In Madrid in 2002, 150 women marched in the streets wearing their wedding dresses and holding thorns on cushions in protest of violence committed against women by their partners. Experts researching the full extent of domestic abuse worldwide consider they have only examined the “tip of the iceberg”.

Image: Pierre-Philippe Marcou/AFP
intimate-partner violence

On average, 36,000 women in the Russian Federation are beaten on a daily basis by their husbands or partners. In Pakistan, an estimated 90 percent of married women are abused by their husbands. According to a 2002 report approximately 1.8 million women were assaulted by an intimate partner in Spain, of which only 43,000 reported the assault to the police. Eighty-three percent of female homicide victims in the Dominican Republic in 2003 were killed by their current or past spouses or long-term partners. In the United States, a woman is battered, usually by her husband, every 15 seconds. In the United Kingdom, on average 120 women are murdered by their intimate partners each year.¹

Defining intimate-partner violence

Intimate partner violence (IPV) is a phenomenon without cultural, racial or geographic boundaries. Occurring in every country around the globe, it is one of the most pervasive types of violence against women and girls worldwide.² Alternatively referred to as “domestic violence” or “spousal abuse”, intimate-partner violence includes a broad spectrum of harmful behaviours, from physical and sexual violence to psychological cruelty and manipulation. Although some of its aspects are culturally specific — like the prevalence of gun use in intimate-partner homicide in Western countries as opposed to kerosene or acid in parts of Asia — many characteristics of this abuse are remarkably similar.

Physical violence can range from pushing, slapping, arm-twisting or hair-pulling to severe assault and battery. Sexual violence might include forced or coerced intercourse or other sex acts, as well as dictating reproductive-health decisions such as contraception and child-bearing. Psychological cruelty often entails threats and intimidation, humiliation and enforced isolation from friends and family. It can also consist of other controlling behaviours, such as restricting access to money and other resources.

While both men and women may suffer violence by a partner, the “single most powerful risk marker for becoming a victim of violence is to be a woman.”³ Findings from countries as disparate as the United States, India, Colombia, Zambia and China have confirmed that intimate-partner violence is distinctly gender-biased. The rates, the levels of violence and the negative health impacts associated with it are much more significant for women than for men.⁴ According to the World Health Organization (WHO), women are most vulnerable to violence within intimate and familial relationships, whereas men are much more
likely to be attacked by a stranger or acquaintance. Moreover, women suffer the ill effects of IPV disproportionately when compared with men. Research from Canada has found that women are three times more likely than men to be injured as a result of abuse by a spouse or boyfriend, five times more likely to require medical attention or hospitalisation, and five times more likely to report fearing for their lives.

Several triggers for violence that are notably consistent throughout the world include: perceived disobedience of a female partner, suspicions of a female partner’s infidelity, failing to care “adequately” for children, questioning a man about money and refusing sex. In other words, violence often results when a man believes his wife or girlfriend has contravened conventional gender roles. His violence serves to assert and maintain his authority and domination.

Religious doctrine and cultural practices that promote proprietary relationships of husbands to their wives reinforce beliefs that legitimise and perpetuate partner violence. According to one researcher, “Beating a wife to chastise or to discipline her is seen as culturally and religiously justified [in Pakistan]. … Because men are perceived as the ‘owners’ of their wives, it is necessary to show them who is boss so that future transgressions are discouraged.”

In some settings, women have internalised these patriarchal social norms, as evidenced in a comment by a female research respondent in India: “If the woman makes a mistake or if she is unfaithful to him then the husband can beat her. He does have the right to do so because the woman has failed to carry out her work duties properly. Being a man he can get angry quickly and will slap, but then later he will be affectionate so we should not make a big issue of this.”

**The global enormity of intimate-partner violence**

The silence, stoicism and shame of its victims make it difficult to generate reliable estimates of just how prevalent intimate-partner violence is. Even so, a growing body of quantitative research — the majority of it undertaken within the last 10 to 15 years — has contributed to a better understanding of the extent of this problem around the world. Population-based data on domestic violence compiled from 55 countries indicate that in over half of these countries, at least one in every three female survey respondents acknowledged some form of physical violence in the context of an intimate relationship. In approximately 10 of these countries, on average one out of every two women reported physical abuse by a husband or boyfriend.

Research further suggests that those who experience physical violence often suffer multiple acts of aggression that are perpetrated over time. In some cases these incidents are followed by a period of contrition, or at least calm, in which the perpetrator may try to minimise or deny the severity of the violence, or remorsefully promise that it will not happen again. It most instances, the violence is repeated, with greater frequency and intensity. The experience of survivor Ana Christina, from Nicaragua, illustrates the repetitive nature of partner violence: “After the blows, he always came back to court me, bought me clothes. And afterwards, he always said, ‘Forgive me. I won’t do it again.’ But then he always did the same afterwards. And then my grandmother would say to me, ‘Child, what are you going to do with candies in hell?’”

At least two patterns of intimate-partner violence have been identified by the WHO: “Common couple violence”, in which simmering frustrations sporadically manifest themselves through physical aggression, and “battering”, which involves a spiralling escalation of physical violence and psychological terror. Whereas common couple violence is usually a spontaneous expression of frustration or anger, battering is systematic. And although men figure prominently as perpetrators of both types of violence, they are overwhelmingly represented among those who batter. Fear and intimidation are two hallmarks of battering, employed by the perpetrator to establish, re-establish and/or maintain power and control over his partner.

Physical battering may often be accompanied by sexual violence. While an increasing number of governments are adopting laws that recognise marital rape as a crime, forced sex in marriage is not considered a crime in most countries. Lack of legislation on marital rape both reflects and reinforces the presumption of many men, as well as some women, that it is a wife’s obligation to comply with her husband’s sexual demands. In Zimbabwe, for example, a woman who refuses to have sex with her husband risks being “hunted with bad luck” by his spirit after he dies. As a result, and also because of the almost universal cultural prohibitions related to discussing intimate sexual behaviour, sexual violence is even more difficult to investigate than physical violence. Nevertheless,
An eight-year-old boy in the United States shouts at his father as police arrest him for attacking the child’s mother, his wife. For many children, witnessing domestic violence is as traumatic as being victimised themselves. Intimate-partner abuse is a learned behaviour, and for some children it can become part of the vocabulary of relationships they take into adolescence and adulthood.

Image: Donna Ferrato/Network Photographers
A woman in the United States (top) receives treatment for injuries sustained when her boyfriend ran over her with his truck. A doctor examines the tyre marks on her chest.

Image: Donna Ferrato/Network Photographers

In early 2005, Rania-al-Baz (right), a celebrated Saudi Arabian television presenter, was beaten unconscious by her husband during an argument. In an interview, she described the attack: “The next thing I knew he was strangling me. Then he threw me against the wall and banged my head down on the floor. He told me to say the Shahadha (the Muslim prayer of last rites) because I was going to die. I said it and I fainted. The next thing I remember, I was in the hospital.” When al-Baz recovered, she did the unthinkable in Saudia Arabia: She spoke out.

Images: AFP
A man arrested for domestic abuse remonstrates with the reporting officer at a police station in the United States. There are husbands and wives in cultures around the globe who consider male violence against women a normal part of married life.

Image: Donna Ferrato/Network Photographers
emerging data suggest that for women, "ironically, much non-consensual sex takes place within consensual unions."16

In research gathered from nine countries, on average one in five women acknowledged being forced to have sex by her partner.17 Numbers can be significantly higher in select settings: Thirty percent of a sample of women in Bangkok, Thailand; 48 percent in Cusco, Peru; and 59 percent in Ethiopia reported being forced into sex by their partners.18 Evidence from Papua New Guinea and India, where forced sex was reported by one-half to two-thirds of research respondents, indicates that it is often initiated or accompanied by beatings, as one woman in Uganda confirmed:

"My husband would beat me to the point that he was too ashamed to take me to the doctor. He forced me to have sex with him and beat me if I refused. … Even when he was HIV-positive he still wanted sex. He refused to use a condom. He said he cannot eat sweets with the paper [wrapper] on."19

Perhaps the most invisible aspect of intimate-partner violence is psychological violence, though it is likely the most pervasive type of maltreatment that women in violent relationships are made to suffer. Psychological violence includes manipulative or threatening behaviours that are used to instil fear, such as punching walls, killing pets or stalking. It also includes verbal abuse, such as making comments that are derogatory, demeaning or embarrassing.20 The impact of psychological violence can be as debilitating as physical or sexual violence, if not more so, as illustrated in the words of one woman from Nicaragua who suffered ongoing verbal abuse:

"He used to tell me, ‘You’re an animal, an idiot, you’re worthless.’ That made me feel even more stupid. I couldn’t raise my head. I think I still have scars from this. … I accepted it, because after a point, he had destroyed me by blows and psychologically.”21

The implications for women

For several decades, women’s rights activists and researchers around the world have described intimate-partner violence against women as a global human rights violation that undermines women’s integrity, freedom, wellbeing and participation in family and society. It is only in the last 10 years, however, that its serious and pervasive public-health implications have begun to receive international attention. In a 1997 report, the United States Surgeon General concluded that domestic violence poses the single largest threat to all American women — more than rape, muggings and car accidents combined.22 The Council of Europe similarly asserted that this type of violence accounts for more deaths and health complications than cancer or traffic accidents: Violence by partners is the major cause of death and disability for European women aged 16 to 44.23 A recent study of women aged 15 to 44 in Victoria, Australia, identified partner violence as the leading contributor to death, disability and illness, stating that it was "responsible for more of the disease burden than many well-known risk factors such as high blood pressure, smoking and obesity."24

Assault by a partner can result in a wide array of acute physical injuries. A 1998 report from the State Department of the United States indicated that 37 percent of all violence-related emergency-room visits by injured women were the result of physical abuse by a husband or boyfriend.25 It is also a major contributor to chronic disabilities and illness, including a variety of reproductive-health problems.

A number of studies — from Canada, Chile, Egypt, Australia and Nicaragua, for example — have shown a high rate of partner abuse during pregnancy.26 "Sharofat", a woman from Uzbekistan who eventually was abandoned by her husband, recalled the abuse she suffered during her marriage:

"He beat me so hard that I lost my teeth. The beatings happened at least one time each month. He used his fists to beat me. He beat me most severely when I was pregnant. … The first time he beat me, and I lost the baby. I was in the hospital. The second time was only a few days before a baby was born, and my face was covered with bruises. He beat me and I went to my parents. My father refused to take me to a doctor. He said, ‘What will I say, her husband beats her?’ “27

Considering the association between physical violence and pregnancy, it is especially alarming that women who experience partner violence may be more likely to have higher numbers of children. Research in Nicaragua showed that violence was correlated with larger families, but
in most cases its onset preceded the advent of child-bearing. One hypothesis related to these findings is that women in violent partnerships may be less able to exercise control over contraception. A study from India found that unplanned pregnancies occurred more than twice as often in abusive relationships, especially when the violence included sexual abuse.

Physical and sexual violence by an intimate partner also increases the risk of sexually transmitted infections, including HIV. Findings from Rwanda, Tanzania and South Africa demonstrate that women in violent relationships are at up to three times greater risk of contracting HIV than those in nonviolent partnerships. Research by Human Rights Watch in Uganda harshly illustrates this link:

“Hadija Namaganda’s HIV-positive husband raped and beat her viciously during their marriage. During one brutal attack, he even bit off her ear. When he lay dying of AIDS and was too weak to beat her anymore, he ordered his younger brother to continue beating her. Now HIV-positive, Hadija recalled, ‘He used to force me to have sex with him after he became ill. He would accuse me of having other men. He said he would cut me up and throw me out. I didn’t know about condoms. We didn’t use them.’”

HIV infection can be both a cause and a consequence of violence. The husband of one woman from the Dominican Republic told her, “If you have something [a sexually transmitted disease], I will kill you.” Evidence from Africa, where women and girls are the largest and fastest growing risk group for HIV infection, indicates that women who fear reprisals from abusive husbands avoid or delay testing, disclosure and treatment for HIV/AIDS and other sexually transmitted infections.

In its most severe form, intimate-partner violence ends in murder. Approximately 120 women in the United Kingdom are killed each year by a husband or boyfriend. In Zambia, an estimated five women are killed by a male partner or family member each week. Studies from Australia, Canada, Israel, South Africa and the United States have indicated that between 40 percent and 70 percent of women murder victims were killed by their husbands or boyfriends. In the Dominican Republic in 2003, the proportion of femicides committed by an intimate partner was as high as 83 percent.

Even if a woman is not killed by her partner, the fear, helplessness and hopelessness that often accompany violent relationships may lead a woman to attempt suicide. According to the United Nations Children’s Fund (UNICEF), multiple studies — from the United States, Fiji, Papua New Guinea, Peru, India, Bangladesh and Sri Lanka — have illustrated the causal link between suicide and partner violence. A woman who has been abused is up to 12 times more likely to try to kill herself than one who has not. In the United States, 35 percent to 40 percent of battered women attempt to end their lives.

One of the most horrific demonstrations of suicidal behaviour among women victims of partner violence is self-immolation, or setting oneself on fire. Relative to other methods of suicide, self-immolation is unusual in that it is customarily limited to Middle Eastern and Central Asian countries. Like other forms of suicide, self-immolation is not solely or even primarily restricted to women suffering from partner abuse. But when it is related to intimate-partner violence, self-immolation is a very powerful representation of the desperation women feel.

Other repercussions

Women victimised by their partners are not alone in their misery, as their children usually suffer the consequences alongside them. Partner abuse has been shown to increase the risk of infant and early-child mortality and can further contribute to a host of emotional and behavioural problems for children who survive to witness the violence. Studies from Ireland, Mexico and Eritrea indicate that children living in abusive households regularly observe violence. The impact of bearing witness to such acts, according to findings from research in the United States, can be as damaging to a child as direct abuse.

The fallout of domestic violence extends well beyond the households in which the abuse occurs. Providing public health, social welfare and protective services to victims and their children places an enormous financial strain on communities and nations. The indirect and long-term costs associated with increased morbidity and mortality, behavioural problems of children, transgenerational perpetuation of violence, work-related absenteeism and job loss also take their toll on societies.
“Carolina” is a street prostitute in Granada, Nicaragua. She met her husband at a party when she was 15, and they dated for about eight months before getting married. “When I met him he was working as a carpenter. After I had our first son, Brian, he started changing. His friends started hanging out at the house; they were drinking. They brought him into a gang.”

After joining the gang, Carolina’s husband became more abusive: “He hit me, he kicked me. He would leave me half-dead. I almost lost our first baby two times. He would take me to hospital and then he would apologise. I tried to leave a couple of times, but he threatened to kill me. He only hit me when I was pregnant — so I feel his intention was for me to miscarry. He would throw me against the wall, pull my hair. Sometimes he was sober, sometimes he was high. I was pregnant with our second son when I finally left him. I came to Granada when I was eight months pregnant. I couldn’t find work because I had to care for my first baby. Prostitution was the only thing I could do. I had to choose this life. I have been doing this for a year. My mind is blank, and I don’t think about my future.”

Image: Evelyn Hockstein/IRIN
some developed countries such as Canada and the United States, the annual costs associated with IPV have been estimated in the billions of dollars. For developing countries, the measurable costs may be significantly lower, simply because services are not as established or widespread. Even in settings where costs are more difficult to measure, partner abuse has far-reaching consequences. It drains precious existing resources while at the same time handicapping the ability of women and children to contribute to social and economic progress.

Responding to intimate-partner violence

In a study in Eritrea, women who had been beaten and abused by their partners were asked why they did not leave their relationships. Many responses expressed sentiments of powerlessness and futility:

"He wouldn’t accept no. He wouldn’t accept that I was leaving."
"Would I walk away alive?"
"Just the kids — he’ll take them. That’s it, really."
"Where would I live?"
"I was pregnant, and I thought he would hurt the baby and my family."

These women, like others around the world, felt they had no escape from abuse. Their responses reflect some of the dynamics that reinforce intimate-partner violence: fear, poverty, and the lack of legal protection and social support.

Addressing the problem requires an understanding of its basic ecology: the interplay of individual and cultural factors that foster abuse in homes, communities and societies. For this reason, much work has been done in recent years to improve local and international research capacity. In particular, the WHO has spearheaded multicountry studies on intimate-partner violence and, in the process, established global standards for ethical and methodologically sound approaches to investigating violence against women. International demographic and health survey experts also have devised methods to include standardised questions about intimate-partner violence in national-level research around the world. During the last 10 years, the outcomes of these efforts, in addition to the work undertaken by independent researchers and women’s activists, have produced an emerging portrait of the global magnitude of the problem, which in turn has provided an important basis for local, national and international advocacy. Most experts agree that the research conducted thus far has revealed only the tip of an iceberg, especially in developing countries. A considerable amount of work remains, particularly in terms of standardising research methods to improve comparability; investigating what puts women at risk, as well as what protects them from it; and understanding its impact.

The last 20 years of activism on the part of women’s and human rights groups has laid firm the foundation to combat intimate-partner violence. Evidence suggests that in the majority of countries across the globe, there are at least some small efforts being made to identify and address the issue. In some settings, those endeavours are widespread. While strategies vary according to culture, commitment and the availability of resources, almost all involve legislative and policy reform, as well as grassroots initiatives that support women’s rights.

Strategies also seek to build the capacity of health, social-welfare and legal-justice systems to recognise, monitor and respond to IPV and ensure rapid and respectful care of women who have been abused. In addition, international, national and local media campaigns and education programmes have been developed to highlight the impact of intimate-partner violence.

As a result of community mobilisation, education and advocacy efforts, many countries have made progress in introducing legislation against intimate-partner violence, though less so against marital rape. The number of projects that enhance responses to victims, especially in the areas of healthcare and police training, have grown. In some countries, support services include hotlines, safe houses and community centres. Still, too many countries fall short in terms of law enforcement, governmental involvement and access to care. Research repeatedly shows that many victims do not use support services. Whether this is because of lack of access, lack of confidence in services, shame, resignation or fear of retribution, the end result is that many women around the world “suffer abuse silently.” This should act as a clarion call to service providers and activists to evaluate the accessibility and value of victim-support activities. To date, very few programmes have been assessed for their effectiveness. In fact,
monitoring and appraising interventions is one of the crucial steps towards improving local, national and international capacity to address the problem.

In addition, comparatively little attention has been paid to improving prevention efforts. Many of the limited resources dedicated to intimate-partner violence have naturally gone to ensuring the safety and welfare of victims, at both the individual and policy levels. The unfortunate side effect of this approach is that partner abuse “has largely been regarded as a woman’s problem.” While it is critical that women survive and recover from the violence they have suffered, significant additional resources must be earmarked for prevention if societies around the world are to reach the long-term goal of eradicating the problem.

Developing prevention strategies is an area of great promise, particularly with regard to reducing the factors that lead men to act violently towards women. Model programmes for “male involvement” have been initiated in many countries, but their reach and impact is sorely inadequate when compared with the number of men who abuse their partners. And while programmes to engage men are crucial in the fight against intimate-partner violence, effective prevention requires the active engagement of all members of the community — men, women, boys and girls.

The WHO has said the basis for change is the province of future generations, who “should come of age with better skills than their parents generally had for managing their relationships and resolving the conflicts within them, with greater opportunities for their future, and with more appropriate notions of how men and women can relate to each other and share power.”

Winning the worldwide fight against partner abuse requires fundamental social change that supports women’s human rights as well as their equal participation in all relationships, especially those that are most intimate.
“Clementine” is 22 years old and lives in the Democratic Republic of Congo.

“I got married in 2001, when I was 18 years old. I was pregnant, but it was our choice to get married. We had known each other for four years. We went to live with his parents. For me, our time there swung from good to bad. It was hardest with my mother-in-law and sister-in-law, which can be a common problem. Then we moved house. We lived well. My husband was a casual worker for the International Committee of the Red Cross. He lost that job and is now employed as a casual worker for another organization, but he doesn’t work every day. I don’t work — I look after things in the house. We were happy until things changed recently.

“The start of our problems was when he changed friends. He started spending time with boys who go to hotels and bars. When he is spending time in hotels, it makes me angry. The problem is that I have kept quiet about it, and doing so has made me suffer psychologically. I would get hypertension. It made me worry that because of these friends, he may slide into drinking alcohol or being in the hands of women. A friend told me that I shouldn’t let the problem fester, I should open up and talk about it. So I looked for an opportunity.

“On Sunday, 20 February 2005, when we were on the way back from visiting my family, he lied to me and told me he had been called to work. I told him I would continue home. As he went I became suspicious that it wasn’t true. A man later told me he had seen my husband going with friends to a hotel. He told me, ‘They are in there, but don’t go to find him. When your husband comes home, don’t tell him I told you.’ I went home and fell asleep on the sofa.

“My husband came home with a friend at 8 p.m. and asked me what the problem was, why I was sleeping on the sofa. I told him I was feeling bad. I went into the bedroom, and he followed me and locked the door. He held my arms from behind me and said, ‘Now you are getting really familiar with me, and you are following me wherever I go.’ Then he started beating me. He beat me so hard. He pulled me from the bed to the floor and started trampling on me. I tried to hide my face. He used his hands to beat me, his fists and his feet. He beat me for about 20 minutes. I was screaming and screamed so loud when he trampled on my abdomen that his older brother who lives nearby heard me and tried to come in. My husband’s friend who had come back with him told my brother-in-law to leave us alone and let us sort out our problems.

“When my husband heard his brother’s voice, he said, ‘Leave. I will not do anything to my wife.’ I got the strength and managed to open the door. His brother took him outside, and I stayed with my sister-in-law and the friend. I fainted and fell to the ground, hitting my head on the window. The glass smashed, and my husband thought I had broken it. He came back in and said, ‘You have destroyed everything in the house.’ He took a piece of wood and hit me on the head and in the lower stomach. It broke in two pieces. He beat me again so badly. The others were trying to hold him back but it didn’t work. Eventually they managed to hold him off and his brother’s wife took me to her house.

“My husband sometimes forces me to do things. Many times he has forced me to have sex when I haven’t wanted too. He told me the fact that he beat me should not prevent us from having sex. He says it is in the past. He never apologised. He said he didn’t know why he was so angry to the point of beating me, but he also didn’t understand why I had followed him. I am so afraid of him since this happened. His family were angry with him and told him what he did was wrong, but this was when I was there so I am not sure if it was genuine. They told me not to keep grudges. His older brother told me never to tell anyone. He said, ‘This is a common story, so don’t tell it to others. … What one man does to his wife is no one else’s business.’

Image: Georgina Cranston/IRIN
“Maria”, age 27, came to the police station with a black eye after her husband had hit her with a stick. The vision in her left eye is already damaged from previous beatings. “Last night he was drunk. He is a driver for a construction business. Every few weeks he beats me, but every day he verbally abuses me.”

Maria’s husband also beats the two children she has from a prior relationship. At the police station, the officer says, “If you don’t leave him, he will kill you. You have to find a way to get away from him.”

“He threatens to take my children away,” Maria says. “So I am always with my children. What kind of education will he give my children?”
The police captain tells Maria, “You cannot keep bearing that much violence — even if you are a Christian. You are a human being. You need protection. You need your rights to be respected.”

“Last night I told my husband I would go [to the police],” Maria says. “I called the police patrol. They said they would come, but they didn’t.”

Images: Evelyn Hockstein/IRIN
An 18-year-old wife and mother of a four-month-old baby, "Rizufa" lives in Herat, Afghanistan, where many of the oppressions previously suffered by women under the Taliban regime persist. She has been married for a year to a man who beats her regularly. He has hit her with a wooden stick, kicked her and thrown objects at her. One night when she did not prepare dinner on time, he threw something that cut her eye.

When Rizufa was pregnant, her husband bought some meat for her to eat. Her father-in-law heard about it and challenged Rizufa, asking her why they were eating expensive meat when the whole family was so poor. She tried to explain, but her husband was angry that she had answered back and argued with his father. She was beaten for her insolence.

After the beating, Rizufa went to her mother's house to explain her predicament. Her brother said that he wanted to kill Rizufa's husband. The family went to the shura, a traditional court, which sentenced the husband as well as the father-in-law to one month in jail. During this time, she stayed at her mother's house.

When her husband was released from jail, Rizufa had to return to their home. He forbade Rizufa to see her family again, and she did not see them for five months. The separation upset her, and she would sometimes look at family photos as a substitute. One day her husband came home while she was looking at the pictures. He said, “Give me the photo. I will tear it up. I don't like your mother, and you shouldn't either.” He grabbed the photo and tore it up. When Rizufa started to cry, he threatened to kill her if she did not stop. She replied, “You don't have to. I will kill myself.”

When her husband left the room, Rizufa doused herself in kitchen fuel and lit a match. She ran outside in flames, screaming, and he tore off her shirt. He brought her inside and sent for her mother. Her parents took her to hospital.

Later, lying in a hospital bed and covered with burns, Rizufa said she intended to return to her husband. "I have to stay married because of my son. Divorce is a bad thing in our culture, we would rather die."
“Elizabeth” is 17 and pregnant with her second child. She and her husband live with Elizabeth’s mother and have been married for eight months. Her husband hits her when he is drunk, and the beatings usually coincide with the arrival of his monthly paycheck. She is worried that he will kill her someday — he almost did the last time he attacked her.

“I came home from work, and my husband was drunk. Later that evening, he started to insult me. He hit me, and I asked him to respect my mother’s home. My husband said he didn’t care and continued to hit me — on my arms, not my face. Then he grabbed my shirt and punched me twice. I put his clothes in a box, left them outside, and told him he had to leave.

“He stabbed me and ran away. The neighbours caught him — the guy who did almost got stabbed as well. My mother was shouting, ‘He killed my daughter!’ There was a lot of blood — he had perforated my intestines and I had to hold my hand on the wound. When I walked out of the house,
I fainted. They brought me to hospital in a pickup truck. I stayed in hospital for a week, and I lost an ovary. My husband knew that I was pregnant when he attacked me.

“I want the police to keep him under arrest for a while. There is going to be a trial. I feel threatened because if he didn't kill me this time he will kill me the next time. I am worried he will come after the baby and me. We women are alone. There is no one to protect us.”

Elizabeth’s mother, pictured above with a policewoman and a neighbour, witnessed the attack. “Some of us women take these men to the police station. But then the men’s families try to convince us to stop the process.”

Images: Evelyn Hockstein/IRIN