

builder, advocate and most importantly, connected to hundreds of families and thousands of young people of all description of disability, labels, medical, social and cultural, has not come across a collection of essays such as these. While generic in nature, they are specific to our culture;

they are analytical, yet deeply sensitive and empathetic; theoretical, yet practical in giving leads and directions. It is commendable that the editor and the erudite authors have identified so deeply with a human condition from which profound lessons are yet to be learnt.

## Feminist counselling and domestic violence in India

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**Padma Bhate-Deosthali, Sangeeta Rege, Padma Prakash. *Feminist counseling and domestic violence*. India: Routledge; 2013. pp 352 ISBN 978-04-158-3206-9 Rs 895.00**

Very rarely does one get to review a book that's a first of its kind! By bringing together the themes of domestic violence and feminist counselling, this book has filled a vacuum in the Indian literature on feminist interventions, in particular, feminist counselling practices. It emphasises the need for a feminist praxis in counselling for domestic violence within the Indian context. The ease and simplicity with which the book flows is delightful, as is the evident link between theory and the lived experiences of women. The passage of the Protection of Women from Domestic Violence Act (PWDVA), 2005, which was a result of the concerted efforts of women's movements for a comprehensive law to prevent domestic violence, is an important milestone as far as challenging domestic violence is concerned. The book, however, drives home the point that laws alone cannot ensure that women will stand up to violence effectively. It is just as important to encourage them to recognise unjust power structures, assist them in challenging this oppression and stand by them through their difficult journey; and this is the goal of feminist counselling. The book stresses the fact that patriarchy cannot be ignored while dealing with the issue of violence.

A constant thread running through the book is the differentiation between mere "counselling" and "feminist" counselling in the context of domestic violence. Mainstream counselling approaches typically ignore larger societal attitudes, power relations and gender issues. Feminist counselling, on the other hand, places individual distress within a framework that acknowledges these power relations and, in turn, legitimises women's experiences. Thus, feminist counselling shifts the focus from women's psychological/physical suffering and demographic contexts to the broader issues of patriarchy, power and social-political-cultural structures, which devalue women and their experiences.

The book is divided into four parts and begins with a well articulated and in-depth history of domestic violence in India. While the issue of women's rights was taken up by activists as early as the 19th century, it was only in 1983, after

intense campaigning by women's groups across the country, that domestic violence was officially recognised as a crime by the Indian state. Since then, numerous support groups, shelters, crisis centres, legal interventions and counselling services have mushroomed across the country for survivors of domestic abuse. This section deals exhaustively with key concepts, such as patriarchy, gender and feminism, and will be useful to interventionists who are unable or unsure of how to incorporate feminism into everyday interventions for domestic violence. It also explains the cycle of domestic violence, adapting it to the Indian context. The book gives examples of experiences from the field to delineate the challenges and ethical complexities faced by interventionists dealing with domestic violence. Most importantly, however, it highlights the fact that domestic violence is a public health issue, in terms of the long- and short-term physical, psychological and sexual problems that it causes. Most health professionals are not trained to recognise, or ignore, visible signs of violence among their female patients. It is important to note that the health system may be the first point of contact for victims of violence and, therefore, medical professionals can play a critical role in initiating early interventions. Caste, class or gender biases, in addition to persisting with the belief that domestic violence is a "private" issue, play a significant role in preventing timely intervention by health professionals.

The second part of the book documents Indian models of feminist practice related to domestic violence. It traces how the interventions in this sphere have undergone several changes in the last three decades. The 1980s saw the rise of autonomous women's groups, who made pioneering efforts to bring the issue of domestic violence before the public and challenged the rising rate of dowry deaths. Counselling involved the victim speaking out about the abuse and garnering mass support. Following this, in the 1990s, there was an increase in the number of organisations that expanded their scope of work to include the generation of income by the victim, sexual and reproductive health, and issues related to communalism. These organisations worked with both urban and rural communities. In addition, there emerged a few organisations that worked directly with the State, demanding accountability with respect to issues relating to violence, including (but not limited to) legal reform and shelter homes. This section

of the book then goes on to give specific examples of how psychotherapeutic models of intervention can be used within a feminist framework to ensure that the survivors of violence are equipped with the emotional resources necessary to stand up for themselves.

The third section deals broadly with issues related to intersectionality. Women are oppressed in myriad ways by the various axes of power in society: caste, class, gender, sexual orientation, religion, marital status and location. Feminist counsellors must not only be aware of this diversity, but must also remain alert to the possible power relations inherent in the ensuing counsellor–counselee relationship. Moreover, since patriarchy manifests itself differently for women across the variables mentioned above, counsellors have to individualise their strategy for each woman, instead of following a general therapeutic approach.

The last section of the book focuses on the quality of counselling, the training of counsellors and the need to establish indicators to monitor counselling. In addition, organisations need to be equipped to provide support to the counsellors themselves so as to prevent burnout and facilitate sharing. This section also gives an empirical account of guidelines on setting up a crisis centre for domestic

violence. This covers setting standards for counselling, ensuring the safety of the staff, interfacing with referral agencies, documentation, and interaction with researchers and the media.

This book provides a much-needed critique of mainstream counselling in the field of domestic violence, and more importantly, offers an alternative feminist perspective by interlinking theory and praxis in a way that is relevant to the diversity of women's lived experiences. By attempting to conceptualise feminist interventions in the field of counselling and documenting the existing practices across India, the authors display a strong commitment to expanding feminist literature in the Indian context. The book also gives us a clear picture as to how and why the various "actors" involved in cases of domestic violence against women, ie judges, protection officers, non-governmental organisations, social workers and health professionals, need to understand feminist counselling and incorporate it in their approach. Thus, by producing knowledge that has emerged from people's lives, knowledge that challenges the existing ways of "knowing" and "doing", this book can potentially inspire significant change, especially in the existing approaches to counselling victims of domestic violence.

## Feminism and ethics of care

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**Kanchana Mahadevan, *Between femininity and feminism: colonial and postcolonial perspectives on care*, New Delhi: Indian Council of Philosophical Research and DK Printworld, 2014. Rs 600.**

This book adds to – or, to be more accurate – draws upon the enormous body of feminist writing that has emerged around the "ethics of care" after the publication of Carol Gilligan's path-breaking *In a different voice*. Scholarship in this field has been conspicuously interdisciplinary, benefiting from distinguished contributions from psychology, sociology, political science, philosophy, history, literature, and law and jurisprudence. This ambitious book provides a survey of parts of this debate, such as that around Gilligan's work, and the tension between justice and care, as addressed in the work of Susan Okin. It attempts a re-reading of de Beauvoir and places her closer to the advocates of the integration of perspectives on care and justice. The book also attempts to participate in the reformulation of the notions of autonomy and justice from the perspective of care, but without Eurocentric assumptions.

The book examines the "the struggle between femininity and feminism" in the work of feminist thinkers, namely Pandita Ramabai, Mary Wollstonecraft, Carol Gilligan, Susan Okin, and Simone de Beauvoir. The debate on the ethics of care provides

an anchor for this effort. The early chapters focus on the work of Pandita Ramabai and Mary Wollstonecraft, arguing that given the colonial and elitist constructions of the notion of domestic care and feminine care-giving during their lifetimes, they could only treat it with suspicion. The later chapters focus on three prominent feminist theorists, namely Gilligan, Okin, and de Beauvoir, placing them, especially Gilligan, quite questionably to my mind, in "a non-patriarchal and postcolonial context". Since the specific meaning attributed to the latter term here is not clarified, the former remains the leading term that determines meaning. The question that strikes the reader at the outset is whether this framing – "the struggle between femininity and feminism" – is not a catch-all that may be too broad to yield any new insight. Nevertheless, there is an effort to capture the feminist articulation of the ethics of care, the feminist dilemmas in integrating care and justice, and possibly, through a re-reading of Simone de Beauvoir, an effort to place the concern with care at the heart of second-wave feminism. The book ends in a conclusion that considers the possibilities of non-Eurocentric, global feminism. Here a major argument is that the emphasis on care in feminist theory of western origin should not fail to take into consideration the fact that the larger burden of care-giving now falls on the non-western woman care-worker. An effort to undo the deep inequalities