

Role of Gender in Intimate Partner Violence in India: A Systematic Review

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ABSTRACT

This systematic review explores the impact of gender on the manifestation of intimate partner violence (IPV) in India. It looks at 45 empirical studies conducted within the years of 2005 and 2025 to assess temporal shifts in victimization, perpetration, help-seeking behaviour, as well as regionally and by gender responsive pattern's institutional response classification. The analysis shows that most occurrences of IPV disproportionately impact women, even though male victims and those identifying with LGBTQ+ are often hidden due to stigma. Social conditioning around masculinity as well as institutional beliefs contributes significantly toward the IPV's prevalent acceptance and occurrence. The evaluation underscores the urgent need to adopt responsive and inclusive approaches integrating sensitive outreach frameworks tailored to both genders addressing community mental health law infractions is critical in devising solutions for IPV in Indian societal context.

Keywords: *Intimate Partner Violence, Gender, India, Masculinity, Victimization, Help-Seeking*

Intimate Partner Violence (IPV) refers to any behaviour within an intimate relationship that causes physical, psychological, or sexual harm to those involved. Economic deprivation, psychological abuse, controlling behaviours, sexual coercion, and physical aggressiveness are all included in this (WHO, 2021). IPV reaches all socioeconomic, ethnic, and religious groups and can happen in same-sex or heterosexual relationships. IPV is acknowledged as a widespread public health issue on a global scale, but local sociocultural and gendered circumstances have a significant impact on its prevalence, form, and community response. The extent and character of intimate partner violence (IPV) in India are shaped by structural injustices, patriarchal norms, and traditional gender roles that define the expectations and lived experiences of people in intimate relationships.

GENDER AS A VARIABLE: BEYOND BIOLOGICAL SEX

“Gender” refers to the duties, actions, expectations, and social standards that are attributed to people based on their perceived sex, whereas “sex” refers to the biological distinctions between males and females. Gender is a crucial factor in IPV because it influences how

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Role of Gender in Intimate Partner Violence in India: A Systematic Review

violence is experienced, perceived, reported, and dealt with in addition to determining who is more likely to be a victim or perpetrator. Socially created power dynamics are a part of gender, with femininity being linked to endurance, nurturing, and submission and masculinity being linked to strength, dominance, and control (Connell, 2005).

These gendered expectations are not just theoretical constructs; they actively shape real-life power imbalances in relationships. For instance, men may internalize a sense of entitlement to control their partners, while women may be socialized to tolerate abuse as part of their marital duties. Importantly, gender is not limited to the binary of male and female-it also includes individuals who identify outside this spectrum, such as transgender or non-binary people, who often face unique vulnerabilities in intimate relationships. However, Indian IPV research has predominantly focused on heterosexual male-female dynamics, and this review aims to critically explore how gender, as a socially constructed system, contributes to IPV patterns and perceptions in India. These gendered expectations actively influence power disparities in relationships in real life; they are not merely theoretical ideas. For example, women may be conditioned to accept abuse as a necessary part of their marital responsibilities, while males may internalize a sense of entitlement to control their relationships. Crucially, gender encompasses more than just the binary of male and female; it also includes persons who identify as non-binary or transgender, who frequently experience particular vulnerabilities in close relationships. However, heterosexual male-female relations have been the main focus of Indian IPV research. This review attempts to critically examine how gender, as a socially constructed system, influences IPV patterns and perceptions in India

IPV IN THE INDIAN SOCIOCULTURAL CONTEXT

Patriarchal customs, hierarchical family structures, and gendered ideas of honour all have a significant impact on India's sociocultural fabric and together influence the dynamics of intimate partner violence. In many Indian cultures, women are supposed to be submissive, selfless, and family-oriented, while men are considered the heads of the home and have financial and decision-making authority. IPV can flourish and go unchecked because of this societal model of male dominance and female submission.

The dowry system, in which women are frequently seen as financial liabilities, is one well-known cultural institution that supports gender inequality and IPV. A variety of abuses, from verbal abuse to deadly violence, have been connected to noncompliance with dowry demands (Bhattacharya & Shukla, 2014). Furthermore, because speaking out is viewed as bringing shame to the home, the idea of "family honour" frequently results in the silencing of women who encounter IPV. Reporting and seeking assistance are further discouraged by stigma, victim-blaming, and a lack of community support. Another critical factor is the role of caste, religion, and rural-urban divides in shaping experiences of IPV. For example, women from marginalized castes may face intersecting layers of discrimination, both within their relationships and in access to legal or psychological support. While urban women might have better access to services, they may still face intense familial or societal pressure to remain in abusive relationships, especially when children or in-laws are involved. The Protection of Women from Domestic Violence Act (PWDVA), 2005, and Section 498A of the Indian Penal Code, which makes cruelty by husbands or in-laws a crime, are examples of progressive legal reforms that have been implemented inconsistently. Law enforcement frequently opposes women or puts pressure on them to "adjust" and make amends. In addition, although while the law acknowledges women as the principal victims, same-sex partners, male victims, and non-binary people are frequently left out of the legal and scholarly discourses.

RATIONALE FOR THE REVIEW

Few studies have critically addressed the crucial role that gender plays in influencing these experiences, despite the fact that several official papers and studies have documented the incidence and patterns of IPV in India. The majority of the literature now in publication either treats gender as a binary variable or only discusses males as the perpetrators and women as the victims. This method ignores the complexity of IPV interactions and runs the risk of perpetuating limited gender stereotypes, although being legitimate in light of the overwhelming statistics on women's victimization. According to recent research, IPV can occur in both directions, with both partners participating in abusive behaviours, though frequently for different reasons and with distinct outcomes (Archer, 2000).

Furthermore, not enough attention has been paid to the psychological aspect of IPV, which includes how gender norms affect emotional abuse, psychological control, and behaviour related to seeking treatment. Additionally, there is a dearth of synthesis that incorporates Indian empirical data, cultural contexts, and psychological theories. A thorough examination of the ways in which gender interacts with IPV in terms of victimization, perpetration, legal reaction, psychological impact, and access to support networks is urgently needed given the complexity and diversity of Indian society. This study intends to identify the structural and psychological elements that normalize, maintain, or confront IPV in India by examining the body of existing literature through a gender perspective. Developing gender-sensitive legislation, culturally appropriate psychiatric treatments, and inclusive legal frameworks that acknowledge the variety of IPV experiences all depend on this kind of investigation.

METHOD

The PRISMA 2020 standards (Page et al., 2021) were followed in conducting this systematic review, guaranteeing an open, reproducible, and methodologically sound synthesis of the body of existing research. With a particular focus on how gender affects victimization, perpetration, reporting, and help-seeking behaviours, the review's goal was to investigate the role of gender in intimate partner violence (IPV) in the Indian setting.

Search Strategy

Several electronic databases, including PubMed, PsycINFO, JSTOR, IndMED, and Shodhganga, were searched extensively for relevant material. These platforms were chosen to include peer-reviewed research from around the world as well as dissertations and gray literature unique to India. The search was conducted in 2025 from February to April. A combination of Boolean operators (AND/OR) and Medical Subject Headings (MeSH) terms was used to enhance search sensitivity. The keywords used included:

- “intimate partner violence”
- “IPV”
- “gender”
- “India”
- “masculinity”
- “femininity”
- “violence against women”
- “psychological abuse”
- “IPV perpetrators”

An example of a search string used in PubMed:

Role of Gender in Intimate Partner Violence in India: A Systematic Review

(“intimate partner violence” OR “IPV”) AND (“gender” OR “masculinity” OR “femininity”) AND (“India”) AND (“psychological abuse” OR “violence against women” OR “IPV perpetrators”) Search results were exported to Zotero for citation management and duplicate removal.

Inclusion Criteria

Studies that satisfied the following requirements were added to the review:

1. Publication Date: Research that was released between January 2005 to April 2025.
2. Study Type: Empirical study, such as full-text doctoral or master's dissertations, peer-reviewed journal publications, and qualitative, quantitative, or mixed-methods studies.
3. Geographic Focus: Performed with Indian populations or in an Indian context.
4. Topical Relevance: Included gender-specific findings, such as variations in experience, perception, or response by gender, and concentrated on intimate partner violence (IPV).
5. Language: English is the published language.

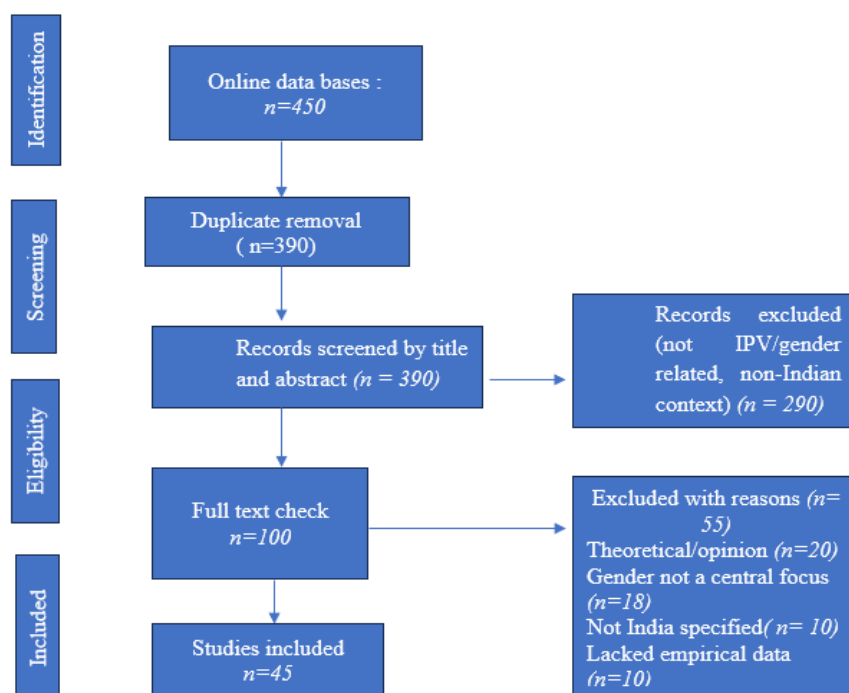
Exclusion Criteria

Studies that satisfied any of the following requirements were not included in the review:

1. Not particularly focused on Indian actors or systems, or carried out outside of the Indian environment.
2. Opinion pieces, conference abstracts, editorials, theoretical essays, and commentaries that lack primary empirical evidence.
3. Research that made a passing reference to gender or IPV without providing gender-specific analysis or conclusions.

Selection Process

The identification, screening, eligibility, and inclusion of studies were recorded using a PRISMA model. There were four steps in the selection process:



Role of Gender in Intimate Partner Violence in India: A Systematic Review

1. **Identification:**

Total of 450 articles identified through database searching such as PubMed ($n = 145$), PsycINFO ($n = 102$), JSTOR ($n = 85$), IndMED ($n = 40$), Shodhganga ($n = 78$). 390 records were there after duplicates removed.

2. **Screening:** After removing duplicates, titles and abstracts were screened for relevance.

Records screened by title and abstract ($n = 390$)

Records excluded (not IPV/gender related, non-Indian context) ($n = 290$)

3. **Eligibility:** Full texts of the remaining articles were assessed against the inclusion/exclusion criteria.

Full-text articles assessed for eligibility ($n = 100$)

Full-text articles excluded, with reasons ($n = 55$)

4. **Inclusion:** Final studies included in the review were those that met all eligibility requirements and provided gender-disaggregated IPV data relevant to the Indian context. Studies included in qualitative synthesis ($n = 45$)

RESULT

A total of 45 studies met the inclusion criteria and were included in this systematic review. The findings were synthesized using a thematic analysis approach, which allowed the identification of recurring patterns across the literature concerning the role of gender in IPV in India. The analysis revealed five major interrelated themes:

Gendered Patterns of Victimization and Perpetration

A recurring theme in the studied literature was that IPV disproportionately affects women. Research has repeatedly documented high rates of economic control, emotional abuse, sexual coercion, and physical violence committed by male partners. Sociocultural norms about economic dependency, family honour, and subordination have been found to make women particularly vulnerable in marriage (Kalokhe et al., 2016; Sarkar, 2010). The National Family Health Survey (NFHS-5, 2021) revealed that approximately 29% of ever-married Indian women had experienced some form of IPV. Psychological abuse, though less visible, was prevalent in the form of isolation from family, verbal threats, and gaslighting-leading to long-term emotional distress.

Emerging evidence suggests that male victimhood exists, especially in the form of psychological and emotional abuse, even though the majority of the literature has been on female victimization. However, societal shame, fear of emasculation, and authorities incredulity are the main reasons why these cases are so underreported (Singh & Saini, 2015). Since admitting abuse goes against societal expectations of masculinity, men are frequently discouraged from doing so.

Masculinity and Male Perpetration

The literature highlights that one of the main causes of male-perpetrated IPV is the cultural construction of masculinity. Being a man is often associated with being a provider, protector, and authority figure in Indian contexts. Men may turn to violence as a way to regain control

when these roles are questioned, whether as a result of infertility, unemployment, or growing female autonomy (Verma et al., 2006).

Numerous studies have connected seeing parental violence, unresolved childhood trauma, and alcohol abuse-which is frequently accepted as a masculine vice in society-to IPV perpetration. Even while marital rape and coercion are still underreported and poorly prosecuted because of legal loopholes, research also indicated that sexual entitlement-the idea that males have an automatic right to sex within marriage-was a significant contributing factor (Bhattacharya & Shukla, 2014). Masculinity in the Indian context is also closely tied to honour. Any perceived slight to a man's authority, particularly if made public, may provoke aggressive or punitive behaviours toward female partners. This culture of honour-based violence often leads to physical assault or public shaming of women who are seen as "disobedient" or "dishonourable".

Female Perpetration and Bidirectional Violence

Despite being less well-documented, research has shown that women can also commit IPV, typically through emotional manipulation, psychological abuse, and, in certain situations, physical revenge. Rather than being proactive, this violence was frequently characterized as defensive or reactive. For instance, women retaliated when they felt helpless in a relationship or after being exposed to abuse for an extended period of time (Chakraborty & Sanyal, 2017).

Male allegations are minimized or ignored, nevertheless, because of the widespread cultural skepticism in the likelihood of female perpetration. This perpetuates the idea that males are the aggressors and women are the victims. In addition to preventing males from getting assistance, these preconceptions also inhibit the legal and psychological institutions from providing fair assistance.

Bidirectional violence, in which both partners commit abusive acts, was observed in some high-conflict relationships, especially those including substance addiction, financial hardship, or poor educational attainment. However, because of the power disparity and higher intensity of violence committed by men, researchers also advised against comparing male and female perpetrators.

Gender Roles and Help-Seeking Behaviour

The way that IPV survivors sought help was greatly impacted by gender norms. Fearing societal rejection, family dissolution, and financial instability, women frequently put off or avoid getting help. Further discouraging reporting abuse are cultural beliefs that elevate female resilience and selflessness. According to studies, many women only seek assistance when the abuse affects their children or becomes life-threatening (George & Krishnan, 2013).

In contrast, men are less likely to report IPV or seek therapy. Their apprehension about being mocked, disregarded, or perceived as weak prevents individuals from reporting abuse, particularly emotional or psychological assault. Law enforcement occasionally made fun of males who reported abuse or advised them to "man up", which further exacerbated their psychological suffering and isolation (Singh & Saini, 2015).

In the mainstream literature, transgender people and people in same-sex relationships-where IPV is also prevalent-were hardly mentioned. Deep social stigma, a lack of institutional support, and legal non-recognition make their efforts to get aid even more difficult.

Systemic and Institutional Gender Bias

Significant evidence of institutional bias in India's legal, medical, and psychological response systems was discovered during the review. Women's protection was deemed to depend on laws like the Protection of Women from Domestic Violence Act (PWDVA), 2005, and Section 498A IPC (cruelty by husbands/in-laws). Critics countered that these frameworks are gender-asymmetrical, ignoring the perspectives of men or LGBTQ+ people and concentrating mostly on female victims (Rastogi, 2018).

A number of investigations documented how police and medical personnel treated people based on their gender. Even in abusive situations, women were frequently pressured to get back together, while men's grievances were usually disregarded. Despite being statistically justified, courts and family therapy centers have a tendency to presume male culpability and female innocence, which might impede justice in unusual circumstances.

It was also shown that mental health practitioners lacked training in gender-sensitive treatment, frequently perpetuating rather than questioning social norms. For instance, male offenders were not always held responsible for actions based on cultural norms, while women were frequently advised to put up with abuse in order to maintain family harmony.

DISCUSSION

This systematic review explored how gender shapes the dynamics of intimate partner violence (IPV) in India, focusing on patterns of victimization and perpetration, cultural constructions of masculinity and femininity, help-seeking behaviour, and systemic responses. The findings confirm that gender is not only a key organizational factor in IPV experiences but also a lens through which they are viewed, socially manufactured, and institutionally controlled. Through the synthesis of many research carried out over the last 20 years, this review adds to a thorough, culturally informed understanding of the gendered aspects of IPV in the Indian setting.

The review confirms that IPV in all of its manifestations—physical, sexual, psychological, and economic—disproportionately affects women in India, in line with international research (WHO, 2021). However, underreporting and normalization of abuse occur as a result of the societal acceptance of female endurance, shame, fear, and economic dependence. Though they are frequently delegitimized by strict gender stereotypes, the review also revealed new narratives of male victims and bidirectional violence, even though male perpetration is still prevalent. This is a reflection of the “gendered discourse of violence,” as defined by Dobash and Dobash (2004), in which men are portrayed as active agents of violence and women as passive victims.

A more complex, non-dichotomous perspective of IPV is encouraged by the recognition of female-perpetrated IPV, particularly when it occurs in the context of psychological abuse or self-defense. The severity, frequency, and motivation of violence must not be equated between the sexes, though. Although bidirectional violence may occur, Archer (2000) contends that because of current power imbalances, its effects are frequently more harmful to women.

The findings indicate a close relationship between IPV perpetration in India and hegemonic masculinity (Connell, 2005). In order to justify power and domination over female companions, men are culturally expected to be providers, guardians, and disciplinarians. Violence becomes a way to regain control when these roles are threatened by sexual

Role of Gender in Intimate Partner Violence in India: A Systematic Review

rejection, female independence, or unemployment. The gender role strain theory (Pleck, 1981), which holds that anxiety, annoyance, and violence might result from not living up to internalized masculine ideals, is also supported by the review.

According to Bandura's (1977) social learning theory, people imitate actions they see in their early years, particularly if those behaviours are rewarded or normalized in their social environment. These findings support this hypothesis.

In the Indian setting, asking for help is highly gendered. Fears of social rejection, financial reliance, and the stigma associated with “broken families” deter women from reporting IPV. However, males who are abused—especially emotionally or psychologically—often internalize it out of fear of being mocked or dehumanized. This is consistent with gender schema theory (Bem, 1981), which postulates that people's behaviour—including remaining silent in the face of abuse—is shaped by their conformity to socially reinforced notions of masculinity and femininity.

The heterogeneous bias of contemporary research and practice is demonstrated by the nearly complete lack of LGBTQ+ voices in the evaluated literature. Despite not having institutional recognition, legal protections, or community support, transgender people and same-sex partners frequently experience intimate partner violence. This disparity emphasizes how future IPV research and therapies must use intersectional approaches (Crenshaw, 1991). Women have benefited greatly from legislative reforms like the Protection of Women from Domestic Violence Act of 2005 and Section 498A of the Indian Penal Code, but these laws also exhibit a gendered institutional focus that frequently leaves out male victims and LGBTQ+ survivors. According to the findings, regardless of the specifics of each case, law enforcement, the legal system, and mental health systems frequently perpetuate gender stereotypes in which males are always viewed as the culprits and women as the victims.

Implications

- Expand legal definitions of IPV to include psychological, economic, and same-sex partner violence.
- Introduce gender-neutral provisions alongside gender-sensitive laws to address underrepresented victims.
- Promote state-funded counselling services that are inclusive of men and LGBTQ+ individuals.

Further Scope of the Research

- More studies are needed on male and LGBTQ+ victims of IPV, using both qualitative and quantitative methodologies.
- Future research should adopt intersectional frameworks, considering caste, class, region, and religion in gendered IPV experiences.
- There is a need for longitudinal studies on the psychological impact of IPV and how gender roles evolve in the Indian context.

LIMITATIONS

This review is limited by the exclusion of non-English literature, potentially omitting relevant regional-language research. The heterogeneity of study designs and definitions of IPV may also impact the generalizability of findings. Furthermore, the underrepresentation of LGBTQ+ and male victims in existing research creates a partial picture of IPV in India.

CONCLUSION

This review shows how gender is a fundamental factor in determining how IPV is experienced, perpetrated, and dealt with in India. Systemic bias, societal stigma, and cultural norms around masculinity and femininity all play a part in the persistence and concealment of IPV in all of its manifestations. The results urge a more inclusive, intersectional, and evidence-based approach to comprehending and addressing IPV, even as legal and psychological support systems have changed to meet the needs of women. Moving toward a future where all IPV victims, regardless of gender identity, can receive justice, protection, and psychological healing requires acknowledging the flexibility and complexity of gender roles rather than rigidly sticking to binary classifications.

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Role of Gender in Intimate Partner Violence in India: A Systematic Review

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Conflict of Interest

The author(s) declared no conflict of interest.

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