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Complicating narratives of women's food and nutrition insecurity: Domestic violence in rural Bangladesh

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ABSTRACT

A rich body of research confirms a strong association between a mother's exposure to domestic violence and poor nutritional outcomes of her children. However, there is less empirical research on *how* domestic violence impacts nutrition and food security. Two pathways described in the literature are (1) perpetrators withhold food as a form violence or control, leading to poor nutrition of women and (2) women's food preparation and portion allocation trigger "retaliatory" violence by perpetrators. Interviews by community researchers with over 100 women in rural Bangladesh reveal a little documented linkage between violence and food practices in rural Bangladesh. I find that women, in light of the realities and possibilities of domestic violence, weigh choices about food consumption and distribution, often choosing to eat less or lower quality foods. That is, women often demonstrate agentic decision-making in a context of violence, referred to here as "burdened agency." Women traverse and navigate a complex set of relationships between hunger, undernutrition, agency and domestic violence, differing from the two presumedcausal pathways. Recognizing burdened agency can explain how women make decisions around food practices, and why the uptake of certain food security and nutrition interventions may be reduced. © 2017 The Author(s). Published by Elsevier Ltd. This is an open access article under the CC BY-NC-ND

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1. Introduction

This paper shows that rural Bangladeshi women, living in communities with high rates of domestic violence, navigate a complex set of relationships between violence, food, and undernutrition. It argues that engaging with this decision making is critically important for understanding causes and consequences of food and nutrition insecurity, and domestic violence. To make this case, I draw on 110 interviews with women in rural Bangladesh. These interviews show that in some cases, women expose themselves to violence by requesting more to eat. Other women limit their consumption of food or eat less nutritious foods in an attempt to avoid violence, thereby undermining their own nutritional status. Understanding these choices *as burdened decisions* allows us to move beyond narrow binaries and "pathway" approaches to nutrition and domestic violence and opens a broader discussions of the ways that women navigate abuse and hunger in rural households.

Much of the literature linking violence and nutrition implicitly conceptualizes women living with violence as falling into one of two categories. First, there are heroic individuals who leave, thereby eliminating the risk of violence-related health and nutrition effects. Second, there are passive survivors of violence who remain in violent relationships, exposing themselves to hunger and nutritional risk. This binary of "women who exit" and "women who stay" erases most types of agency.¹ Many women in rural Bangladesh live with domestic violence, particularly as there are few viable options to exit violent marriages (Schuler, Bates, & Islam, 2008; Kabeer, 2011; Bellows, Lemke, Jenderedjian, & Scherbaum, 2015). As Bellows et al. (2015) note, "Rural domestic violence might be tolerated by women as a lesser danger than poverty and social isolation" (p. 1208).

Yet, a framing of passive suffering versus active exit limits our capacity to understand more complicated relationships between domestic violence and food and nutrition security. Moreover, it also risks closing off potential avenues for more effectively engaging women's nutritional issues through policy and programming interventions. In contrast to this "two-victim paradigm," I examine the ways that women living with domestic violence demonstrate agency, albeit "burdened" (Meyers, 2011). Women in highly constrained environments make choices that help them navigate violence but that also affect their own nutrition and food security. These strategies, not well-documented in the existing literature,

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¹ This binary is not uncommon in broader debates, contemporary and historical, over gender (e.g., Mani, 1987).

reveal the complex tradeoffs women make and the limitations they face.

To better understand these strategies, I partnered with a Bangladeshi civil society organization, Nijera Kori, to undertake community-based research. We trained landless laborers (both women and men) who are Nijera Kori members in qualitative, ethnographic community research techniques. The community researchers subsequently conducted 134 interviews with residents of their own communities about intra-household relations around food and gender. As these interviews show, women's decisions around family and personal nutrition reveal a complex and occasionally violent terrain that cannot be understood through the binary of passive suffering or exit.

2. Literature

Often, food security (e.g., reduced coping strategies index) and nutritional outcomes (e.g., household dietary diversity scores) are measured at the household-level using proxy variables even though individual-level measures are more appropriate (Jones, Ngure, Pelto, & Young, 2013). When studies do address individual outcomes, most, though not all, focus on child nutritional status rather than that of women (e.g., see Smith & Haddad, 2015). Focusing on the status of women helps to identify crucial possibilities for improving both their lives and nutritional access (Bellows & Jenderedjian, 2016).

Many Bangladeshi women live at the intersection of violence and food and nutrition insecurity. In Bangladesh, 30 percent of women experience chronic energy deficiency (lower than normal body mass) (Ahmed et al., 2012). As of 2007, 61 percent of Bangladeshi women report experiencing domestic violence at least once in their lives (Fakir, Anjum, Bushra, & Nawar, 2016).² Much of the research on the intersection between nutrition and domestic violence examines the correlates of violence and the effects of violence on health and nutrition outcomes. Domestic violence can have lasting effects on nutrition and health. Yount, DiGirolamo, and Ramakrishnan (2011), for example, review studies of children's exposure to domestic violence, finding some evidence that violence against women contributes to adverse nutritional outcomes for their children (see also Sethuraman, Lansdown, & Sullivan, 2006; Ackerson & Subramanian, 2008; Asling-Monemi, Naved, & Persson, 2009; Dalal, Rahman, & Jansson, 2009). There is less evidence addressing women's own nutritional and food security outcomes, and much of the evidence on health and violence is associational rather than causal (Temmerman, 2015).

A rich, primarily quantitative literature explores the correlates and or triggers of domestic violence and intimate partner violence (IPV) in South Asia.³ Weitzman (2014) identifies several risk factors associated with domestic violence in India, including a married woman's age, education and earning relative to her partner, and alcohol usage by her partner. Rao (1997) finds low dowries associated with abuse. He points out that in South India, some people perceive IPV as a legitimate response to spousal "misbehaviour", such as neglecting cooking duties. Researchers have also considered the role of economic factors in mitigating or exacerbating violence. Bhuiya, Sharmin, and Hanifi (2003) indicate that, in Bangladesh, microcredit loans can increase the odds of violence (see also Cons & Paprocki, 2010). Agarwal and Panda (2007) argue that in India while evidence of employment status and violence is mixed, property status provides an important deterrent to violence. Women with property have opportunities to exit the relationship, because they literally have somewhere to go. More broadly, in a 44-country study, Heise and Kotsdam (2015) find domestic violence is higher in countries with structural factors, such as norms about justified wife beating and male authority over females and laws, that disadvantage women's access to land and property. Notably, most of this literature is associational. A recent exception is a study by Hidrobo and Fernald (2013) that finds, in a randomized control trial in Ecuador, that cash transfers have differential effects on violence, based on the relative levels of education of women and their partners.

2.1. Pathways between violence and nutrition

The literature on violence and nutrition raises two common potential pathways—simple causal relations between two events—by which violence against women affects nutrition of either children or their mothers (See Fig. 1). In the first, food preparation, the division of food, and or lack of food triggers violence (Rao, 1997). Jeffery, Jeffery, and Lyon (1989) describe, in rural Uttar Pradesh, a "man who suspects his wife of withholding food or purposely making it unattractive is likely to beat her" (p. 56). Hartmann and Boyce (2013 (1983)) quote one woman who links hunger with violence: "when my husband's stomach is empty, he beats me, but when it's full, there is peace" (p. 120). Bellows et al. (2015) document retaliatory violence against women for food that is burned, not tasty, or otherwise not prepared to the expected standard. It is important to clarify that burning food, for example, is a "trigger" (or excuse) – not a cause – of violence.

The second pathway involves withholding food as part of a broader set of violent practices that cause adverse nutritional outcomes (Ackerson & Subramanian, 2008; Dalal et al., 2009; Yount et al., 2011; Bellows et al., 2015). Ackerson and Subramanian (2008) write, "Perpetrators of domestic violence often use several types of power ... [such as withholding of food] to control behavior of their family members." (p. 1192). Bellows et al. (2015) write, "Household power over food is shown to be exercised to punish women" (p. 1199). The punishment of women can, in severe cases, have direct nutritional effects; an inadequate amount of food to eat over a long enough time can lead to undernourishment. Violence can also lead to stress, depression, and adverse physiological and psychological outcomes for women and their children, which can indirectly affect nutrition.⁴

Much of this literature is comprised of cross-sectional quantitative studies of associations (Temmerman, 2015). Thus, the pathways linking nutrition and domestic violence are often hypothesized rather than observed or reported. One consequence of hypothesizing pathways is the tendency to understand correlations emerging from cross-sectional work as causal. Discussions of how women negotiate their domestic spaces are absent, undoubtedly because women's agency is hard to discern in quantitative work. Even when using the more agentic language of survivors,⁵

² Ziaei, Naved, and Ekström (2014) find that about 50 percent of women with at least one child experience domestic violence during their lives; United Nations Statistics (2015) reports that as of 2011, 67 percent of Bangladeshi women have experienced sexual and or physical violence by their partners. For comparison, globally, 35 percent of women have experienced domestic violence (UN Women, 2015).

³ Intimate partner violence (IPV) refers specifically to violence against women by their partners. Domestic violence, more broadly, includes violence perpetrated by any household member.

⁴ Even when food is not directly withheld, residing in violent households can harm health and wellbeing (Temmerman, 2015). The psychological stress of living in a violent household can induce physiological changes in women that can exacerbate malnutrition (Ackerson & Subramanian, 2008; Sethuraman et al., 2006). Psychological stress and depression can also result in poor care practices and risky behaviors (Yount et al., 2011). These pathways involve changes that are not directly observable, and I focus on the two pathways described above.

⁵ Mirroring the broader literature on domestic violence, literature on domestic violence and nutrition tends to describe women as "survivors," recognizing that women who stay in violent relationships have a continuum of agency (Dunn, 2005a, 2005b). Nonetheless, few nutrition and violence studies focus on day-to-day practices of agency by survivors.

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