civil protection framework addressing physical, sexual, verbal, emotional and economic abuse within covered domestic relationships, including provisions relating to protection orders, residence and monetary relief. Other criminal-law provisions may apply depending on the conduct and facts of a case. Legal interpretation and procedures can change, so individuals should obtain current advice from qualified legal services or authorised support organisations.

Institutional responses may include police services, protection officers, medical facilities, One Stop Centres, legal aid services, counselling services, women's helplines and community organisations. Effective responses should maintain confidentiality where possible, assess immediate risk, avoid blaming survivors, provide accessible information and support informed choices.

Challenges in Prevention and Support:

- Underreporting due to fear, stigma, financial dependency and concern for children.
- Family and community pressure to maintain the relationship regardless of harm.
- Insufficient coordination between police, health services, legal aid and shelter systems.
- Limited awareness of available services and uncertainty about legal procedures.
- Risk of retaliation when a survivor seeks help or attempts to separate.
- Unequal access to safe housing, employment, digital privacy and independent finances.
- Measures for Improving Relationship Management and Prevention
- Promote equality and consent: Families, schools and colleges should teach mutual respect, bodily autonomy, shared responsibilities and non-violent conflict resolution.
- Strengthen early support: Health workers, teachers and community workers should be trained to recognise warning signs and respond safely without forcing disclosure.
- Provide survivor-centred services: Support should prioritise safety, confidentiality, informed choice, emergency care, legal aid and psychosocial assistance.
- Improve economic independence: Skill development, employment opportunities, financial inclusion and access to property and social protection can reduce dependency.

- Engage men and boys: Programmes should challenge harmful masculinity, entitlement and the normalisation of control while encouraging accountability.
- Build coordinated institutions: Police, courts, hospitals, shelters, legal services and local organisations should use referral systems and survivor-sensitive procedures.
- Use media responsibly: Public communication should reject victim-blaming, avoid sensationalism and highlight available support services.
- Protect children: Schools and child-protection systems should identify risk, provide counselling and ensure that children are not used to continue coercive control.

Suggestions:

Domestic violence prevention should be integrated into education, public health, social welfare and local governance. Relationship education should emphasise consent, equality and respectful communication. Community-level programmes should involve women's groups, youth organisations, local leaders and service providers. Institutions must ensure that survivors are not pressured into unsafe reconciliation. Economic and housing support is especially important for people who wish to leave abusive relationships. Data collection should maintain privacy and should include diverse populations and local variations.

Conclusion:

Domestic violence has a deep and damaging impact on relationship management because it replaces equality, trust and mutual negotiation with fear, control and insecurity. Its effects may appear in communication breakdown, emotional withdrawal, unequal decisions, financial dependence, parenting difficulties and social isolation. The problem cannot be addressed only by advising couples to communicate better, because communication is not free when one partner uses threats or violence. A sociological understanding connects domestic violence with power relations, gender norms, economic resources, family expectations and institutional access. Sustainable change requires prevention, survivor-centred services, legal protection, economic empowerment, accountability for perpetrators and transformation of social attitudes. Healthy relationships are built not through control but through safety, consent, dignity, responsibility and shared decision-making.

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