



ADDRESSING DOMESTIC VIOLENCE AGAINST WOMEN IN SRI LANKA: A REVIEW OF EVIDENCE-BASED PRACTICES

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ABSTRACT

Domestic violence, particularly intimate partner violence (IPV), constitutes a pressing public health issue in Sri Lanka, affecting approximately one in three women during their lifetime (World Health Organization, 2021). This review synthesizes evidence-based interventions from global contexts, adapting these practices to the unique socio-cultural dynamics of Sri Lanka. The analysis encompasses literature from 2014 to 2024, categorizing interventions into community-based programs, trauma-informed care, legal advocacy, economic empowerment, and culturally sensitive practices. A notable finding highlights the effectiveness of community-driven initiatives, such as engaging local leaders to challenge patriarchal norms, which have reduced IPV rates by up to 15% in pilot programs (United Nations Population Fund, 2018). The review also identifies systemic barriers, including a 40% gap in accessible support services in rural areas, limited social work resources, and weak legal enforcement (Jayatilleke et al., 2020). Practical recommendations for social work professionals emphasize implementing culturally tailored practices, expanding capacity-building initiatives, enhancing legal advocacy frameworks, and promoting economic empowerment programs to support survivors and prevent IPV. This study offers actionable insights for social workers, policymakers, and community leaders, fostering collaborative efforts to develop comprehensive strategies that mitigate domestic violence and promote survivor well-being in Sri Lanka.

KEYWORDS: Domestic Violence, Intimate Partner Violence, Evidence-Based Practices, Professional Social Work, Context-Specific Intervention

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Introduction

Domestic violence, particularly intimate partner violence (IPV), has far-reaching impacts on individuals, families, and society. IPV is a pervasive form of abuse that undermines the mental, physical, and social well-being of survivors and contributes to an ongoing

cycle of trauma and socioeconomic disadvantage (Guruge & Khanlou, 2004). The issue of domestic violence remains pressing in Sri Lanka, a country with complex socio-cultural dynamics where gendered power imbalances are often normalized. Despite progress in education, economic development, and women's rights, the prevalence of IPV reveals that many women remain vulnerable in their own homes (De Mel, Peiris, & Gomez, 2013). This study provides a comprehensive review of existing evidence-based interventions for addressing IPV, with a focus on adapting global practices to fit the unique socio-cultural realities of Sri Lanka.

Domestic violence in Sri Lanka is a significant public health and human rights issue, with substantial impacts on women's health and social stability. According to the Sri Lanka Demographic and Health Survey (2016), 17% of married women aged 15 to 49 reported experiencing violence from intimate partners (Department of Census and Statistics, 2016). The Women's Wellbeing Survey (2019) further reveals that 21.4% of women have endured physical violence, while 9.7% reported sexual violence (Ministry of Women and Child Affairs, 2019). Together, these findings underscore that nearly a quarter of women have suffered one or both forms of abuse at the hands of a partner. By comparison, IPV prevalence rates in neighboring South Asian countries such as India and Bangladesh range between 25% and 30%, indicating that IPV is a pervasive issue throughout the region (UN Women, 2021). These statistics highlight not only the prevalence of IPV but also the often-hidden nature of such violence in patriarchal societies like Sri Lanka.

The pervasive cultural norms in Sri Lanka contribute significantly to IPV's entrenchment in society. Patriarchal ideologies, traditional gender roles, and societal expectations create an environment where men often assert dominance over women, sometimes through violence. These cultural structures not only condone but, at times, encourage male authority within the family, positioning women as subservient and submissive (De Mel et al., 2013; Jayasuriya, Wijewardena, & Axemo, 2011). As a result, many women internalize this subordination, making them reluctant to report abuse or leave abusive relationships. Fear of stigmatization, economic dependence, and societal pressure further discourage women from seeking help, particularly in more conservative and rural communities (De Mel et al., 2013).

Survivors of domestic violence in Sri Lanka face unique challenges exacerbated by economic, social, and legal barriers. These include limited access to social support systems, inadequate legal protection, and economic dependency on abusive partners (Abeykoon, 2016). Although Sri Lanka has introduced laws to protect women from violence, enforcement remains weak due to systemic inefficiencies, lack of awareness, and limited resources (Rajapakse, 2020). In many instances, police officers and legal personnel lack training on handling domestic violence cases sensitively, which can lead

to re-traumatization of survivors and discourage them from pursuing justice (Rajapakse, 2020).

Social and economic factors also play a substantial role in keeping women trapped in abusive relationships. Economic dependence on abusive partners often prevents women from leaving violent situations, especially if they lack the financial resources or employment skills necessary to support themselves independently. Sri Lanka's social services are limited, with few shelters or rehabilitation centers available for survivors (Abeykoon, 2016). In urban areas, where social networks may be less robust than in rural settings, women may find themselves isolated, lacking the community support crucial for escaping abusive environments (Rajapakse, 2020).

Professional social workers are crucial for providing support and interventions for IPV survivors, yet the field in Sri Lanka remains under-resourced and faces many limitations. Social workers are often the first line of contact for survivors seeking help, yet many practitioners in Sri Lanka lack specialized training in trauma-informed care, gender sensitivity, and culturally relevant intervention strategies (De Mel et al., 2013). Funding constraints further limit the reach and scope of social work programs, and available interventions are often not tailored to meet the specific needs of Sri Lankan women (Rajapakse, 2020).

The gap in evidence-based, culturally relevant interventions in Sri Lanka hinders effective support for IPV survivors. Although some global best practices exist, not all are suitable for the Sri Lankan context due to cultural and systemic differences. For instance, Western models that emphasize individual autonomy and empowerment may not align with the collectivist values predominant in Sri Lankan society. Therefore, there is a need to adapt global interventions to Sri Lanka's socio-cultural environment, considering factors such as family dynamics, community engagement, and religious influences (Yount & Carrera, 2006).

Given the challenges and cultural dynamics unique to Sri Lanka, it is imperative to adopt evidence-based interventions that have been successful in similar socio-cultural settings. For example, community-based approaches that engage local leaders and community members have proven effective in other South Asian countries, where community endorsement can legitimize support for IPV survivors and challenge patriarchal norms. Trauma-informed care is another critical component, focusing on understanding the long-term psychological impacts of IPV and providing services that promote healing without re-traumatizing survivors (Laisser et al., 2011).

This study categorizes interventions into five main areas: community-based programs, trauma-informed care, legal advocacy, economic empowerment, and culturally sensitive

practices. Each intervention is evaluated based on its feasibility, potential impact, and adaptability to Sri Lanka's socio-cultural landscape. By examining interventions that engage communities, promote economic independence for women, advocate for policy change, and provide legal support, this review aims to propose a set of recommendations for social work professionals, policymakers, and community leaders. These recommendations emphasize not only the implementation of evidence-based practices but also the importance of adapting these practices to respect and respond to the specific needs of Sri Lankan women.

Purpose and Contribution of the Study

The purpose of this review is to bridge the gap in existing research by synthesizing global evidence-based practices and proposing culturally sensitive recommendations for addressing IPV in Sri Lanka. By integrating insights from international best practices with the lived experiences of Sri Lankan women, this review aims to create actionable strategies for social workers and associated professionals. Furthermore, it seeks to contribute to policy development, offering recommendations that can inform national frameworks for IPV prevention and support.

In addition, this study provides a roadmap for social workers, community leaders, and policymakers, advocating for a multi-faceted approach to IPV that is comprehensive, culturally relevant, and sustainable. Emphasizing collaboration between social workers, community members, and local authorities, the proposed strategies highlight the need for a concerted effort to dismantle the societal structures that perpetuate IPV. Through a combination of education, community engagement, economic empowerment, and policy advocacy, Sri Lanka can make meaningful steps toward reducing domestic violence and supporting survivors.

Objectives of the Study

1. To synthesize existing evidence-based practices for reducing domestic violence against women, drawing on successful interventions from global contexts that can be adapted to Sri Lanka.
2. To provide practical recommendations for social work professionals to implement these adapted interventions across diverse community and institutional settings in Sri Lanka.

Methodology

The study is based on Secondary sources a literature search was conducted to identify scholarly articles from peer-reviewed journals published between 2013- 2023 The

search utilized databases such as Scopus, Sage Google Scholar, focusing on domestic violence interventions, social work practices, and their impact on reducing violence against women. Key search terms "domestic violence," "social work interventions," and "evidence-based practices" were used in various combinations. Inclusion criteria emphasized studies with measurable impacts, and clear measurable outcomes, particularly contextual relevance to the Sri Lankan setting (Ali et al., 2016; De Mel, Peiris, & Gomez, 2013; Jayasuriya, Wijewardena, & Axemo, 2011) or similar settings. Exclusion criteria ruled out studies lacking clear evaluation metrics, articles not in English, and research focused solely on legal reforms. The analysis involved thematically categorizing interventions into areas such as community-based programs, trauma-informed care and counselling, legal advocacy, economic empowerment, and culturally sensitive practices.

Randomly selected 03 articles were reviewed here and each intervention's effectiveness was evaluated based on reported outcomes, with special attention to strategies successful in similar socio-cultural settings.

Discussion and Analysis

The interventions discussed in this paper emphasize the need for culturally adapted, evidence-based strategies that account for the unique socio-cultural context of Sri Lanka. This analysis synthesizes primary intervention strategies: community-based programs, trauma-informed care, legal advocacy, economic empowerment, and culturally sensitive practices and juxtaposes them against the findings from three foundational studies: Danis (2013), Heffernan (2014), and Tam (2015). This comparative framework enhances our understanding of IPV intervention effectiveness in varying socio-cultural contexts and its implications for Sri Lanka.

Community-based programs have been widely effective in addressing IPV by situating interventions within local social structures. In Sri Lanka, these programs are invaluable due to the strong influence of family and community networks. Danis (2013) emphasizes the importance of awareness programs led by social workers, reflecting Sri Lanka's potential for IPV intervention through community collaboration. In regions with patriarchal traditions, such as Sri Lanka, support from religious and community leaders can be transformative. However, the challenge lies in ensuring the sustainability of such programs, as Danis's findings highlight the need for consistent, long-term investment, which is often constrained by Sri Lanka's resource limitations. Moreover, community-based approaches may encounter resistance in patriarchal settings, where norms that perpetuate IPV may be deeply ingrained.

Trauma-informed care prioritizes the psychological well-being of IPV survivors by ensuring services are delivered with sensitivity to survivors' trauma histories. While Danis (2013) underscores the role of social work in providing survivor-centered support, Heffernan (2014) highlights the importance of institutional frameworks that enable trauma-informed responses. In Sri Lanka, however, the scarcity of mental health professionals trained in trauma-sensitive approaches presents a significant barrier. Tam's (2015) approach in China, where cultural stigma around mental health is carefully navigated, offers valuable lessons for Sri Lanka. Community education programs could help demystify trauma care and foster a supportive environment for survivors to seek psychological assistance without fear of social judgment. However, addressing entrenched stigma requires coordinated efforts over time, potentially delaying the immediate impact of such programs.

Legal advocacy is crucial for providing IPV survivors with access to justice and protective measures. Danis (2013) and Heffernan (2014) highlight the role of social workers in guiding survivors through judicial processes and ensuring they are informed about their legal rights. In Sri Lanka, systemic barriers such as inadequate legal infrastructure, delays in the judicial process, and insensitivity among law enforcement hinder survivors' access to justice. Heffernan's findings suggest that training for legal personnel could improve system responsiveness, but this requires significant resource allocation and institutional reform. Implementing community-based paralegal services, as noted by Danis (2013), could provide accessible legal information. However, the challenge lies in ensuring these services are culturally appropriate and effectively coordinated with community leaders to avoid backlash or misuse.

Economic empowerment enables IPV survivors to gain independence and leave abusive relationships. Studies, including Tam's (2015) work in China, demonstrate that economic empowerment improves survivors' financial autonomy, self-efficacy, and bargaining power. In Sri Lanka, vocational training and microfinancing programs are critical to addressing the economic dependency that often keeps women in abusive situations. However, scalability is a challenge due to resource constraints. Partnering with local NGOs and integrating economic initiatives within existing social services, as Heffernan (2014) suggests, could mitigate these challenges. Nevertheless, the effectiveness of such programs depends on consistent funding and monitoring to prevent misuse or inequitable access.

Culturally sensitive practices adapt intervention strategies to fit the unique values of a society while ensuring that harmful norms are not reinforced. Tam's (2015) model in China demonstrates improved outcomes when interventions engage family and community perspectives. Sri Lanka's collective orientation suggests similar potential for success. However, as Tam (2015) notes, cultural adaptation must avoid perpetuating

patriarchal structures that contribute to IPV. In Sri Lanka, this balancing act requires clear guidelines and oversight to ensure interventions prioritize survivor well-being while respecting cultural values.

The reviewed interventions indicate that an integrated, multi-faceted approach is essential for addressing IPV effectively in Sri Lanka. Social work professionals, policymakers, and community leaders must collaborate to create sustainable support systems, combining community engagement, legal advocacy, economic empowerment, and culturally sensitive practices. The insights from Danis (2013), Heffernan (2014), and Tam (2015) provide valuable frameworks for adaptation. Danis emphasizes social workers' role in awareness and support, aligning with the need for community engagement in Sri Lanka. Heffernan underscores the importance of institutional support, highlighting the relevance of capacity-building for Sri Lanka's under-resourced social work sector. Tam demonstrates how cultural sensitivity can improve intervention outcomes, offering a model for Sri Lanka to adapt carefully.

Limitations and Challenges

While the global practices discussed provide valuable insights, adapting these interventions to Sri Lanka presents challenges. Resource constraints, cultural stigma, and systemic barriers such as inadequate mental health infrastructure and inefficiencies in the legal system—may limit the immediate effectiveness of these strategies. Additionally, patriarchal norms and resistance from certain community groups could impede implementation. These challenges highlight the need for pilot programs to test interventions, continuous capacity-building efforts, and sustained advocacy for systemic reforms to ensure long-term success.

This analysis underscores the importance of capacity-building within Sri Lanka's social work and legal frameworks to deliver comprehensive support for IPV survivors. By drawing on global best practices and tailoring them to the Sri Lankan context, this paper provides a foundation for developing contextually relevant interventions to improve the safety, well-being, and empowerment of women across the country.

Conclusion

To address IPV effectively in Sri Lanka, it is essential to create a holistic support system that respects cultural contexts, builds professional capacity, strengthens legal support, empowers survivors economically, and provides accessible mental health services. By learning from global best practices and adapting them to Sri Lanka's unique socio-cultural landscape, these recommendations can foster safer communities, empower survivors, and reduce the prevalence of IPV. A committed, integrated approach involving

government agencies, social work organizations, and local communities will be instrumental in bringing about lasting change in the lives of survivors. Key policy priorities should include enhancing legal protections, expanding access to trauma-informed care, and scaling up economic empowerment initiatives to enable survivors to achieve independence. Future research should focus on evaluating pilot programs that adapt these interventions to Sri Lankan settings, identifying barriers to implementation, and developing culturally sensitive metrics to assess intervention outcomes.

Furthermore, addressing domestic violence in Sri Lanka requires multifaceted strategies that consider cultural, geographic, and economic challenges. By drawing on evidence-based practices from similar settings and tailoring them to Sri Lanka's context, social workers can foster significant change. Collaborative efforts among social workers, policymakers, and community leaders are essential to establish effective, sustainable interventions that support survivors and promote societal transformation.

This integrated and evidence-driven approach not only addresses the immediate needs of IPV survivors but also lays the foundation for a long-term reduction in IPV prevalence. By investing in research, policy reform, and community engagement, Sri Lanka can build a more equitable and supportive environment for survivors, ensuring their safety, dignity, and empowerment.

References

- Abeykoon, A. (2016). *Social services in Sri Lanka: Gaps and challenges*. Colombo: Ministry of Social Welfare.
- Ali, T. S., Asad, N., Mogren, I., & Krantz, G. (2016). Intimate partner violence in urban Pakistan: Prevalence, frequency, and risk factors. *International Journal of Women's Health*, 8, 187–196. <https://doi.org/10.2147/IJWH.S92389>
- Danis, F. S. (2013). Social work response to domestic violence: Encouraging survivor-centered approaches. *Journal of Interpersonal Violence*, 18(4), 356–370.
- De Mel, N., Peiris, P., & Gomez, S. (2013). *Broadening gender: Why masculinities matter. Attitudes, practices and gender-based violence in four districts in Sri Lanka*. CARE International Sri Lanka.
- De Mel, N., Peiris, P., & Gomez, S. (2013). *Gender-based violence in Sri Lanka: Scope and responses*. Colombo: ICES.
- Department of Census and Statistics. (2016). *Sri Lanka demographic and health survey 2016*. Colombo.

- Guruge, S., & Khanlou, N. (2004). Intimate partner violence: A global review of research and interventions. *World Health Organization*.
- Heffernan, K. (2014). Institutional responses to intimate partner violence: A comparative study of policy and practice. *Social Work Quarterly*, 22(3), 245–260.
- Jayasuriya, V., Wijewardena, K., & Axemo, P. (2011). Intimate partner violence against women in the capital province of Sri Lanka: Prevalence, risk factors, and help-seeking. *Violence Against Women*, 17(8), 1086–1102. <https://doi.org/10.1177/1077801211417151>
- Jayasuriya, V., Wijewardena, K., & Axemo, P. (2011). Intimate partner violence in Sri Lanka: A case study of structural violence and women's vulnerability. *Social Science & Medicine*, 73(4), 435–442.
- Jayatilleke, A. C., Yoshikawa, K., & Senanayake, S. (2020). Barriers to accessing support services for intimate partner violence survivors in Sri Lanka: A qualitative study. *BMC Women's Health*, 20(1), 1–12.
- Laisser, R. M., et al. (2011). Trauma-informed care for survivors of intimate partner violence. *BMC Public Health*, 11, 871.
- Ministry of Women and Child Affairs. (2019). *Women's wellbeing survey 2019*. Colombo.
- Perera, H. S., & Gunawardena, N. (2019). The role of community engagement in addressing patriarchal norms: Case studies from Sri Lanka. *Asian Journal of Social Work*, 7(2), 34–48.
- Rajapakse, C. (2020). Barriers to effective implementation of domestic violence laws in Sri Lanka. Colombo: Legal Aid Commission of Sri Lanka.
- Tam, W. K. (2015). Culturally tailored interventions for IPV in China: Lessons learned. *Asian Social Work Review*, 19(1), 112–126.
- UN Women. (2021). *Regional overview of intimate partner violence in South Asia*. New Delhi.
- United Nations Development Programme (UNDP). (2022). *Economic empowerment programs as pathways to reducing gender-based violence*. New York: UNDP.
- United Nations Population Fund (UNFPA). (2018). *Ending intimate partner violence: Pilot interventions in South Asia*. New York: UNFPA.
- World Health Organization (WHO). (2021). *Violence against women prevalence estimates, 2018*. Geneva: WHO.
- Yount, K. M., & Carrera, J. S. (2006). Domestic violence against women in developing countries: A systematic review. *World Health Organization*.