Pattern of Alcohol Consumption and Its Impact on Domestic Violence: A Study of Sikkim

A Dissertation Submitted

To

Sikkim University



In Partial Fulfillment of the Requirement for the

Degree of Master of Philosophy

By

Passang Lepcha

Department of Peace & Conflict Studies & Management School of Social Sciences

February, 2017
Gangtok, Sikkim-737102



DEPARTMENT OF PEACE & CONFLICT STUDIES & MANAGEMENT SCHOOL OF SOCIAL SCIENCES SIKKIM UNIVERSITY

[A Central University established by an Act of Parliament of India, 2007]

DECLARATION

I hereby declare that the dissertation "Pattern of Alcohol Consumption and Its Impact on Domestic Violence: A Study of Sikkim" submitted to Sikkim University in partial fulfillment of the requirements for the degree of Master of Philosophy is my original work. This dissertation has not been submitted for any other degree of this University or any other University.

Passang Lepcha

Registration No: 15/M.Phil/PCM/02

Roll No: 15MPPC03

The Department recommends that this dissertation be placed before the examiner for evaluation

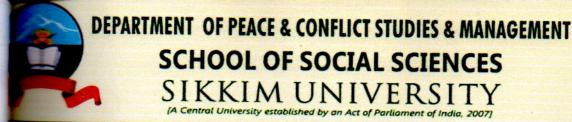
Dr. N.K Paswan

Head of the Department

eace and Conflict
Manageme
Falaga
Joiversity

Dr. N.K Paswan

Supervisor



PLAGIARISM CHECK CERTIFICATE

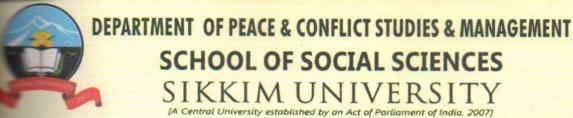
This is to certify that plagiarism check has been carried out for the following M.Phil dissertation with the help of **URKUND** software and the result is within the permissible limit decided by University.

"Pattern of Alcohol Consumption and Its Impact on Domestic Violence: A Study of Sikkim"

Submitted by Passang Lepcha under the supervision of Dr. Nawal K. Paswan of the Department of Peace and Conflict Studies and Management, School of Social Sciences, Sikkim University, Gangtok 737102, INDIA

Signature of the Candidate

Counter signed by the Supervisor



CERTIFICATE

This is to certify that the dissertation entitled "Pattern of Alcohol Consumption and Its Impact on Domestic Violence: A Study of Sikkim" submitted to Sikkim University for the award of the degree of Master of Philosophy in Peace and Conflict Studies and Management, embodies the result of bona fide research work carried out by Passang Lepcha under my guidance and supervision. No part of the dissertation is submitted for any other degrees, diploma, associate-ship and fellowship. All the assistance and help received during the course of investigation have been deeply acknowledged by her.

Dr. Nawar K. Paswan

Supervisor

Department of Peace & Conflict Studies & Management School of Social Sciences

Sikkim University

CONTENTS

| | Page. No |
|--|-------------|
| Acknowledgement | i |
| List of Tables | ii |
| List of Figures | iii |
| Abbreviations | iv |
| CHAPTER 1: INTRODUCTION | 1 -13 |
| 1.1 Background | 1 |
| 1.2 Review Of Literature | 4 |
| 1.2.1 Impact of Alcohol Consumption in Global Perspective | 4 |
| 1.2.2 Relationship Between Alcohol Consumption and Domestic Violence | 6 |
| 1.2.3 Pattern of Alcohol Consumption in Sikkim and Northeast Region in India | 8 |
| 1.3 Rational And Scope of the Study | 10 |
| 1.4 Research Objectives | 10 |
| 1.5 Research Questions | 11 |
| 1.6 Hypothesis | 11 |
| 1.7 Research Methodology | 11 |
| 1.8 Organisation of The Study | 12 |
| 1.9 Limitation of The Study | 13 |
| CHAPTER 2: ALCOHOL CONSUMPTION AND DOMESTIC VIOLENCE | 14 - 47 |
| 2.1 International Laws and Policies on Alcohol Consumption | 14 |
| 2.2 National Laws and Policies on Alcohol Consumption | 14 |
| 2.3 State Laws and Policies on Alcohol Consumption | 19 |
| 2.4 Domestic Violence | 24 |
| 2.5 Theoretical Perspectives | 26 |
| 2.5.1 Patriarchy Theory | 27 |

| 2.5.2 Psychological Theories | 28 |
|--|---------|
| 2.6 Types of Domestic Violence: Physical, Sexual and Psychological | 29 |
| 2.6.1 Physical Violence | 29 |
| 2.6.2 Sexual Abuse | 30 |
| 2.6.3 Psychological Assaults | 30 |
| 2.7 International Laws on Domestic Violence | 33 |
| 2.7.1 UN Treaties on Domestic Violence | 33 |
| 2.7.2 UN Resolution on Domestic Violence | 37 |
| 2.7.3 UN Conference Documents on Domestic Violence | 39 |
| 2.7.4 Beijing Conference | 41 |
| 2.7.5 The Un Special Rapporteur | 42 |
| 2.7.6 State Responsibility For Domestic Violence | 42 |
| 2.8 National Laws on Domestic Violence | 42 |
| 2.8.1 Provision Under Constitution Law | 42 |
| 2.8.2 Provision Under Criminal Law | 44 |
| 2.8.3 Civil Law Relating to Domestic Violence | 44 |
| 2.8.4 The special Law or the Protection of Women from Domestic Violence Act 2005 | 45 |
| 2.9 State Laws on Domestic Violence | 47 |
| CHAPTER 3: THE PATTERN OF ALCOHOL CONSUMPTION AND PRODUCTION IN INDIA | 48 - 62 |
| 3.1 Introduction | 48 |
| 3.2 The Alcohol Consumption in North East India Scenario | 53 |
| 3.3 Pattern of Alcohol Consumption and Production in Northeast India Statewise | 54 |
| 3.3.1 Arunachal Pradesh | 55 |
| 3.3.2 Assam | 56 |
| 3.3.3 Manipur | 59 |
| 3.3.4 Meghalaya | 59 |

| 3.3.5 Mizoram | 60 |
|---|---------------|
| 3.3.6 Nagaland | 61 |
| 3.3.7 Sikkim | 61 |
| 3.3.8 Tripura | 61 |
| CHAPTER 4: PATTERN OF ALCOHOL CONSUMPTION AND ITS IMPAC ON DOMESTIC VIOLENC: A STUDY OF SIKKIM | CT 63 - 82 |
| 4.1 Socio Economic Profile of the Respondents | 63 |
| 4.2 Impact of Alcohol Consumption in Sikkim | 68 |
| 4.3 Impact of Alcohol Consumption on Domestic Violence in Sikkim | 72 |
| 4.4 Relationships between Alcohol Consumption and Domestic Violence | 76 |
| 4.5 Plans and Policies Related to Alcohol Consumption and Domestic Violence | 78 |
| CHAPTER 5: CONCLUSION | 83 - 87 |
| 5.1 Major Findings of the Study | 85 |
| 5.2 Few Recommendations | 86 |
| BIBLIOGRAPHY | 88 |
| ANNEXURE | 93 |

ACKNOWLEDGEMENT

It's a great pleasure to acknowledge and thank all the people who one way or the other helped me to complete this Dissertation leading to the Degree of Master of Philosophy. First of all, let me thank all my teachers especially Dr. Salvin Paul and Dr. Sanghamitra Choudhury for their contributions through my M.Phil degree. I would like to thank Dr. Nawal Kishor Paswan for his intellectual inspiration, unwavering support, encouragement and friendliness. This study would not have been completed without the support of those who helped me during the field work.

A great deal of credit goes to the people who helped me and encouraged me throughout my work Sherap Gyamcho Bhutia, Pemki Bhutia, Phusmsem Bhutia, Yangchen Doma Bhutia, and Daulat Gurung. A great deal of credit goes to my senior miss Mahima Rai who always support and encourage me and my batch mates and friends who always had a great concern to me throughout study of my M.Phil and Lastly, I owe infinite debt to all my family members for their unconditional love, motivation and support specially my brother and sister who always helped me to focus and do better in my work. And finally remembering blessings of God..

List of Tables

| Table No. 2.1: Drinking Age Group in Africa | 15 |
|---|----|
| Table No. 2.2: Drinking Age Group in Americans | 16 |
| Table No. 2.3: Drinking Age and Purchase Age in Asia | 17 |
| Table No. 2.4: Drinking Age and Purchase Age Group in Europe | 17 |
| Table No. 2.5: Drinking Age Group and purchase age group in Oceania | 18 |
| Table No. 2.6: the legal drinking age in India | 19 |
| Table No. 3.1: State Wise Alcohol Consumption per capita per week (In MI) as of 2011 2012 | 51 |
| Table No. 3.2: The state wise Production of Alcohol in India | 52 |
| Table No. 3.3: Use of Alcohol in Northeast States of India, 2005-2006 | 55 |
| Table No. 4.1: Age Distribution of the Respondents | 64 |
| Table No. 4.2: Percentage of Male and Female Respondents | 64 |
| Table No. 4.3: Marital Status of Respondent | 65 |
| Table No. 4.4: Qualification of the Respondents | 65 |
| Table No. 4.5: Number of Family Member of the Respondent | 66 |
| Table No. 4.6: Earning Member of the Respondents | 66 |
| Table No. 4.7: Occupation of Respondents | 67 |
| Table No. 4.8: Annual Family Incomes of the Respondents | 67 |
| Table No. 4.9: Composition of the Respondents by Religion | 68 |
| Table No. 4.10: Types of Alcohol Consume by Respondents | 69 |
| Table No. 4.11: Respondents Partner to Drink Alcohol | 69 |
| Table No. 4.12: Alcohol Consumer in the Family of Respondents | 70 |
| Table No. 4.13 Place of Alcohol Consumption | 70 |
| Table No. 4.14: Monthly Expenditure of Respondents on Alcohol | 71 |
| Table No. 4.15: Reasons of Alcohol Consumption | 71 |
| Table No. 4.16: Behavioural Change Due to Alcohol Consumption | 74 |
| Table No. 4.17: Facing Violence or Abuse by Respondents | 74 |
| Table No. 4.18: Experiencing Different types of Violence by Respondents | 75 |
| Table No. 4.19: Perception and Opinion of the Respondents (%) | 77 |
| Table No. 4.20: Perception and Opinion of the Respondents (%) | 80 |

List of Figures

| Figure No. 4.1 Harmful Effects of Alcohol Consumption | 72 |
|---|----|
| Figure No. 4.2 Domestic Violence Due to Alcohol Consumption | 73 |

ABBREVATIONS

A.D After Death

AIDS Acquired Immunodeficiency Syndrome

BAC Blood Alcohol Content

CAT Convention against Torture

CEDAW Convention on the Elimination of All Forms of Discrimination against Women

CSW Commission on the State Of Women

DALF Disability Adjusted Life Years

DEVAW Declaration on the Elimination of Violence against Women

DLHS District Level Household and Facility Survey

DPR Democratic People's Republic

HIV Human Immunodeficiency Virus

HRDD Human Resource Development Department

IAPA Indian Alcohol Policy Alliance

ICCPR International Covenant on Civil and Political Rights

ICESCR International Covenant on Social Economic and Cultural Rights

IMFL Indian Made Foreign Liquor

IPC Indian Penal Code

IPS Indian Institute for Population Science

IPV Intimate Partner Violence

MLTP Mizoram Liquor Total Prohibition

National Family Health Survey

NFHS

SADA Sikkim Anti Drug Act

SEAR South East Asian Region

SPACE Society for Promotion of Art Culture Education and Environment Excellence

UDHR Universal Declaration of Human Rights

U.N United Nation

WHO World Health Organisation

CHAPTER – 1

INTRODUCTION

1.1 BACKGROUND

Alcohol was first discovered in 200 million years ago and relics of the earliest civilizations show that alcohol was used in religious ceremonies, medical treatment, and in many aspects of daily life. It has been speculated that Paleolithic man learned to ferment honey and that the development of agriculture was paralleled by the improvement of techniques for fermentation of fruits and grains, culminating in the process of distillation during the first century A.D. Later, alcohol itself was imbued with an autonomous power and a trace of animistic thinking about alcohol still persists (Mello and Mendelson, 2015).

Alcohol is a psychoactive substance which has an effect on people in many ways. It mainly acts on central nervous system but it also affects almost all other body organs and systems. Alcoholic beverages contain ethyl alcohol ethanol, produced as a result of the fermentation of starch which includes grains beer, vegetables vodka and fruits wine (Benegal, et. al, 2002). In every ancient civilization there is evidence of use of alcoholic beverages. It has been consumed in various forms and under various circumstances and for various reasons.

In India too, alcoholic beverages seem to have been around since the Indus Valley civilization. These people not only fermented, but also distilled alcoholic beverages. Global alcohol consumption has increased in recent decades, with most or all of this increase occurring in developing countries (WHO, 2002). Both average volume of alcohol consumption and patterns of drinking vary dramatically between sub regions. Average volume of drinking is highest in Europe and North America and lowest in the Eastern Mediterranean and SEARD regions (Bangladesh, Bhutan, DPR Korea, India, Maldives, Myanmar and Nepal). Alcohol causes 3.2 percent of deaths (1.8 million) and 4.0 percent of Disability Adjusted Life Years (58.3 million). Within sub regions, the proportion of disease burden attributable to alcohol is greatest in the Americas and

Europe. South East Asian societies are in a state of rapid transition. Traditional societies are gradually adopting modern lifestyles, giving rise to new problems.

The alcohol industry is huge in the region. It is estimated that there are over 600 factories, 1582 distributors and thousands of retail outlets involved in alcohol production and retailing. Over 4 million people are involved with the industry (WHO, 2003). Although India is regarded as a traditional, dry country, it is the dominant producer of alcohol in the South East Asia region 65 percent and contributes to about 7 percent of the total alcohol beverage imports into the region. More than two thirds of the total beverage alcohol consumption within the region is in India (IAPA, 2008). In India, around 7 lakh people die due to use and abuse of alcohol every year and domestic violence is on the increase 3000 family abuse cases are registered every year. About 80% of alcohol consumption is form of hard liquor (Arulrhaj, 2005). India is experiencing a massive increase in alcohol consumption. This is coupled with the initiation age decreasing on an alarmingly.

The recorded market and consumption levels are still very low as compared to the global standard. The illicit market consumption is far more than legal sales. Country liquor is a distilled alcoholic beverage made from locally available cheap raw materials such as sugarcane, rice, palm, coconut and cheap grains, with alcohol content between 25-45 percent. Common varieties of country liquor are arrack, desi sharab and toddy. Illicit liquor is mostly produced in small production units with raw materials similar to that used for country liquor. With no legal quality control checks on them, alcohol concentration of illicit liquor varies up to 56 percent. In many parts of India, illicit production of liquor and its marketing is a cottage industry with each village having one or two units operating illegally (Mohan and Sharma, 1985).

The problem of alcoholism few decades ago it was considered a moral problem and a sign of social irresponsibility (Ahuja, 1997). The prevalence of alcohol use is still low in India as compared to other countries. Though consumption is low, patterns of alcohol consumption vary widely through the country. Punjab, Andhra Pradesh, Goa and the Northeastern states have a much higher proportion of male alcohol consumers than the rest of the country. Women tend to drink more in the states of Arunachal Pradesh,

Assam and Sikkim in Northeast; Madhya Pradesh, Chhattisgarh, Orissa and Andhra Pradesh in central and east India; and Goa in the west, compared to other states (IIPS, 2007). The unrecorded consumption and expenditure on alcohol still remains high in India (WHO, 2003).

India has a strong culture and practice of unrecorded alcohol production and consumption. A popular variant of unrecorded alcohol in India, known as country liquor with alcohol content varying between 25% and 45% is a distilled alcoholic beverage made from locally available cheap raw material including agriculture products like sugarcane, rice, palm, coconut and cereals. Alcohol consumption is the major causes of domestic abuse. In reality some abusers rely on substance use as an excuse for becoming violent. Alcohol allows the abuser or the ease with which the abuser can justify his actions; an abuser does not become violent because drinking causes him to lose control of his temper. Due to alcohol consumption many violence are occur like sexual violence, self directed violence etc. and domestic violence is one of them Domestic Violence is a serious and common problem.

Sikkim is a tiny Himalayan state of India. There are major three ethnic groups in Sikkim namely Bhutia, Lepcha and Nepali. These three communities have their own religious and cultural practices. In Sikkim, the majority of the populations belong to Hinduism the percentage of Hindu in Sikkim is 57.7%, Buddhism constitute 27.3%, and Christianity constitute 9.9% and Islam 1.4% and others 3.4% (Religion of Sikkim, 2011). Alcohol consumption is a common practice in Sikkim. It is socially accepted by the communities and without use of alcohol; their festive occasions can't be completed. In Sikkim alcohol is served in every household.

In urban and rural areas most of the functions are celebrated with the consumption of alcohol. Most of the community use alcohol in their festivals. The most commonly used alcohol drink in that occasions are Indian, Sikkim manufactured foreign liquor, beer, wine and scotch in the richer section (Wongyal, 2003). 87% of the populations living in the rural area consume traditional drink made from millet and rice. In Sikkim homemade alcohol have high religious and cultural significance. Alcohols are exclusively prepared mixed inocula or starter called marcha. Traditional alcohol beverages constitute an

integral part of dietary culture in Sikkim. These beverages have strong ritualistic importance among the ethnic people in Sikkim. More than ten types of ethnic, home brewed alcohol beverage are consumed in Sikkim (Tamang et. al, 1996).

Though the religion prohibits use of alcohol in other parts of the country, but it is prevalent among the Buddhist and to some extent in those who worship Hindu religion in Sikkim because it is inherited in their culture and traditionally it has been in use since generation. According to the Human Development Report 2014 mention that in Sikkim the percentage of alcohol consumption in the age group between 15–49 years male percentage is 45.4% and female percentage is 19.1%. In Northeast region compare to other states Sikkim comes in second position in alcohol consumption after Arunachal Pradesh. In Sikkim at present Alcoholism is one of the burning issues which are seen in every societies of Sikkim. Therefore, this study is going to see how this alcohol consumption has been going on or create domestic violence.

1.2 REVIEW OF LITERATURE

The survey of literature is divided into three themes: (1) Impact of alcohol Consumption in Global Perspective, (2) Relationship between Alcohol Consumption and Domestic Violence, and (3) Pattern of Alcohol Consumption in Sikkim and Northeast region in India. Firstly, the survey tries to see on the impact of alcohol consumption in global perspective particularly focus on health. Secondly, the survey tries to deals with the relationship between alcohol consumption and domestic violence, how alcohol consumption creates domestic violence. Thirdly, the survey tries to see the alcohol consumption pattern in Sikkim and Northeast region of India its looks that what kind of pattern is exist in this region.

1.2.1 Impact of Alcohol Consumption in Global Perspective

Alcoholism is the third highest risk factor at present in the world. The World Health Organization (WHO) estimates that around 2 billion people around the world consume alcohol (WHO, 2004). Alcohol is a psychoactive substance with dependence producing properties that has been widely used in many cultures for centuries. The harmful use of alcohol causes a large disease, social and economic burden in societies.

Alcohol impacts people and societies in many ways and it is determined by the volume of alcohol consumed, the pattern of drinking, and, on rare occasions, the quality of alcohol consumed. In 2012, about 3.3 million deaths, or 5.9 % of all global deaths, were attributable to alcohol consumption. The harmful use of alcohol can also result in harm to other people, such as family members, friends, coworkers and strangers. Moreover, the harmful use of alcohol results in a significant health, social and economic burden on society at large (WHO, 2015).

Alcohol is one of the most harmful risks to health. Due to its consumption at least 61 different types of illness or death are caused (Babor, 2004). Alcohol is not an ordinary commodity but a toxic substance in terms of its direct and indirect effects on a wide range of body organs and system (Globe Magazine, 2001). Alcohol represents one of the most serious worldwide socioeconomic and health problems. Approximately 389,000 cases of cancer representing 3.6% of all cancer 5.2% in men and 1.7% in women derive from alcohol consumption in the world (Rehm, et. al, 2004). Alcohol abuse has significant individual, familial and social costs. Long term and or chronic alcohol use has been associated with liver cirrhosis, liver disease, lip, oral cavity and pharynx cancers and heart disease (WHO, 2004).

Additionally, intoxication increases risk for road traffic accidents, poisoning and intentional and unintentional injury. Globally alcohol causes 3.2% of all deaths or 1.8 million deaths annually and accounts for 4.0% of disease burden (WHO, 2007). Alcohol consumption has been identified as an important risk factor for illness, disability, and mortality (Rehm, et. al, 2009). In fact, in the last comparative risk assessment conducted by the World Health Organization (WHO), the detrimental impact of alcohol consumption on the global burden of disease and injury was surpassed only by unsafe sex and childhood underweight status but exceeded that of many classic risk factors, such as unsafe water and sanitation, hypertension, high cholesterol, or tobacco use (WHO, 2009).

Alcohol consumption and problems related to alcohol vary widely around the world, but the burden of diseases and death remains significantly in most countries. Alcohol consumption is the third world's largest risk factor for disease and disability. Alcohol is a casual factor in 60 types of diseases and injuries and a component cause in

200 others. Almost 4% of all deaths worldwide are attributing to alcohol, greater than deaths caused by HIV/AIDS, violence or tuberculosis (WHO, 2011).

1.2.2 Relationship between Alcohol Consumption and Domestic Violence

Alcohol is present in a substantial number of domestic violence accidents. The most common pattern is drinking by both offender and victim. Alcohol has been shown to be a significant risk factor for husband to wife violence. Drinking frequently has been associated with intra family violence.

Alcohol misuse is one of the main killers of young men in India today. But its real impact is on the social and family dynamics that underlie its communities. Domestic violence and an exacerbation of poverty have made alcohol misuse the single most important problem for women in India. Most of the families have on roads because of alcohol drunken their husbands and now they are in debt traps. In many poor and middle class families, development taking place in one hand, their sons are becoming workers in moneylender's houses in other hand (Naik and Lal, 2013).

According to India's National Family Health Survey III shows that one third of women in the age range of 15 – 49 years experiences violence and 10 of them experienced sexual violence. According to this survey it was found that violence was least prevalent in Himachal Pradesh 6%, and highest in Bihar (59%) in Karnataka the prevalence was (25%). Married women to men who abused alcohol were twice more likely to experience violence than whose husbands did not abuse alcohol (NFHS, 2006).

Wife beating in both patriarchal as well as in matriarchal are the common phenomenon (Davis, 2008). In urban slums like Madras city have shown that alcoholism is the cause of wife beating. A large number of socio psychological studies in the west have proven that alcoholism and wife beating in low income communities are a manifestation of growing economic powerlessness (Subadra, 1999). Extramarital relations, bigamy, etc. are some of the common reasons, after alcoholism, for domestic violence (Pandey, 2008).

Heavy alcohol consumption of male also increases the risk of violence. Women who are more empowered educationally, economically, and socially are the most protected, but below this high level relationship between empowerment and risk of violence is non linear. Violence is often used to resolve a crisis of male identity, at times caused by poverty or an inability to control women. Risk of violence is the greatest in communities where the use of violence in many situations is a socially accepted norm. Therefore, it is suggested that primary preventive interventions should focus on improving the status of women and reducing norms of violence, poverty and alcohol consumption (Jewkes, 2002).

It was found that there was a clear relationship between alcohol outlet density and domestic violence. The more opportunities there are to buy alcohol, the more likely that severe domestic violence will occur (Livingston, 2011). Until recently, most governments and policy makers viewed violence against women as a relatively minor social problem, especially 'Domestic violence'. But now such violence has been recognized as a serious human right violation and health problems. The issue of violence against women had gained increasing centrality as a priority area for action since 1975 globally, nationally as well as regionally (Mathur, 2004).

Domestic Violence is one of the social problems leading throughout the world today. The term domestic violence denotes violence occurring within the private circle, generally between individuals who are related through intimacy, blood and law and many types of harmful behavior directed to the married women by their husbands due to their subordinate status in the patriarchal society (Jain, 1992). The National Research Council (1993) defined, 'Domestic violence is the intentional infliction of harm or injury by one intimate partner on another. Gender Based violence is any attack directed against a (usually female) person due, at least in part, to a disadvantaged position within male dominated social system (Kilmartin and Allison, 2007).

Domestic violence also known as domestic abuse, spousal abuse or Intimate Partner Violence (IPV) can be broadly defined as "a pattern of abusive behaviors by one or both partner in an intimate relationship such as marriage, dating, family, friends or cohabitation". Intimate Partner Violence (IPV) refers to physical, Sexual, and/or

psychological/emotional harm committed by a current or former partner or spouse. IPV is likely to be part of a relationship dynamic that evolves into predictable patterns of violence. (Bhattacharya, 2004; Davis, 2008; and WHO, 2002).

1.2.3 Pattern of Alcohol Consumption in Sikkim and Northeast Region in India

The use of alcoholic beverages, fermented from rice and other substrates using locally produced starter cakes, is prevalent among many cultures in Northeastern region of India. Rice is the common substrate for fermentation though other cereals like millets, Job's tears, maize and sometimes fruits are also used. Substrates are fermented with starter cakes, which is locally prepared with rice and plant ingredients. Alcoholic beverage is consumed in day to day life as refreshing drink and in social occasions and during rituals as part of religious and cultural practices in this part of India (Teron, 2006).

The missing people referred as Miri which is one of the indigenous communities inhabiting of the Northeastern region of India. They represent an Indo-Mongolian and East Asian group and belong to greater Tani people which comprise many tribes like Adi, Apatani, Nyishi or Nyshing Padam and Minyong of Arunachal Pradesh, India. In these communities alcoholic beverage referred as Apong, fermented from rice, is their common drink. Apong is considered as symbol of honor and receiving guest with a glass of Apong is a matter of pride for the host family (Pegu, et. al, 2013).

In Arunachal Pradesh, India the alcoholic drink consumption percentage is comparatively more in male than female. Traditionally beverage like Themsing, Rakshi, Mingri, Lolpani and Bhangchung are prepared and consumed by certain tribes in Arunachal Pradesh where as Apong, Opo and Madua drinks are prepared and consumed by almost all tribes (Shrivastava, 2012).

Consumption of alcohol is culturally accepted in most parts of Arunachal Pradesh. The inhabitants of this region are mostly tribal. Consumption of alcohol is a part of the day to day life of the people in this region (Loyi, 2009).

Alcohol consumption is a common practice in the population of east Sikkim in India. It is also socially accepted by some local communities during festive occasions. In

India alcohol consumption is considered one of the social problem, but only a few studies were conducted on alcohol use among adolescent (Barun, 2013). Rice is the staple food. The cereal based fermented products are mostly consumed as alcoholic beverages and the amount of consumption and product characterisation of various fermented beverages of the Sikkirn Himalaya has been documented (Tamang, et. al, 1996).

All the Indian states Sikkim have a unique culture of unrecorded alcohol production and consumption. In Sikkim, consumption of traditional alcohol beverages is an integral part of daily dietary habit and cultural practice. More than ten types of ethnic, home brewed alcoholic beverages are consumed in Sikkim and such variety is one of the highest in India (Tamang, et. al, 2007).

Sikkimese are very fond of alcohol is the general impression of people in the rest of the country just as most people are convinced that all hill people in the hills drink a lot of alcohol. There are social stigmas attached to drinking, but no celebration or occasion can be complete without alcohol, mostly indigenous but increasingly foreign (Lama, 2001).

Use of alcohol in Sikkim is much higher than the national average. Data from the National Family Health Survey 3 reveals that 45 percent of men and 19 percent of women in Sikkim consume alcohol. According to the state Economic Survey 2006, one more members consumed alcohol in 37 percent of households (Human Development Report, 2014).

The available literature shows that there have been a number of studies done in pattern of alcohol consumption and domestic violence in India and abroad, but not many studies have been done on the patterns of alcohol consumption and its impact on domestic violence in Sikkim. Therefore, an attempt has been made to fill this gap through this study and proposes the issues in detail which ultimately contribute to the existing knowledge of literature.

1.3 RATIONALE AND SCOPE OF THE STUDY

Alcoholism or alcohol abuse is one of the major problems which is facing by people in this world. According to World Health Organisation 2011, Alcohol consumption is the third world's largest risk factor for disease and disability. Alcohol is one of the social problems leading through the world whether it is developed nation, developing nation or under developed nation as it is spread all over the world. Consumption of alcoholic beverages is a public health problem. It not only harms the person who consumes it but also harms the family and the society in general. Alcohol, drug and suicide these three things are burning issues at present in Sikkim.

Sikkim is one of the State in India which has multiple ethnic and tribal identity. Due to its multiethnic tribal identity majority of these identity use alcohol as a tradition or customs which has been followed since early period. So in Sikkim the consumption of alcohol is a general subject of issue. Though having as a traditional beverage it is creating a sort of violence which is gaining momentum. This study is based on alcohol consumption and its impact on domestic violence in Sikkim. An attempt has also been made in this study that pattern of alcohol consumption and its impact on domestic violence in Sikkim. The findings of the research will help us to view this problem. It will look upon what kind of pattern is there in terms of violence i.e. domestic violence. It will also be helpful is undermining the risk of violence and its impact towards people.

1.4 RESEARCH OBJECTIVES

- To understand the pattern of alcohol consumption and production in India.
- To understand the relationship between alcohol consumption and domestic violence.
- To examine the excise policy on alcohol in India.
- To explore the pattern of alcohol consumption in Sikkim and its impact on domestic violence.

1.5 RESEARCH QUESTIONS

- What kind of alcohol consumption and production exist in India?
- What is the relationship between alcohol consumption and domestic violence?
- What is the excise policy related to alcohol in India?
- Which kind of pattern are prevailing in Sikkim and how its impact on domestic violence?

1.6 HYPOTHESIS

Alcohol consumption has positive impact on domestic violence in Sikkim.

1.7 RESEARCH METHODOLOGY

Location of the Study: According to census of 2011, the total population of Sikkim is 6, 07,688. And district wise population the population of North Sikkim is 43354, South Sikkim population is 146742, East Sikkim population is 281293 and West Sikkim population is 136299.

Study Area: The study area is based on Sikkim's four districts namely North, South, East and West Sikkim. From North, the covered area is Mangan, from South Paiyong, from East, Tadong and from West, Kyongsha. Majority of the respondents in this study are selected on the basis of alcohol consumed men and women.

Research Methods: The study employs both qualitative as well as quantitative methods to collect primary and secondary sources. The tools for primary data collection are questionnaires, interviews and the sample size is 100. Interviews have been conducted with local respondents of the state those who consumed alcohol.

1.8 ORGANISATION OF THE STUDY

Chapter I: Introduction

This introductory chapter had discussed the rational and scope of the study, and also Objectives, Research Questions, Methodology of the proposed study and review of literature which shows the impact of alcohol consumption, domestic violence which is prevailing in India due to alcohol consumption and finally the pattern of alcohol consumption in Sikkim and Northeast region of India.

Chapter II: Alcohol Consumption and Domestic Violence

This chapter highlights the after effect of alcohol consumption like the cases of domestic violence. This section deals with the types of violence like physical, sexual and psychological. It also looks upon different acts and laws which are dealing with domestic violence in India and international law.

Chapter III: The Pattern of Alcohol Consumption and Production in India

This chapter highlights the alcohol consumption and its production in India. It also focuses on the impact of its consumption among individuals. Its negative implication or how it is affected on the socioeconomic life of people has been studied.

Chapter IV: Pattern of Alcohol consumption and Its Impact on Domestic Violence in Sikkim

The problem of alcoholism is one of the burning issues at present in Sikkim. So, this section deals with the impact of alcohol upon people which is based on the field visit. It also has highlighted the pattern of alcohol consumption in Sikkim and domestic violence.

Chapter V: Conclusion

This chapter summaries all the chapters of the study and analyzed the validity of the hypothesis. Suggestions, recommendations and major findings has also been brought upon this chapter.

1.9 LIMITATION OF THE STUDY

During the research, especially during field visits, many problems were faced such as not everyone was willing to participate in the interviews or the interactions due to the nature of the topic, people were scare they are incorporate. Some of the women and men are not much interested in giving time for communicate making excuses as they have another work to do and they don't have time to answer.

Especially Women are not being open up to reveal their problems feeling ashamed and they are not interested to share their problems to anyone. First, this study provides an analysis of the pattern of alcohol consumption and its impact on domestic violence in Sikkim. The primary sources have been used for the data collection, though there are not much sufficient materials in the context of Sikkim. Mostly materials have been collected through reports, journal article, online article and archives.

CHAPTER - 2

ALCOHOL CONSUMPTION AND DOMESTIC VIOLENCE

The world discovered alcohol many thousands of years ago through its natural occurrence in decaying fruit or fermenting bowls of grain in which air-borne yeasts and natural sugars combined. Though the discovery of alcoholic drinks may have been accidental, humans soon learned how to deliberately produce it. Alcoholic beverages became common in virtually all cultures (Korhonen, 2004). The consumption of alcohol is prevent in everywhere in this world till date. But for that different countries had different laws and policies regarding alcohol consumption some country its legal and some country its illegal.

2.1. INTERNATIONAL LAWS AND POLICIES ON ALCOHOL CONSUMPTION

The legal drinking age is the age at which a person can legally consume or purchase alcoholic beverages. These laws cover a wide range of issues and behaviors, addressing when and where alcohol can be consumed. The minimum age alcohol can be legally consumed can be different from the age when it can be purchased in some countries. These laws vary among different countries and many laws have exemptions or special circumstances. Most laws apply only to drinking alcohol in public places; with alcohol consumption in the home being mostly unregulated (an exception being the UK, which has a minimum legal age of five for supervised consumption in private places). Some countries also have different age limits for different types of alcoholic drinks¹.

Some Islamic nations prohibit Muslims, or both Muslims and non Muslims, from drinking alcohol at any age, due to Islam forbidding the consumption of alcohol. In other countries, it is not illegal for minors to drink alcohol, but the alcohol can be seized without compensation. In some cases, it is illegal to sell or give alcohol to minors. The following list indicates the age of the person for whom it is legal to consume and purchase alcohol. Kazakhstan, Oman, Pakistan, Qatar, Sri Lanka, Tajikistan, Thailand,

¹ ICAP (2002) Drinking age limits. International Center for Alcohol Policies (ICAP), ICAP Reports 4, 1-10.http://www.icap.org/portals/0/download/all_pdfs/icap_reports_english/report4.pdf accessed 22/ 07/ 2016.

United Arab Emirates, Federated States of Micronesia, Palau, Paraguay, Solomon Islands, India (certain states), the United States (except U.S. Virgin Islands and Puerto Rico), Yemen (Aden and Sana'a), Japan, Iceland, Canada (certain Provinces and Territories), and South Korea have the highest set drinking ages, however some of these countries do not have off premises drinking limits. Austria, Belgium, Denmark, Germany, Georgia, Moldova, Morocco, and Western Sahara have the lowest set drinking ages.

Drinking Age Group of Different Continents

Table 2.1 presents the different drinking age in the continent of Africa. It can be seen from this table that the lowest age among the African countries is Morocco with 16 years for drinking alcohol. In Algeria, Angola, Botswana, Central African Republic and South Africa the drinking age is 18 years and highest age of drinking alcohol is in Egypt with 21 years. There are three countries namely Libya, Somalia and Sudan where drinking of alcohol is illegal.

Table No. 2.1
Drinking Age Group in Africa

| Country/ Region | Drinking Age | Notes |
|----------------------|--------------|--|
| Algeria | 18 | |
| Angola | 18 | |
| Botswana | 18 | |
| Central African Rep. | 18 | |
| Egypt | 21 | |
| Morocco | 16 | Forbidden for Muslims |
| Libya | Illegal | |
| Somalia | Illegal | |
| South Africa | 18 | Quality of liquor to be consumed by the minor in the presence and under the supervision of that parent, guardian or other person |
| Sudan | Illegal | |

Sources: https://en.wikipedia.org/wiki/Legal_drinking_age. Accessed 22/7/2016.

Table 2.2 shows the different drinking age of Americans. In Anguilla, Antigua and Barbuda and Cuba the drinking age of alcohol is lowest with 16 years. Highest ages of drinking alcohol are in Argentina, Brazil, Colombia, Chili, El Salvador, Guatemala

and Mexico with 18 years. We can see here that the variations of the drinking age of alcohol from different country to country.

Table No. 2.2

Drinking Age Group in Americans

| Country/ Region | Drinking Age | Notes |
|------------------------|--------------|---|
| Anguilla | 16 | |
| Antigua and Barbuda | 16 | The sale and distribution of alcohol to a person under 16 years of age is illegal. ID can be required |
| Argentina | 18 | |
| Brazil | 18 | |
| Cuba | 16 | |
| Colombia | 18 | |
| Chili | 18 | The maximum age is 18 for buying and consuming alcohol. Selling alcohol to a minor may attract a fine. One must provide identification upon request. Residents of Chile over the age of 18 must carry their identification card issued by the civil Registry and Identification service at all times. |
| El Salvador | 18 | |
| Guatemala | 18 | |
| Mexico | 18 | A person must be eighteen years or over to legally purchase and consume alcoholic beverages in Mexico. The age however isn't strictly enforced, and ID are barely requested. |

Sources: https://en.wikipedia.org/wiki/Legal-drinking-age accessed 22/7/2016.

Table 2.3 shows the drinking age and purchase age in Asia. Countries like Bhutan, China and India the drinking age of alcohol is 18 years but in India, its differ from state to state. The purchase age of alcohol in Indonesia is 21 years and Israel its 18 years. There are four countries namely Afghanistan, Bangladesh, Iran and Kuwait where drinking of alcohol is illegal.

Table No. 2.3

Drinking Age and Purchase Age in Asia

| Country/ Region | Drinking Age | Notes |
|-----------------|-------------------------------|---|
| Afghanistan | Illegal | |
| Bangladesh | Illegal for Muslims | Alcohol will be sold to foreigners in certain locations, albeit clandestinely |
| Bhutan | 18 | |
| Cambodia | None | |
| China | 18 | Introduced in January 2006. Weakly enforced to not enforce. |
| India | 18-25 (varies between states) | Consumption of alcohol is prohibited in the states of Bihar, Gujarat, Nagaland and Manipur |
| Indonesia | None | No law prohibits minors from consuming and possessing alcohol. The legal age for purchasing alcohol is 21, but this law is rarely implemented. ID is not often requested. There is a ban on the sale of alcoholic beverages in minimarkets and halal restaurants catering to Muslims. |
| Iran | Illegal | |
| Israel | None | |
| Kuwait | Illegal | |

Sources: https://en.wikipedia.org/wiki/Legal_drinking_age. Accessed 22/7/2016.

Table 2.4 shows the different drinking and purchase age group of Europe. In Albania, Azerbaijan and Belarus the drinking age of alcohol is 18 years. The purchase age group of alcohol in Armenia, Bosnia and Herzegovina, Czech Republic, France, Greece, Latvia and Portugal its 18 years.

Table No. 2.4

Drinking Age and Purchase Age Group in Europe

| Country/ | Drinking | Purchase | Notes |
|---------------------------|----------|----------|--|
| Region | Age | Age | |
| Albania | 18 | | |
| Armenia | None | 18 | There are no laws mandating alcohol vendors to potential underage drinkers. ID checks are very rarely, if ever, carried out. |
| Azerbaijan | 18 | | |
| Belarus | 18 | | |
| Bosnia and Herzegovina | None | 18 | |
| Czech Republic | None | 18 | It is illegal to provide alcohol to minors (Punishable by fine or up to 1 to 2 year (s) |

| | | | imprisonment). Consumption itself is not prohibited by law. |
|----------|------|----|---|
| France | None | 18 | Alcohol to a minor (under 18) is illegal and can be fined 7500 Euros. This age was raised from 16 to 18 in 2009. |
| Greece | None | 18 | In 2008, the consumption of alcoholic beverages was prohibited for minors in public. However, the law does not apply to private events to private premises. |
| Latvia | None | 18 | |
| Portugal | None | 18 | The age requirement on the purchasing of alcohol is only on spirits. Wine and beer are still allowed to be brought. |

Sources: https://en.wikipedia.org/wiki/Legal_drinking_age. Accessed 22/7/2016.

Table 2.5 shows the different drinking age and purchase age group of alcohol. The lowest drinking age in Australia, Fiji, Papua New Guinea and Vanuatu is 18 years and the highest age of drinking alcohol is in countries like American Samoa, Guam, Palau, Samoa and Tango with 21 years. The purchase age group of alcohol in New Zealand is 18 years.

Table No. 2.5
Drinking Age Group and Purchase Age Group in Oceania

| Country/ | Drinking | Purchase | Notes |
|---------------------|----------|----------|--|
| Region | Age | Age | |
| American | 21 | | |
| Samoa | | | |
| Australia | 18 | | Varies by states. Some state restrict possession and consumption to over 18, all states restrict purchasing to over 18. Minors may consume alcohol in a private residence with parental supervision. |
| Fiji | 18 | | The drinking age was 21 from 2006 to 2009 but was lowered to 18 in 2009. |
| Guam | 21 | | |
| New Zealand | None | 18 | Minimum age applies for beverages with 1.15% ABV or over; no restrictions on beverages less than 1.15% ABV. |
| Palau | 21 | | |
| Papua New Guinea | 18 | | |
| Samoa | 21 | | |
| Tango | 21 | | |
| Vanuatu | 18 | | |

Sources: https://en.wikipedia.org/wiki/Legal-drinking-age. Accessed 22/7/2016

2.2 NATIONAL LAWS AND POLICIES ON ALCOHOL CONSUMPTION

In India, manufacture, sale and or consumption of alcohol is prohibited in the states of Gujarat, Manipur, Nagaland and recently in Bihar,² as well as the union territory of Lakshadweep. All Indian states observe dry days on major religious festivals or occasions depending on the popularity of the festival in that region. Dry Days are specific days when the sale of alcohol is banned, although consumption is permitted. Dry days are also observed on voting days. Dry Days are fixed by the respective state government. National holidays such as Republic Day (January 26), Independence Day (August 15) and Gandhi Jayanthi (October 2) are usually dry days throughout India.

Alcohol is a subject of the state list according to the seventh schedule in the constitution of India and therefore laws differ from state to state. That includes the legal drinking age as well. Here's the minimum drinking age in all the states and including union territories of India. The table shows the different age group of drinking.

The Legal Drinking Age in India

The legal drinking age in India is presented in Table 2.2. As can be seen this Table 2.2 there is a huge variations that are practiced by different states for keeping different legal age for consumption of alcohol.

Table No. 2.6
Shows the Legal Drinking Age in India

| State/Union Territories | Drinking Age | Note |
|-------------------------|--------------|-------------------------------|
| Andaman and Nicobar | 18 | |
| Island | 10 | |
| Andhra Pradesh | 21 | |
| Arunachal Pradesh | 21 | |
| Assam | 21 | |
| Bihar | Illand | Bihar Excise (Amendment) Bill |
| Dillai | Illegal | 2016 |
| Chandigarh | 25 | |
| Chhattisgarh | 21 | |
| Dadra and Nagar Haveli | 21 | |
| Daman and Diu | 21 | The Goa, Daman and Diu Excise |

 $^{^2}$ Alcohol Prohibition to remain in Nagaland. https://en. wikipedia.org/wiki/ Alcohol_laws_of_India# cite_ref-nagaland_2-0 accessed 23/07/2016.

19

| | | Duty Act and Department % 255C |
|-------------------|--------------------|--|
| | | Documents % 2F the % 2520 Goa % |
| | | 2 |
| Delhi | 25 | |
| Goa | 21 | |
| Gujarat | Illegal | Bombay Prohibition (Gujarat Amendment) Bill, 2009 |
| Haryana | 25 | |
| Himachal Pradesh | 18 | |
| Jammu and Kashmir | 21 | |
| Jharkhand | 21 | |
| Karnataka | 21 | |
| Kerala | 18 | |
| Lakshadweep | Illegal | |
| Madhya Pradesh | 21 | |
| Maharashtra | No limit (wine) 21 | |
| | (beer) 25 other | |
| Manipur | Illegal | The Manipur Liquor Prohibition Act of 1991 |
| Meghalaya | 25 | |
| Mizoram | 18 | |
| Nagaland | Illegal | Nagaland Liquor Total Prohibition Act, 1989 |
| Orissa | 21 | |
| Puducherry | 18 | |
| Punjab | 25 | |
| Rajasthan | 18 | |
| Sikkim | 18 | |
| Tamil Nadu | 21 | |
| Telengana | 21 | |
| Tripura | 21 | |
| Uttar Pradesh | 21 | |
| Uttarakhand | 21 | |
| West Bengal | 21 | |

Sources: Alcohol law in India. www.lawfam.in/in/blog/alcohol_laws-in_India. Accessed 22/7/2016.

Regulation & Legislation

Alcohol is one of the commonly consumed intoxicating substances all over the world. The legal aspects can be summarized under: Licensing Laws, Drunkenness, Drunken Driving, Dry Days and Dry States in India.

Licensing Laws: 'World Health Organization' recommends that member governments should begin to reduce per capita consumption by reducing the availability of alcoholic

beverages. Prohibition is incorporated in the Constitution of India among the directive principles of state policy. Article 47 says: "The state shall regard the raising of the level of nutrition and standard of living of its people as among its primary duties and in particular, the state shall endeavor to bring about prohibition of the use except for medicinal purposes of intoxicating drinks and of drugs which are injurious to health." Alcohol policy is under the legislative power of individual states. Prohibition, enshrined as an aspiration in the Constitution, was introduced and then withdrawn in Haryana and Andhra Pradesh in the mid 1990s, although it continues in Gujarat, with partial restrictions in other states – Delhi, for example, has dry days. There was an earlier failure of prohibition in Tamil Nadu.

Excise department regulate and control the sale of liquor in the NCT of Delhi. Retail supply of alcohol is regulated by Delhi Liquor License Rules, 1976. It prohibits consumption and service of liquor at public places. This also prohibits employment to any person (male under the age of 25 years or any female) at any licensed premises either with or without remuneration in part of such premises in which liquor or intoxicating drug is consumed by the public. Similarly no individual should possess liquor at one time more than the prescribed limit without special permit. As per excise rules in Rajasthan, a person can posses maximum 3liters of Country Liquor, 6 Liter of IMFL and 12 Bottles of Beer. The Bombay Prohibition Act, 1949, prohibits the production, manufacture, possession, exportation, importation, transportation, purchase, sale, consumption and use of all intoxicants. The Cable Television Network (Regulation) Amendment Bill, in force September 8, 2000, completely prohibits cigarette and alcohol advertisements. The government controlled channel, Doordarshan, does not broadcast such advertisements but satellite channels however are replete with them.

Drunkenness: Drunkenness is defined as the condition produced in a person who has taken alcohol in a quantity sufficient to cause him to lose control of his faculties to such an extent that he is unable to execute the occupation on which he is engaged at the material time. Section 84 of the Bombay Prohibition Act 1949 provides that any person, who is found drunk or drinking in a common drinking house or is found there present for the purpose of drinking, shall on conviction, be punished with fine which may extend to

five hundred rupees. Section 85 provides that any person found drunk and incapable of controlling himself or behaves in a disorderly manner under the influence of drink in any street or thoroughfare or public place or in any place to which public have or permitted to have access, shall on conviction, be punished with imprisonment for a term which may extend to one to three months and with fine which may extend to two hundred to five hundred rupees.

Drunken Driving: Across the world, governments have defined different acceptable blood alcohol levels. However, there is no minimum threshold below which alcohol can be consumed without risk. With rise in blood alcohol concentration, there is progressive loss of driving ability due to increased reaction time, over confidence, impaired concentration, degraded muscle coordination and decreased visual and auditory acuity. Though the laws to check the drunken driving do exist in India but there is need to effectively impose the same on the alcohol impaired drivers. The blood alcohol content (BAC) limits are fixed at 0.03%. Any person whose BAC values are detected more than this limit is booked under the first offense. He/she may be fined about 2000 and/or he or she may face a maximum of 6 months imprisonment. If he person commits a second offense within 3 years of the first then he/she may be fined about 3000 and/or he or she may face a maximum of 2 years imprisonment.

On 1 March 2012, the Union Cabinet approved proposed changes to the Motor Vehicle Act. As per the new provisions, drunk driving would be dealt with higher penalty and jail terms fines ranging from 2,000 to 10,000 and imprisonment from 6 months to 4 years. Drink driving will be graded according to alcohol levels in the blood. In cases where alcohol level is less than 30 mg per 100 ml of blood, it doesn't amount to as an offence. For levels between 3060 mg per 100 ml of blood, the proposed penalty would be 6 months of imprisonment and/or 2,000 as fine. For alcohol level between 60150 mg per 100 ml of blood, the penalty would be one year imprisonment and/or 4,000. If the offence is repeated within three years, the penalty can go up to 3 years imprisonment and/or 8,000. For those who are found heavily drunk with alcohol levels of over 150 mg per 100 ml of blood, the penalty will be 2 years imprisonment and or 5,000. Repeat offence

within a three year period would warrant a jail penalty and fine of 10,000 besides cancellation of license (Lalwani, 2005).

Dry Days and Dry States in India: Some days especially when the sale of alcohol is prohibited like in Republic Day (26 January), Independence Day (15 August) and Gandhi Jayanti (2 October) are usually dry days throughout India as they are considered as the National Holidays so every State is bound to celebrate that day as a dry day.

There are some States which are known as the dry States in which the sale of alcohol in any form is totally banned to the living inhabitants. Here the list of the States which are known as the "DRY STATES". Gujarat-Bombay Prohibition (Gujarat Amendment Bill), 2009 was passed in 2011 by the assent of the Governor in Gujarat. With the passing of the Bihar Excise (Amendment) Bill 2016 the sale and possession of the liquor was prohibited. The sale and consumption of Alcohol was banned by passing Nagaland Liquor Total Prohibition Act ("NLTP") in 1989. Lakshadweep is the only national territory wherein sales of alcohol is entirely banned and packing alcohol to island from one states is also banned. This north- eastern state, Manipur imposed ban on the sale and consumption of liquor by passing the Manipur Liquor Prohibition Act of 1991.

Drinking Trend among Youth: The age of initiation to alcohol is going down. Different states have different legal minimum age limits for alcohol consumption, with the lowest being 18 years in Karnataka and Kerala and the highest at 25 years in Delhi; Maharashtra has permissible age for beer and wine as 21 years and 25 years for spirits. There is increasing lobbying by the alcohol industry for reduction in the permissible age. Young people, especially teenagers, are more sensitive to alcohol use because their bodies and brains are still developing. Studies and findings around the world are conclusively underscoring the dangers of early alcohol use resulting in a much higher risk of dependence and abuse, but the legal age in India for serving alcohol is seldom checked. In India, the young are being lured towards alcohol use.

They are impressionable, want to be seen as fun, hip, cool & "belonging" to their peer groups and friend circles. Alcohol also provides an "excuse" to behave in an

uncontrolled manner. In a setup like India, alcohol consumption takes place without the knowledge of parents and family.

Drinking Trends among Women: In India patterns of alcohol consumption indicates that women consumers can have an equally explosive pattern of alcohol consumption as men. Traditionally, their numbers have been lower but persuasive marketing and "advancing" urban lifestyles can make a significant change in this and they make another popular target group. According to one recent study in Karnataka reported no major difference between the amounts of alcohol drunk by men or women on any typical drinking occasion. The frequency of use varies between men and women, with men drinking more frequently than women. It might be noted that while almost 70 percent of the male drinkers drink daily or almost daily, 55 percent of women drinkers also drink at the same frequency. This can hardly be termed "infrequent" drinking.

2.3 STATE LAWS AND POLICIES ON ALCOHOL CONSUMPTION

Sikkim is a small and beautiful state of India. Which is came into being 16th of May 1975. Sikkim is located in the foothills of the Himalayan region and shares international borders with Nepal, Bhutan and Tibet and national border with West Bengal. The population of Sikkim is according to 2011 census is 607,688.

In Sikkim the use of alcohol and other psychoactive drugs has become a matter of serious concern in Sikkim. Around 12% of deaths as per Medically Certified Causes of Deaths are due to Alcohol which is alarming. National Family Health Survey-2, Government of India, has also highlighted a significant prevalence of alcohol use in Sikkim-32% and 17% among above 15 years of age males and females, respectively. From their observations prevalence of alcohol use is more common in rural areas than urban and negatively related to level of education and socioeconomic condition. These rough estimates make it obvious that alcohol use has become an important public health issue in Sikkim.

Interventions Under Taken By the State

These are the Major steps which are taken by the Government to Control Alcohol in Sikkim:

- Awareness Camp in selected places.
- SADA act (Sikkim Anti Drug Act) was launched in Sikkim on 2006.
- Sikkim Anti Drugs Authority Committee established in 2008 where Chief Secretary is the Chairman, Additional Chief Secretary, Secretary Finance, Home, Social Justice, Health, HRDD, UD & HD, Law, DGP as members and PO as Member Secretary.
- One Meeting Held in 2009 where activities undertaken were reviewed.
- Law Enforcers appointed from Police, Excise & Drug Cell. Process for registration and licensing of De-Addiction Centres are being taken up by State Mental Health Authority now to regulate and Revamping of De Addiction Centre under State Health Institutions are being taken up with Government of India

Sikkim Anti-Drug Act

In order to control regulate and the abuse of drug and controlled substance with abuse potential being misused by addicts and traffickers, to make stringent provision to deal with the ever increasing phenomena abuse of medicinal preparations and for matters connected there with" the Sikkim anti drug Acts" was launched in 2006. According to this Act no person shall (a) Sale, stoke for sale or trade in any controlled substance. (b) Or transport either inter-state or intra-state any controlled substance. Without a valid license under the drugs and cosmetics Act, 1940 or Sikkim trade license Act: Provided that, and subject to the other provisions of the Act and the rules made their under the possession of small quantities of controlled substance medicinal purposes with the valid prescriptions or for a legal use of the substance shall be punishable.

Provided further the amount of controlled substance in possession shall not be behind the limit prescribed in the prescription card However the SADA Act needs some amendment and in order to bring changes in the Act a meeting on substance abuse was held at the chamber of Commissioner cum Secretary, health department on 7th Jan. In 2011 is enclosed in Flag "A" to discuss the scenario of substance abuse in Sikkim. During the course of the meeting, the primary importance was given as to why the youths are including into drugs or substance abuse and what can the government do to keep check this problem. The main objectives of this Act are as follows:

- a) To create awareness and educate people about the ill-effects of alcoholism and substance abuse on the individual, the family, the workplace and society at large.
- b) To provide for the whole range of community based services for the identification, motivation, counseling, de-addiction, after care and rehabilitation for Whole Person Recovery (WPR) of addicts.
- c) To alleviate the consequences of drug and alcohol dependence amongst them individual, the family and society at large.
- d) To facilitate research, training, documentation and collection of relevant information to strengthen the above mentioned objectives.

At present in Sikkim the burning issues are alcohol, drugs and suicide. People face these kinds of problems in their daily life in Sikkim. To control these kinds of problems government give more emphasis and making laws and policies on these issues but still state face problems. As compared to the other States of India, Sikkim is in first rank in case of suicide, consumption of alcohol is also high in Sikkim and drug abuse.

2.4 DOMESTIC VIOLENCE

Violence whether visible or invisible in socio-cultural and moral terms remain a coercive instrument utilized by an individual or group or community in order to discipline another individual or group or community as per their will and in manner required under the prevailing circumstance. This sort of an atmosphere continued mistrust and threat of coercion and use of physical, mental or oral violence inside home refers domestic violence (Singh.et.al, 2009). Gender-Based violence is a global phenomenon. It include rape and sexual assault, intimate partner violence (IPV), sexual harassment, stalking, trafficking, forced prostitution, exploitation of labour, debt bondage of women

and girls, sex- selected abortion, physical and sexual violence against prostitutes, female infanticide, the deliberate neglects of girls relative to boys, and rape in war.

Domestic Violence is a violent victimization of women, within in the boundaries of family, usually by men. A woman of any age, she may be a girl child, unmarried, married or elderly women including a widow or such women with whom men have marriage like relationship. Domestic Violence is any attack directed against a (usually female) a person due, at least in part, to a disadvantaged position within male dominated social systems (Kilmartin and Julie, 2007). Domestic violence is a part of scenario of upholding socially sanctioned norms and practices for which male members of the family attempt at subjugating their female counterparts. Thus, domestic violence seems to be a function of the complex patriarchal structures, male privileges over females' bodies and life and other such contexts of marriage and family. Masculinity expresses itself by way of exercising control and domination over their females.

This tendency of male domination is well supported by the prevalent social norms and practices. And that results in women's overall low social status, absence of autonomy, their absence in the familial decisions or even decisions about their own bodies, pregnancies and their overall lives. This sort of an atmosphere leads to their complete deprivation from free mobility, health and 14 nutrition or their other natural inclinations and interest. It also results in the perpetuation of their dependency, subordination and powerlessness (Singh.et.al, 2009). Violence remains both pervasive and horribly destructive. Social awareness campaigns strenuous efforts by feminist to change both attitudes and laws (Kilmartin and Julie, 2007 and Mishra, 2006).

2.5 THEORETICAL PERSPECTIVES

2.5.1 Patriarchy theory

Patriarchy denotes a social system characterized by male dominance over women. In the context of the family it becomes "a system originating in the household wherein the father dominates". This structure is reproduced throughout the society. It is a social structure where male dominance over female (both as an individual and as group) is seen in all spheres of life. This theory developed by R.E. Dobash and R. Dobash (1979)

maintains that throughout the history, violence has been systematically directed towards women. Economics and social processes operates directly and indirectly to support a patriarchal social order and family structures. Dobash's central theoretical argument is that patriarchy leads to the subordination of women and contributes to a historical pattern of systematic violence directed against females (Mishra, 2006 and Sood, 1990).

The patriarchal system by way of marriage aims at forcing the woman to confirm to the societal norms of chastity. The women are often abused for frivolous reasons as meals not being served on time or up to their satisfaction, nagging, fighting with in laws, children not been taken care of, suspecting the wife of infidelity and various other reasons like drinking which has catalyst effect on violence, frustration in social life and inability to achieve the desired goals. It is all the more alarming women themselves justify the use of force uniformly (Mukherjee, 2007 and Subadra, 1999).

2.5.2 Psychological Theories

From a psychological perspective, which focuses on the individual, it posits that domestic violence is viewed as a medical problem, suggesting that abusive men have some sort of illness that causes them to behave violently towards their partners, such as excessive use of alcohol and drugs. This view inevitably reduced the men's accountability for their abusive behaviour, for he is not in full control of his emotions, and in need of medical intervention. Thus, it does not explain the causes of the domestically violent behaviour in men (Esteal, 1994) Psychological theories do not account for all acts of domestic violence committed by men, but tell only part of the story. There are a large group of domestically violent men who do not show signs of violent behaviour in other social contexts such as workplace, and community events (McGregor, 1990) research results reveal that domestic violence can occur in males with a normal state of mind or with no associations with addictive behaviours. This evidence suggest that the insignificant degree to which perpetrators' of domestic violence show signs of a personality disorder questions the credibility of these theories.

2.6 TYPES OF DOMESTIC VIOLENCE: PHYSICAL, SEXUAL AND PSYCHOLOGICAL

Domestic violence refers to the violence between members of the household, usually spouses; an assault or other violent acts committed by one member of a household against another. It occurs when a family member, partner or ex-partner attempts to physically or psychologically dominate another. Domestic violence often refers to violence between spouses, through it is also inclusive of cohabitants and non-married intimate partners. Domestic violence occurs in all cultures; people of all races, ethnicities, religions, sexes and classes can be perpetrators of domestic violence. Domestic violence is perpetrated by both men and women, occurring in both same-sex and opposite sex relationships. Alcohol consumption and mental illness can further aggravate the abuse, and present additional challenges when present alongside patterns of abuse (Suryanarayana, 2010).

Domestic violence is a pattern of abusive behavior and control that could take any forms of abuses; physical, sexual and psychological.

2.6.1 Physical Violence: Physical violence is a pattern of assaults and threats used to control over another person. It includes punching, hitting, choking, biting, and throwing objects at a person, kicking and pushing and using a weapon such as a gun or a knife. Physical abuse usually escalates over time and may end in the woman's death.

Physical abuse may include spitting, scratching, biting, grabbing, shaking, shoving, pushing, restraining, throwing, twisting, slapping (with open or closed hand), punching, choking, burning, and/or use of weapons (e.g. household objects, knives, guns) against the victim. The physical assaults may or may not cause injuries. Sometimes a seemingly less serious type of physical abuse, such as a shove or push, can result in the most serious injury. The perpetrator may push the victim against a couch, a wall, down a flight of stairs, or out of a moving car, all of which could result in varying degrees of trauma (e.g. bruising, broken bones, spinal cord injuries). Sometimes the physical abuse does not cause a specific injury but does cause other health problems. For example, one perpetrator frequently abused his partner during meals and late at night. He would push,

restrain, and spit at his partner as well as abuse her verbally. While there were no visible injuries, the victim suffered from severe sleep deprivation and poor nutrition, since both her sleep and eating patterns were repeatedly interrupted by her abuser's conduct.

2.6.2 Sexual Abuse: Sexual abuse is the mistreatment or the control of a partner sexually. This can include demands for sex using coercion or the performance of certain sexual acts, forcing her to have sex with other people, treating her in a sexually derogatory manner and/or insisting on unsafe sex. Emotional and verbal abuse is the mistreatment and undermining of a partner's self-worth. It can include criticism, threats, insults, belittling comments and manipulation on the part of the batterer. Some perpetrators sexually batter their victims.

Sexual battering consists of a wide range of conduct that may include pressured sex when the victim does not want sex, coerced sex by manipulation or threat, physically forced sex, or sexual assault accompanied by violence. Victims may be coerced or forced to perform a kind of sex they do not want (e.g. sex with third Parties, physically painful sex, sexual activity they find offensive, verbal degradation during sex, viewing sexually violent material) or at a time they do not want it (e.g. when exhausted, when ill, in front of children, after a physical assault, when asleep). Some perpetrators attack their victims' genitals with blows or weapons. Some perpetrators deny victims contraception or protection against sexually transmitted diseases. The perpetrators' message to the victims is that they have no say over their own bodies. Sometimes victims will resist and are then punished, and sometimes they comply in hopes that the sexual abuse will end quickly. For some battered victims this sexual violation is profound and may be difficult to discuss. Some victims are unsure whether this sexual behavior is really abuse, while others see it as the ultimate betrayal.

2.6.3 Psychological Assaults: There are different types of psychological assaults which are as follows:

Threats of violence and harm

The perpetrator's threats of violence or harm may be directed against the victim or others important to the victim or they may be suicide threats. Sometimes the threat

includes killing the victim and others and then committing suicide. The threats may be made directly with words (e.g. "I'm going to kill you," "No one is going to have you," "Your mother is going to pay," "I cannot live without you") or with actions (e.g. stalking, displaying weapons, hostage taking, suicide attempts). Perpetrators may be violent towards others (e.g. neighbors, family members) as a means of terrorizing victims. Perpetrators may coerce victims into doing something illegal (e.g. prostitution, larceny) and then threaten to expose them, or may make false accusations against them (e.g. reports to Child Protective Services, to the welfare department, or to immigration).

Attacks against property or pets and other acts of intimidation

Attacks against property and pets are not random acts. It is the wall the victim is standing near that gets hit, or the door she is hiding behind that gets torn off of its hinges, the victim's favorite china that is smashed or her pet cat that is strangled in front of her, the table that she is sitting near that gets pounded or one of the perpetrator's favorite objects that gets smashed while he says, "Look what you made me do." The message to the victim is always, "You can be next." The intimidation can also be carried out without damage to property, by the perpetrator yelling and screaming in the victim's face, standing over the victim during a fight, driving recklessly when the victim or children are present, stalking, or putting the victim under surveillance. The intimidation may not always include a threat of physical harm, but may instead be carried out by damaging the victim's relationships with others or her reputation in her community by discrediting her with employers, ministers, friends, neighbors.

Emotional abuse

Emotional abuse is a tactic of control that consists of a wide variety of verbal attacks and humiliations, including repeated verbal attacks against the victim's worth as an individual or role as a parent, family member, friend, co-worker, or community member. The verbal attacks often emphasize the victim's vulnerabilities (such as her past history as an incest victim, language abilities, and skills as a parent, religious beliefs, sexual orientation, or HIV status). Sometimes the batterer will play "mind games" to

undercut the victim's sense of reality (e.g. specifically directing her to do something, then claiming that he never asked her to do it when she complies).

Sometimes emotional abuse consists of forcing the victim to do degrading things (e.g. going to the perpetrator's mistress' home to retrieve her children, getting on her knees and using a toothbrush to clean up food the perpetrator smeared on the kitchen floor, or going against her own moral standards).

Emotional abuse may also include humiliating the victim in front of family, friends or strangers. Perpetrators may repeatedly claim that victims are crazy, incompetent, and unable "to do anything right." These tactics of abuse are similar to those used against prisoners of war or hostages and they are used for the same purpose: to maintain the perpetrator's power and control. Emotional abuse in domestic violence cases is not merely a matter of someone getting angry and calling his partner a few names or cursing. Not all verbal insults between partners are acts of violence. In order for verbal abuse to be considered domestic violence, it must be part of a pattern of coercive behaviors in which the perpetrator uses or threatens to use physical force. In domestic violence, verbal attacks and other tactics of control are intertwined with the threat of harm in order to maintain the perpetrator's dominance through fear. While repeated verbal abuse is damaging to partners and relationships over time, it alone does not establish the same climate of fear as verbal abuse combined with the use or threat of physical harm.

The presence of emotionally abusive acts may indicate undisclosed use of physical force or it may indicate possible future domestic violence. There is no way at this time in domestic violence research to predict which emotionally abusive relationships will become violent and which will never progress beyond verbal abuse. If the victim feels abused or controlled or afraid of her partner without showing or offering clear descriptions of physical harm, then the cautious approach would be to accept the patient's views as stated and to respond with concerns about the victim's safety and psychological well-being (Ganley, 1998).

2.7 INTERNATIONAL LAWS ON DOMESTIC VIOLENCE

The problem of domestic violence is not facing by one nation or one country it is the problem of whole world. To tackle this problem there are various law on this issue which are made by United Nation.

International law and policy on domestic violence has developed primarily through the work of the United Nations in treaties resolutions, and conferences. The Special Rapporteur on Violence against Women also serves as an independent expert to the U.N. on issues encompassing domestic violence. These actors, along with activists around the world, have spent decades working to have domestic violence recognized as a violation of human rights, to raise awareness, conduct research, and promote education on the issue, and to establish state responsibility for private acts of domestic violence. Through their efforts, there is now clear guidance that not only is domestic violence a violation of human rights, but that states have a responsibility to prevent violence against women in all its forms, protect women from violence, punish perpetrators of violence against women, and provide reparations to victims³.

These are the main treaties, resolution and conference which are shows below related to domestic violence.

2.7.1 UN Treaties on Domestic Violence

Many treaties and conventions do not specifically mention domestic violence or violence against women, but they have still been interpreted as relevant to domestic violence. These include the Universal Declaration of Human Rights; the International Covenant on Civil and Political Rights; the International Covenant on Social, Economic, and Cultural Rights; the Convention on the Elimination of All Forms of Discrimination against Women, and the Convention against Torture.

UN Treaties on Domestic violence is recognized in international law as a violation of human rights. Although early international treaties only provided protection

33

³ International Domestic Violence Law http://www.stopvaw.org/the_international-legal-framework. Accessed 22/06/2016).

against domestic violence implicitly, in the 1990's domestic violence began to receive more explicit attention with the passage of the General Comment No. 19 by the Committee on the Elimination of Discrimination against Women (1992) and the Declaration of Elimination of Violence against Women (1993). The past two decades have also seen numerous resolutions from the UN General Assembly on violence against women, including one that specifically addressed domestic violence. This section will review the international treaties and resolutions impacting domestic violence, with a focus on three primary ways that domestic violence violates human rights: as a violation of basic freedoms such as the right to life and security of person, as a violation of the right to equality, and as a violation of the prohibition against torture.

The Right to Life, Liberty and Security of Person

Although early human rights law enacted by the United Nations did not specially mention violence against women, it is still relevant to domestic violence. In 1948, the Universal Declaration of Human Rights (UDHR) was adopted by the United Nations General Assembly⁴. Although this document was not originally binding on member states, it has received such wide acceptance as an outline of foundational human rights principles that it has been recognized as a binding expression of customary law and an authoritative interpretation of the UN Charter itself⁵. Article 3 of the UDHR states, "Everyone has the right to life, liberty and security of person". This right was reaffirmed in by the International Covenant on Civil and Political Rights (1966), which protects the right to life (Article 6) and the right to liberty and security of person (Article 9)⁷. These rights, as well as others in the UDHR, ICCPR, and the International Covenant on Social,

4

⁴Universal Declaration of Human Rights, G.A. res. 217A (III), U.N. Doc A/810 at 71 (1948), available at http://www.un.org/en/documents/udhr/index.shtml.

⁵See Antonio Augusto Cancado Trindade, "Universal Declaration of Human Rights," Audiovisual Library of International Law, http://untreaty.un.org/cod/avl/ha/udhr/udhr.html. ("The Universal Declaration, moreover, is today widely recognized as an authoritative interpretation of human rights provisions of the Charter of the United Nations itself, heralding the transformation of the social and international order to secure the enjoyment of the proclaimed rights.").

⁶Universal Declaration of Human Rights, *supra* note 1, Art. 3.

⁷International Covenant on Civil and Political Rights, G.A. res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 52, U.N. Doc. A/6316 (1966), 999 U.N.T.S. 171, *entered into force* Mar. 23, 1976, http://www2.ohchr.org/english/law/ccpr.htm. Accessed 22/07/2016.

Economic, and Cultural Rights (ICESCR),⁸ such as the right to equal protection under the law⁹ and the right to the highest standard of physical and mental health,¹⁰ are implicated in domestic violence cases. Therefore, States that are parties to these instruments have an implicit obligation to protect women from domestic violence as part of their obligations.

The Right to Equality and Freedom from Discrimination

Like the earlier human rights instruments, the main text of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), entered into force in 1981, did not explicitly include language on violence against women or domestic violence¹¹. As described by Rashida Manjoo, the current UN Special Rapporteur on Violence against Women, "States must acknowledge that violence against women is not the root problem, but that violence occurs because other forms of discrimination are allowed to flourish"¹². This view of violence against women as the most extreme manifestation on a continuum of discrimination led the Committee on the Elimination of All Forms of Discrimination against Women, the monitoring body of CEDAW, to adopt General Recommendation Number 19¹³. In 1999, the General Assembly adopted the Optional Protocol to the Convention on the Elimination of all Forms of Discrimination against Women¹⁴. The decisions for such communications and inquiries are published on the UN Women website¹⁵. Both procedures can only be used in cases where the State is a

_

⁸International Covenant on Economic, Social and Cultural Rights, G.A. res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 49, U.N. Doc. A/6316 (1966), 993 U.N.T.S. 3, *entered into force* Jan. 3, 1976, http://www2.ohchr.org/english/law/cescr.htm. Accessed 22/07/2016.

⁹ICCPR, *supra* note 4, Art. 14.

¹⁰ICESCR, *supra* note 5, Art. 12.

¹¹Convention on the Elimination of All Forms of Discrimination against Women, G.A. res. 34/180, 34 U.N. GAOR Supp. (No. 46) at 193, U.N. Doc. A/34/46, *entered into force* Sept. 3, 1981, http://www.un.org/womenwatch/daw/cedaw/text/econvention.htm. Accessed 22/07/2016.

¹²Rashida Manjoo, "Statement to the General Assembly," 3 (Oct. 10, 2011), available at http://www.un.org/womenwatch/daw/documents/ga66/RAPPORT_on_VAW.PDF.

¹³ Committee on the Elimination of Discrimination against Women, General Recommendation 19, Violence against women (Eleventh session, 1992), U.N. Doc. A/47/38 at 1 (1993), reprinted in Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies, U.N. Doc. HRI/GEN/1/Rev.6 at 243 (2003),available at http://www1.umn.edu/humanrts/gencomm/generl19.htm.

¹⁴Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women, 2131 U.N.T.S 83, UN Doc. A/RES/54/4, *entered into force* Dec. 22, 2000, available at http://www.un.org/womenwatch/daw/cedaw/protocol/text.htm.

¹⁵ Decisions/Views," Committee on the Elimination of Discrimination of Violence against Women, http://www.un.org/womenwatch/daw/cedaw/protocol/decviews.htm. *See also* "Optional Protocol to CEDAW," http://opcedaw.wordpress.com/communications/bydecisiontype/.

party to the Convention and the Optional Protocol. Currently 104 countries are parties to the Optional Protocol¹⁶.

The Right to Be Free from Torture

CEDAW Recommendation 19 also states that violence against women is a violation of the right not to be subject to torture or to cruel, inhuman or degrading treatment or punishment, as protected by UDHR Article 5 and ICCPR Article 7¹⁷. In recent years, the view has been affirmed by the Committee against Torture, which is the monitoring body of the Convention against Torture (CAT)¹⁸. The Convention Against Torture, which has been ratified by 151 states, strictly prohibits torture of any kind, with torture defined as any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted" for purposes such as obtaining information, punishment, intimidation or coercion, or any reason based on discrimination ¹⁹.

In clarifying State responsibility for torture by non state actors, the Committee specifically cited "States parties' failure to prevent and protect victims from gender based violence, such as rape, domestic violence, female genital mutilation, and trafficking" as a violation of CAT²⁰. In reviewing country compliance with CAT, the Committee and the Special Rapporteur on Torture routinely request information on the prevalence of domestic violence in a country. In particular, concern about torture²¹.

¹⁶Signatures and Ratifications, Optional Protocol to the Convention on the Elimination of All Forms of DiscriminationagainstWomen,http://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV 8b& chapter=4&lang=en.

¹⁷General Recommendation 19, *supra* note 11, at 7.

¹⁸ Committee against Torture," Office of the United Nations High Commissioner for Human Rights, available at http://www2.ohchr.org/english/bodies/cat/members.htm.

¹⁹Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, Art. 1, G.A. res. 39/46, annex, 39 U.N. GAOR Supp. (No. 51) at 197, U.N. Doc. A/39/51 (1984), *entered into force* June 26, 1987, available at http://www2.ohchr.org/english/law/cat.htm.

²⁰Committee against Torture, General Comment No. 2, 18, UN Doc. CAT/C/GC/2 (Jan. 24, 2008), available at http://www2.ohchr.org/english/bodies/cat/comments.htm.

²¹UN Treaties on Domestic Violence http://www.stopvaw.org/un_treaties_and_conventions 2/2 accessed 22/7/2016.

2.7.2 UN Resolutions on Domestic Violence

The Human Rights Council and the General Assembly have adopted numerous resolutions that address violence against women, including the Declaration on the Elimination of Violence against Women, Resolution 18/47, and many additional resolutions over the past few decades.

Domestic violence has also been addressed in numerous resolutions by both the Human Rights Council and the General Assembly. Although such resolutions do not have binding legal authority, they do set forth international standards and best practices. As the United Nations has stated, "While the Assembly is empowered to make only nonbinding recommendations to States on international issues within its competence, it has, nonetheless, initiated actions—political, economic, humanitarian, social and legal—which have affected the lives of millions of people throughout the world"²².

Declaration on the Elimination of Violence against Women

One of the most important resolutions on domestic violence is the Declaration on the Elimination of Violence against Women (DEVAW)²³. Adopted by the UN General Assembly in 1993, DEVAW establishes the most comprehensive set of standards in international law for the protection of women against sexual and gender based violence. DEVAW recognizes violence against women as "an obstacle to the achievement of equality" and a "manifestation of historically unequal power relations between men and women," as well as a violation of fundamental freedoms including the prohibition against torture.

The Declaration defines violence against women as "any act of gender based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life". This includes, but is not limited to,

²² "Functions and Powers of the General Assembly," United Nations, http://www.un.or/en/ga/about / background.shtml.

²³Declaration on the Elimination of Violence Against Women, G.A. res. 48/104, 48 U.N. GAOR Supp. (No.49) at217, U.N. Doc. A/48/49 (1993), available at. http://www.unhchr.ch/huridocda/huridoca.nsf/%28Symbol%29/A.RES.48.104.En?Opendocumnt

"physical, sexual and psychological violence occurring in the family". The Declaration not only declares that State actors should refrain from engaging in violence against women, but also asserts that States should take affirmative measures to prevent and punish violence committed by public and private actors alike and establish support networks to care for victims of gender based violence.

Resolution 18/147

In 2004, the UN General Assembly also specifically addressed domestic violence in Resolution 58/147, entitled "Elimination of domestic violence against women"²⁴. In this important resolution, the General Assembly, recognizing that domestic violence is a human rights issue with serious immediate and long term implications, strongly condemned all forms of domestic violence against women and girls and called for an elimination of violence in the family. The resolution also recognized:

- (a) That domestic violence is violence that occurs within the private sphere, generally between individuals who are related through blood or intimacy;
- (b) That domestic violence is one of the most common and least visible forms of violence against women and that its consequences affect many areas of the lives of victims;
- (c) That domestic violence can take many different forms, including physical, psychological and sexual violence;
- (d) That domestic violence is of public concern and requires States to take serious action to protect victims and prevent domestic violence; and
- (e) That domestic violence can include economic deprivation and isolation and that such conduct may cause imminent harm to the safety, health or wellbeing of women.

The General Assembly also included in the resolution dozens of specific actions that States should take to eliminate domestic violence, including strengthening legislation, providing training to public officers, improving police response, and creating educational

38

²⁴ "Elimination of domestic violence against women," GA Res. 58/147, UN Doc. A/RES/58/147 (Feb. 19, 2004), available at http://www.undemocracy.com/ARES58147. pdf.

campaigns. Special session of the General Assembly, entitled "Women 2000: gender, equality, development and peace for the twenty-first

2.7.3 UN Conference Documents on Domestic Violence

The international community has come together to fight domestic violence at various international conferences, including the Conference in Copenhagen, the World Conference on Women in Nairobi, and the Beijing Conferences. The documents produced, while not binding, serve as important resources for establishing a consensus on ending domestic violence throughout the world.

Conference Documents on Domestic Violence

United Nations conference documents also address the issue of domestic violence. They are widely recognized as consensus documents—that is, documents reflect an international consensus on the state of international law. While not legally enforceable, they are, as one writer states, "signposts of the direction in international human rights law is developing and should influence states that have accepted a commitment of progressive development toward enhanced respect human rights in their international conduct and domestic law"²⁵. The primary organizer of the conferences has been the Commission on the Status of Women (CSW)²⁶. In addition to hosting expert group meetings²⁷ and annual sessions for UN representatives, the CSW has also organized the world conferences on women. These world conferences, which Mexico City (1975),²⁹ Copenhagen (1980),³⁰Nairobi (1985),³¹ and Beijing (1995),³² represent important opportunities for

25

²⁵Rebecca J. Cook, the Elimination of Sexual Apartheid: Prospects for the Fourth World Conference on Women 29 (1995).

²⁶"Commission on the Status of Women," UN Women, http://www.un.org/womenwatch/daw/csw/index .html.

²⁷ "Expert Group Meetings," UN Women, http://www.un.org/womenwatch/daw/documents/egm.htm.

²⁸ Documentation for each session can be found at http://www.un.org/womenwatch/daw/csw/index.html.

²⁹ "Report of the World Conference of the International Women's Year," First World Conference on Women, Mexico City, UN Doc E/CONF.66/34, June 19July 1975, full report available at http://www.un.org/womenwatch/daw/beijing/mexico.html.7/29/2016 UN Conference Documents on Domestic Violence http://www.stopvaw.org/UN_Conference_Documents 2/3

³⁰ "Report of the World Conference of the United Nations Decade for Women: Equality, Development and Peace," Second World Conference on Women, Copenhagen, UN Doc A/CONF.94/35, July 1430, 1980, full report available at http://www.un.org/womenwatch/daw/beijing/copenhagen.html

³¹ "Report of the World Conference to Review and Appraise the Achievements of the United Nations Decade for Women: Equality, Development and Peace," World Conference on Women, Nairobi, UN Doc

policymakers and other interested to discuss ongoing challenges, reaffirm foundational doctrines, set goals and create action points, and review progress in implementing the work of past conferences.

Conference in Copenhagen

In 1980 the Conference in Copenhagen adopted a resolution on "battered women and violence in the family," making it the first time domestic violence was explicitly addressed at an official UN meeting³³. Finally, the conference's Legislative Measures section advises, "Legislation should also be enacted and implemented in order to prevent domestic and sexual violence against women. All appropriate measures, including legislative ones, should be taken to allow victims to be fairly treated in all criminal procedures"³⁴.

World Conference on Women in Nairobi

At the 1985 World Conference on Women in Nairobi, abused women, including victims of domestic violence, received significant attention as an "Area of Special Concern"³⁵.

Second World Conference on Human Rights

In 1993, domestic violence was addressed again at the Second World Conference on Human Rights. Because this was a general human rights conference, forum dedicated specifically to women's issues as the past conferences were, it indicates how domestic violence had risen as an issue of international importance. The Vienna Declaration and Programme of Action, which was adopted at the conference, stressed that the human rights of women "should form an integral part the United Nations human rights

A/CONF.116/28/Rev.1, July 1526, 1985, full report available at http://www.un.org/womenwatch/daw/beijing nairobi.html

³²CReport of the Fourth World Conference on Women," Fourth World Conference on Women, Beijing, UN Doc .A/ CONF. 177/ 20/ Rev .1,Sept. 415, 1995, fullavailableat http://www.un.org/womenwatch/daw/beijing/pdf/Beijing%20full%20report%20E.pdf.

³³ Report of the World Conference of the United Nations Decade for Women: Equality, Development and Peace," *supra* note 7, Resolution 5, pg. 67.

³⁴*Id.* at Legislative measures/65, pg. 20.

³⁵ Report of the World Conference to Review and Appraise the Achievements of the United Nations Decade for Women: Equality, Development and Peace," *supra* note 8.

activities" and highlighted "the importance of working towards the elimination of violence against women in the public and private life" 36.

Fourth World Conference on Women

Violence against women, including domestic violence, was a major focus at the 1995 Fourth World Conference on Women in Beijing, China. The conference which includes the Beijing Declaration and Beijing Platform for Action identifies violence against women as a "Critical Area of Concern" and included it in the "Human Rights" section³⁷.

2.7.4 Beijing Conference

A conference to review achievements and obstacles to the goals set out by the Beijing Conference has been subsequently held every five years. At held in 2000, the final report detailed achievements in violence against women goals, including, among many other things, an "increased awareness of and commitment to preventing and combating violence against women and girls, including domestic violence, which violates and impairs or nullifies the enjoyment their human rights and fundamental freedoms, through *inter alia*, improved legislation, policies and programmes" Similar reviews were held at plus 10 (2005)³⁹ and Beijing plus 15 (2010)⁴⁰. These reviews include not only submissions by countries as to what they are doing to implement the Beijing Platform, but also a number of specialized resolutions that touch on issues such as the relationship between HIV/AIDS and domestic violence and domestic violence in

2

³⁶ceVienna Declaration and Programme of Action," World Conference on Human Rights, 18, 38, UN Doc. A/CONF.157/23,June1425,1993,fulltextavailable http://www.unhchr.ch/huridocda/huridoca nsf/ (Symbol)/A.CONF.157.23.En?OpenDocument.

³⁷ Report of the Fourth World Conference on Women," *supra* note 9.

³⁸ "Further actions and initiatives to implement the Beijing Declaration and Platform for Action," 13, GA Res. S23/3,UNDoc.A/RES/S23/3(Nov.16,2000),text available at http://www.un.org/womenwatch/daw/followup/ress233e.pdf.

³⁹ "Commission on the Status of Women: Report of the 49th Session," Economic and Social Council, UN Doc. E/2005/27E/CN.6/2005/11(2005), full text available at http://www.responsibilitytoprotect.org/files/CSW_Final_Report.pdf.

⁴⁰ "Commission on the Status of Women: Report of the 54th Session," Economic and Social Council, UN Doc. E/2010/27E/ CN.6/2010/11 (2010), full text available at http://www.unhcr.org/refworld/pdfid/4e78b 74b2.pdf.

Afghanistan. All of the Beijing follow up documents, including individual country submissions, can be found on the UN Women website.

2.7.5 The UN Special Rapporteur

The UN Special Rapporteur on Violence against Women plays a key role in helping to end domestic violent. The Special Rapporteur visits countries throughout the world, gathers information, reports to the UN Human Rights Council, and makes recommendations to governments and agencies. The UN Commission on Human Rights made its first appointment to the position of Special Rapporteur on Violence against Women, Including Its Causes and Consequences.

2.7.6 State Responsibility for Domestic Violence

While traditionally, international law was seen as inapplicable to domestic violence because it is performed by individuals rather than governments of nations, in the past few decades, the development of the Due Diligence Standard has changed perspectives on the applicability of international law to the private sphere. State Responsibility for Domestic Violence. One hindrance to the effort to define domestic violence as a human rights violation was the traditional view that international law is applicable only to state action. State action involves two types of acts: 1) actions done by government officials or 2) actions by private citizens that were explicitly condoned or ordered by the government. Private actors, it was thought, should be regulated only be domestic law, not by international law. This left a gap in the protection created by international human rights law, however, as many human rights violations occur at the hands of ordinary citizens, not just government officials. In domestic violence cases in particular there were questions about whether governments could be held responsible for actions that some viewed to be outside the domain of international law, namely abuse occurring in a private home between intimate partners.

2.8 NATIONAL LAWS ON DOMESTIC VIOLENCE

The Central Government and every State Government shall take all measures to insure that the Central Government and State Government officers including the police

officers and the members of the judicial services are given periodic sensitization and awareness training on the issues addressed by [The Protection of Women from Domestic Violence Act] the principle of gender equality is enshrined in the Indian Constitution in its Preamble, Fundamental Rights, Fundamental Duties and Directive Principles. The Constitution not only grants equality to women, but also empowers the State to adopt measures of positive discrimination in favour of women. Within the framework of a democratic polity, our laws, development policies, Plans and programmes have aimed at women's advancement in different spheres. India has also ratified various international conventions and human rights instruments committing to secure equal rights of women. The provision under International Scenario relating to domestic violence has been discussed in United Nations Charter of 1945, Universal Declaration of Human Rights of 1948.

The Vienne Accord of 1994 and Beijing Declaration and the platform for Action 1995 and Committee on Discrimination against Women (CEDAW) are the major agencies that prevent domestic violence in the world. India signed the Convention on Elimination of Discrimination against Women (CEDAW) on 30th July 1980 and ratified it on 9th July 1993 with one reservation and two declaratory statements. The convention obligates the State parties to undertake appropriate legislative and other measures to eliminate discrimination against women and for guaranteeing them the exercise and enjoyment of human rights and fundamental freedom on the basis of equality with men. Violence against women is not a new phenomenon. Women have to bear the burns of domestic, public, physical as emotional and mental violence against them, which is to a large extent linked to her status in the society. In the 2005 UN Population Fund Report it was found that 70 percent of the married women in India between 15 - 49 are victims of beating, rape or forced sex.

In India around 40 per cent of married women are physically assaulted by their male partner National Crime Record Bureau (NCRB) registers a case of cruelty by husband and relatives in every nine minutes. Although provision under Indian Scenario a women in India is awarded with the fundamental right of gender equality and right to life and liberty, ensuring dignified and equal status of that of a man under the constitution of

India oriented conspiracy has prevented the significant contributions of women from receiving due recognition. Provision relating to domestic violence under Indian legal scenario has been discussed under four broad heads (i) Constitution Law, (ii) Criminal Law, (iii) Civil Law and (iv) Special Law.

2.8.1 Provision under Constitution Law: Constitution has the originating source of all women's right and all Indian laws are emerged from and clothed with sanctity by the constitution. Social justice is the key stone of Indian Constitution. One facet of it gender justice, which is composite concept. The principle of the gender equality is enshrined in the Indian constitution, its preamble fundamental rights, fundamental duties and directive principles. Fundamental rights receive its treatment under Article 12-35 of the constitution and include such principles as right to equality, right to freedom, right against exploitation, right to religion, right to culture and education saving of certain laws and rights to constitutional remedies. All laws are applying to both members of both sexes equally.

There is express restriction against discrimination on the ground sex. But women have been always discriminated. Self sacrifice and self denial are their nobility and fortitude and yet they have been subjected to all in equalities, indignities and discrimination. The part IV of the constitution constitutes the Directive principle of state policy are unique novel in so far as they depict the ambitious and aspirations of the constitution. Certain directive principles which directly concern women has been mentioned under Article 14, 15, 15(3), 16, 39(a), 39(d), 39(e), 39(f), 42 and 44. The protection under fundamental duties the constitution after 42nd Amendment has incorporated a separate chapter on Fundamental duties under Article 51 A. Article 51 A (e) says that "it shall be the duty of every citizen of India renounce practice derogatory to the dignity of women". This provision founds its manifestation through the enactment of "the Indecent Representation of women (Prohibition) Act 1986.

2.8.2 Provision under Criminal Law: Criminal law deals with offences and their punishment. Crimes against women constitute an important segment of law that is constantly being reviewed and revised to ensure adequate protection of the women's rights (Kaushik, 2007). In 1983, domestic violence was recognized as a specific criminal

offence by the introduction of section 498-A into the Indian Penal Code. Indian Penal Code has made no demarcation between violence against women and domestic violence, but the Act has specifically dealt with offences against women when one glances at various provision says for the matter u/s 294, 304B, 312, 313, 314, 316, 317, 354, 366-A, 366-B, 375, 376, 494, 495 of IPC. But these are general crimes against women whether by members of the family or outsider. However, its section 494, 498A which contains the terms in their rudimentary form promoting towards offences by near relatives like family members. Section 498A was introduced in the IPC for providing criminal law remedies for protection against domestic violence. The feminist campaign also led to inclusion of section 304B (dowry death) in the IPC in 1986 and corresponding provision in the Indian Evidence Act 1872. These criminal law reforms held a great promise to certainty and severity of legal responses to domestic violence.

2.8.3 Civil Law Relating to Domestic Violence: Civil laws deal with the rights and obligations of people and what is needed to protect them. Indian civil law does not recognize domestic violence as an issue in itself the one only specific recognition of domestic violence is the concept of "cruelty" as a ground of divorce and judicial separation even this ground applies in restricted circumstances and does not cover all aspects of domestic violence. The basic principle in general civil law is that an invasion of a right or a threat of such an invasion would entitle a person to mandatory or prohibitive injunction as a means of preventing injury. Other Civil Law relevant to situations of domestic violence is with respect to maintenance and custody and guardianship of children like the Hindu Adoption and Maintenance Act, 1956, the Muslim Women Protection on Divorce Act, the Indian Divorce Act, 1869. The Paris Marriage and divorce Act, 1936 and have widely varying provision of maintenance.

2.8.4 The Special Law or the Protection of Women from Domestic Violence Act, **2005**: It was only in 2005 that the parliament thought it proper to legislate on the specific issue of Domestic violence against the women. In the result Domestic Violence Act, 2005 has come into existence. The Act deals with aims and objective of the Act. The objective of the protection of women from Domestic Violence Act, 2005 states that it is "an act provide move effective protection to the rights of women guaranteed under the

constitution who are victims of violence of any kind occurring within the family and for matters connected therewith or incidental thereto". According to Section 3 of the Act, "any act, omission or commission or conduct of the respondent shall constitute domestic violence in case it - (a) harms or injures or endangers the health, safety, life, limb or well-being, whether mental or physical, of the aggrieved person or tends to do so and includes causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse; or (b) harasses, harms, injures or endangers the aggrieved person with a view to coerce her or any other person related to her to meet any unlawful demand for any dowry or other property or valuable security; or (c) has the effect of threatening the aggrieved person or any person related to her by any conduct mentioned in clause (a) or clause (b); or (d) otherwise injures or causes harm, whether physical or mental, to the aggrieved person.

The Protection from Domestic Violence Act, 2005 recognizes different forms of violence and seeks to give a broader definition to what constitutes domestic violence. Article 11 of the Act mentions: "All acts of gender based physical, psychological and sexual by a family members against women in the family, ranging from single assaults to aggravated physical battery, kidnapping, threats, intimidation, coercion, stalking humiliating verbal abuse, forcible or unlawful entry, arson, destruction of property, sexual violence, female genital mutilation, violence related to exploitation through prostitution, violence against workers an attempts to commit such acts shall be termed "Domestic Violence". Thus, the protection of women from Domestic violence Act 2005 provides immediate emergency remedies for women facing violence such as protection orders, non-molestation orders, the right to reside in the shared households etc. Now, there is a great need to adopt a coordinated approach including civil and criminal law remedies in order to effectively address violence against women within the home and all provision of the IPC as well as the new civil law must be taken as complementary to each other (Singh.et.al, 2009; Jaising, 2007; Goel, 2009; Kushal, 2010; Das, 2007; and Nair, 2011).

2.9 STATE LAWS ON DOMESTIC VIOLENCE

Any act of violence or abuse against a single women, sister, widows, mother, daughters or even women in live-in relationship amounts to domestic violence. Women can seek protection under the protection of women under domestic Act, 2005.

In the domestic sphere though Sikkimese society is not known for women oppression in the form of dowry, sati, female infanticide etc. but there is widely presence of Domestic Violence and Violence against women by the study conducted by Society for Promotion of Art, Culture, Education and Environment Excellence (SPACE) which emphasis "that 50 percent of women are battered by men and almost 4.8 percent by their in laws/relatives with the approval of their husband" (SPACE; 2002) and in their research strongly recommended for the constitution of body (Government and NGO's) which will ensure protection of women from domestic violence.

In order to prevent domestic violence against women The Sikkim State Commission for Women was constituted to help and support the women in distress and "to act on the violation of women rights". Since its formation "1015 cases were settled out of 1050 cases and 35 cases were referred to the courts". The major objective of Commission is to settle dispute between the families rather than to break the families and to make women aware of her legal rights (State Women Commission; 2011). In the beginning there were only 13 cases but every year the cases started to increase 15 which also proves that women started to be more aware of their rights and also about the places where their grievances could be heard, in most of the cases the dispute were settled peacefully and if the cases were unsettled it was referred to courts where the Commission provided advocates for the women victim free of cost (Subba, 2014).

CHAPTER - 3

THE PATTERN OF ALCOHOL CONSUMPTION AND PRODUCTION IN INDIA

3.1 INTRODUCTION

Alcohol has used since the beginning of recorded history and has been widely consumed since prehistoric times around the world. It is the oldest and most widely diffused intoxicating substance known to man. Alcohol consumption is an integral part of social fabric in most societies. As per the written records available, it is clear that the production and consumption of alcohol were integrated in to social and religious life among different communities at different parts of the world. Further alcohol has been playing a significant role in many cultures in Neolithic Era, Ancient Egypt, Ancient Greece, Ancient, Epic Medieval and modern India. Be it a business event or informal party, alcoholic beverages have always graced the occasion. Alcohol has, since time immemorial, been an indispensable part of all celebrations, be it birthdays, parties, anniversaries or any other occasion.

Drink continues to be an integral part of the social elixir, globally. For centuries, alcohol has played a significant role in religion, medicine and culture. Even today, marriages, birthdays, holidays and religious events are typically celebrated with alcohol as a focal point, and moderate alcohol consumption is credited with reducing stress, producing euphoria and even enhancing certain cognitive performance.

In India, alcohol is consumed individually, socially, ritualistically, and mostly to get drunk. It is consumed to celebrate (at parties, official gatherings, social and even religious events) as well as to commiserate (to overcome stress and sadness, recession, to cope with financial or other losses). This makes the alcohol industry quite robust, ever in demand, and recession proof. But this indulgence has serious consequences - alcohol consumption has lead to a huge public health, social, and economic burden. Alcohol is regulated by state excise policies which cover multidimensional issues of alcohol control possession, production, manufacture, selling, buying, and transport of liquor.

India has one of the largest alcoholic beverage industries in the world, producing 65% of the alcohol in South – East Asia. It also contributes to about 7% of the total alcoholic beverage imports into the region.

Drinking behavior is changing in India, with differences narrowing between younger and older adults and between men and women as more and more women and youth taking up drinking. As per the capita consumption of alcohol is increasing, it also leads to rise in consumption of alcohol in heavy drinkers and this in turn raises the rate of alcohol related harm. Alcohol producers are responding with new innovations and by creating and reinventing categories to boost growth in both volume and value. Alcohol advertising and marketing is transforming, with the use of new approaches and the social media becoming increasingly important in shaping consumer perspectives and choices. India is a diverse country and so it has diverse drinking patterns. It is generally considered a dry country, but the trends are changing now. Different parts of the country have different drinking practices.

There is no uniform drinking pattern. It was observed that there are certain factors which are responsible for the growth of Indian alcoholic beverage industry. Urbanization: More and more people are migrating towards bigger cities, where they are exposed to a wider variety of alcoholic products, including Indian Made Foreign Liquor IMFL. Favourable demographics: India is a young country, with more than 60 percent of Indians falling in the 15-45 years age group. This is the cohort the industry targets as potential customers. About 485 million Indians are currently of drinking age and another 150 million will be added to this group in the next five years. Changing social norms: Over the years, there has been a change in attitudes, making consumption of alcohol more socially acceptable. This acceptability extends to drinking in family environments, at social events, and by females/youngsters. Rise in disposable income: More and more Indians are now moving towards the upper/middle-income group. The per capita income has witnessed a continuous growth, from just over Rs. 27,000 in 2006 to over Rs. 54,000 in 2011 (projected: over Rs. 100,000 in 2015). Increased alcohol accessibility and availability. There has been an increase in the variety of alcohol brands and types and all of them are easily available in government-licensed outlets, government shops

(monopolies), private licensed retail chains (permitted since the past couple of years), restaurants, and bars. Other factors that have been conducive to the industry include relaxed overseas trade rules, the availability of alternative and innovative means of targeted marketing and promotion, and the propagation of beliefs such as the health benefits of alcohol consumption. The influence of these factors is visible in the increase in alcohol consumption.

India is regarded as a traditional dry country it is the dominant producer of alcohol in the South-East Asia region 65 percent and contributes to about 7 percent of the total alcohol beverage imports into the region. More than two thirds of the total beverage alcohol consumption within the region is in India. There has been a steady increase in the production of alcohol in the country, with the production doubling from 887.2 million liters in 1992-93 to 1,654 million liters in 1999-2000 and it was almost 2300 million liters by 2006-07. India is experiencing a massive increase in alcohol consumption. This is coupled with the initiation age decreasing on an alarmingly. The recorded market and consumption levels are still very low as compared to the global standard. The illicit market consumption is far more than legal sales. Country liquor is a distilled alcoholic beverage made from locally available cheap raw material such as sugarcane, rice, palm, coconut and cheap grains, with alcohol content between 25-45 percent. Common varieties of country liquor are arrack, desi sharab and toddy.

Illicit liquor is mostly produced in small production units with raw materials similar to that used for country liquor. With no legal quality control checks on them, alcohol concentration of illicit liquor varies (up to 56 percent). Adulteration is quite frequent, industrial methylated spirit being a common adulterant, which occasionally causes incidents like hooch tragedies. Cheaper than licensed country liquor, illicit liquor is popular among the poorer sections of the population.

In many parts of India, illicit production of liquor and its marketing is a cottage industry with each village having one or two units operating illegally. Toddy is an alcoholic drink made by fermenting the sap of coconut or palm. It is white and sweet with a characteristic flavor. It has between 4 - 6 percent alcohols and has a shelf life of about 24 hours Toddy is popular among the lower socioeconomic groups in south India.

Besides these, home production for self-consumption is also common in some parts of India. Toddy is brewed all along the coast. Besides toddy, home fermentation and distillation is also common in several tribal areas in the country, especially the north-eastern region of the country.

State Wise Alcohol Consumption in India

Here we can see the state wise alcohol consumption in India from the year 2011 to 2012 which shows below in the table.

Table No 3.1
State Wise Alcohol Consumption per Capita per Week (In Ml) As of 2011-2012

| State Wise Alcohol Consumption per Capita per Week (III WI) As of 2011-2012 | | | | | |
|---|-----------------------------|---------------------------------|--|--|--|
| State and Union Territories | Toddy and Country Liquor | Beer, Imported Alcohol, Wine | | | |
| Andaman and Nicobar Island | 656 | 532 | | | |
| Andhra Pradesh | 561 | 104 | | | |
| Arunachal Pradesh | 749 | 346 | | | |
| Assam | 304 | 19 | | | |
| Bihar | 266 | 17 | | | |
| Chandigarh | 37 | 42 | | | |
| Chhattisgarh | 120 | 27 | | | |
| Dadra and Nagar Haveli | 2,533 | 498 | | | |
| Daman and Diu | 252 | 1,079 | | | |
| Delhi | 55 | 86 | | | |
| Goa | 47 | 108 | | | |
| Gujarat | 53 | 3 | | | |
| Haryana | 89 | 43 | | | |
| Himachal Pradesh | 149 | 73 | | | |
| Jammu and Kashmir | 32 | 7 | | | |
| Jharkhand | 320 | 14 | | | |
| Karnataka | 23 | 102 | | | |
| Kerala | 94 | 102 | | | |
| Lakshadweep | 0 | 0 | | | |
| Madhya Pradesh | 133 | 12 | | | |
| Maharashtra | 65 | 19 | | | |
| Manipur | 155 | 6 | | | |
| Meghalaya | 74 | 49 | | | |
| Mizoram | 29 | 2 | | | |
| Nagaland | 159 | 23 | | | |
| Odisha | 146 | 20 | | | |
| Puducherry | 154 | 144 | | | |
| Punjab | 141 | 50 | | | |

| Rajasthan | 80 | 43 |
|---------------|-----|-----|
| Sikkim | 41 | 307 |
| Tamil Nadu | 20 | 85 |
| Tripura | 163 | 2 |
| Uttar Pradesh | 34 | 5 |
| Uttarakhand | 38 | 43 |
| West Bengal | 74 | 12 |

Note: prohibition has been lifted in Mizoram and imposed in Kerala since the survey. Also Andhra Pradesh has split into Andhra Pradesh and Telengana since.

Source: National Sample Survey Office the Hindu news report, 2014.

Dadra and Nagar Haveli, Arunachal Pradesh, Andaman and Nicobar Islands, Andhra Pradesh, Daman and Diu, Sikkim and Puducherry are clearly among the highest consumer of alcohol and spirits in the country. The Table 3.2 presents the state wise production of alcohol in India from the year (2009-2010 to 2014 - 2015). Through this table we can easily understand that in India how alcohol production in increase year by year see the difference in the table.

Table No. 3.2 Shows the State Wise Production of Alcohol in India

| Shows the State Wise I Toutetion of Arconor in India | | | | | | | |
|--|---------|---------|---------|---------|---------|---------|--|
| Selected State-Wise Production of Alcohol In India: 2009 -10 To 2014 -15 | | | | | | | |
| (in Million Litre) | | | | | | | |
| States/UT | 2009-10 | 2010-11 | 2011-12 | 2012-13 | 2013-14 | 2014-15 | |
| Andhra Pradesh | 63.84 | 114.96 | 130.56 | 120.00 | 80.75 | 70.50 | |
| Bihar | 30.00 | 47.52 | 54.00 | 72.75 | 83.75 | 68.25 | |
| Gujarat | 122.40 | 141.12 | 106.56 | 123.50 | 120.50 | 131.00 | |
| Haryana | 31.44 | 51.12 | 66.24 | 65.25 | 70.50 | 70.50 | |
| Karnataka | 257.76 | 364.80 | 605.52 | 375.25 | 421.50 | 514.00 | |
| Maharashtra | 585.84 | 789.60 | 756.96 | 731.50 | 682.50 | 963.75 | |
| Punjab | 22.32 | 36.72 | 45.84 | 55.25 | 55.75 | 63.50 | |
| Tamil Nadu and Puducherry | 165.36 | 241.92 | 299.76 | 264.75 | 195.50 | 180.50 | |
| Telengana | - | - | - | - | 37.25 | 35.25 | |
| Uttar Pradesh | 685.44 | 777.12 | 924.72 | 1034.00 | 873.50 | 918.50 | |
| Uttarakhand | 36.48 | 37.20 | 42.00 | 44.75 | 38.25 | 41.00 | |
| Others | 15.12 | 30.96 | 34.80 | 40.00 | 60.75 | 63.75 | |
| India | 2016.00 | 2633.04 | 3066.96 | 2936.00 | 2720.50 | 3120.50 | |

Source: Indiastat⁴¹

⁴¹Lok Sabha Unstarred Question No. 1652 and Lok Sabha Unstarred Question No. 2612, Indiastat http://www.indiastat.com/table/industries/18/alcohol19752016/452382/766658/data.aspx, Accessed on 23/07/2016.

India is one of the largest producers of alcohol in the world and contributes to 65% of production and nearly 7% of imports into the region. The precise estimate of unrecorded alcohol production is not clearly known. It is estimated that the amount of alcohol produced in India during 2006 – 07 may have been approximately 4 million liters. The bulk alcohol produced in India is mainly from sugarcane molasses. Roughly 52% of alcohol produced in India is for potable purpose.

Among the predominant alcohol products, Indian made foreign liquor and country liquor account for nearly 60 to 70% of the total beverage alcohol consumed. The traditional homebrewed beverages accounts for a large extend of unrecorded consumption (Edayaranmula, 2014).

3.2 THE ALCOHOL CONSUMPTION IN NORTH-EAST INDIA SCENARIO

North-East India is in the thick of drug abuse. Apart from the widespread use of alcohol rising, the youth have taken to the use of other psychotropic drugs like heroine and brown sugar, which is an adulterated form of heroine. The states of Nagaland, Manipur and Mizoram lead the pack. Besides heroine, the addicts resort to pharmaceutical drugs, because they are cheaper and easily available.

Pharmaceutical drugs are those, which are produced for treating illness, but are used, in high doses to get 'high'. Cough syrups, painkillers like proxivon, pethidine etc. are the favorites. The younger generation taking to drugs by inhaling dendrite, petrol etc. Children take to drugs for reasons of curiosity, peer pressure, and as a means of rebellion-to prove their adulthood. But there are many other reasons for the rise in drug abuse and alcohol consumption in the NE India.

- The different ethnic groups have been traditionally producing and consuming rice beer
- Many of the ethnic groups have been exposed to western culture more than others in other parts of India.
- Insurgency which breeds social anomie

- The wide presence of the security personnel, which makes IMFL available cheaper.
- Fast changing face of the tribal social control systems

The tribal societies are basically agrarian. They have used the rice beer, known in many places as 'Modhu', usually contained alcohol up to 15% as a common drink. But for the rest it was an energy rich drink. It provided instant energy for the workman. It also provided the lubricant factor for the many feasts the society had. So drinking had not created a major health problem. With the advent of the distilled spirits, the rice beer has been relegated to the background and the IMFL has usurped the place of the traditional drinks (Karinthayil, 2005).

3.3 PATTERN OF ALCOHOL CONSUMPTION AND PRODUCTION IN NORTHEAST INDIA STATEWISE

Northeast region of India is mainly dominated by the tribal peoples. In Northeast region there are mainly eight States namely Assam, Arunachal Pradesh, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim and Tripura. Most of the parts in Northeast India the alcohol has banned but local made drinks are widely available and consumed.

The Use of Alcohol in Northeast States of India

The State-wise use of alcohol in northeastern States of India is presented in Table 3.3 for the year 2005-2006 which indicates that that the highest use of alcohol in Arunachal Pradesh and lowest in Assam among the Northeastern States of India. It can also be seen from this Table that the percentage of women consume alcohol is highest in Arunachal Pradesh (33.6 %) followed by Sikkim (19.1 %) and lowest ever in Mizoram with merely (0.7 %).

Table No: 3.3
Use of Alcohol in Northeastern States of India, 2005-2006

| Northeastern States | Women (%) Who drink alcohol | Men (%) Who drink alcohol |
|---------------------|--------------------------------|------------------------------|
| Arunachal Pradesh | 33.6 | 61.1 |
| Assam | 7.5 | 37.8 |
| Manipur | 1.8 | 47.4 |
| Meghalaya | 3.8 | 49.2 |
| Mizoram | 0.7 | 42.0 |
| Nagaland | 3.5 | 38.5 |
| Sikkim | 19.1 | 45.4 |
| Tripura | 9.6 | 40.9 |
| India | 2.2 | 31.9 |

Note: Percentage of women and men: 15 - 49 years. *Source: National Family Health Survey 2005 - 2006.*

3.3.1 ARUNACHAL PRADESH

According to the data from the National Sample Survey between July 2011 and June 2012 has revealed that an Arunachalee spends Rs 127.32 each month to quench his thirst while the all India average is Rs 20.26. The state tops the list in the "all alcohol" category. During 2011 and 2012, the state's per capita income was Rs 72,091 or Rs 6,007.58 per month, which means that people spent more than two per cent of their earnings on liquor. Arunachal Pradesh is followed by Sikkim. In fact, it beat Kerala, known for its huge consumption of alcohol. While the predominantly tribal dominated population is exempted from income tax, the Arunachal Pradesh government earned more than Rs 58 corer revenue from liquor sale during 2014 and 2015.

In September 2013, former Roing MLA Laeta Umbrey tried to move a resolution for prohibition on Indian made foreign liquor and beer. He later withdrew the motion after overwhelming opposition from almost all MLAs. Apart from the "all alcohol" category, the state also topped the average spending list in the "country liquor" category at Rs 44.01, beating Punjab (Rs 43.99).

While people in Sikkim spent most on beer at Rs 37.05, Arunachal came in a close second at Rs 30.8. The third highest spenders on beer are Goans who shelled out Rs 16.17. Kerala (Rs 61.08), Sikkim (Rs 61.01) and Andhra Pradesh (Rs 54.46) topped the

spending list in the "foreign liquor and wine" category. Arunachal Pradesh came fourth at Rs 51.86. The northeastern states of Mizoram and Meghalaya showed significantly high spending on "paan (all types)" and cigarettes. On an average, Mizos spent Rs 149.09 on *paan* to top the list while second placed Meghalaya spent Rs 110.66. Assam and Meghalaya are high producers of betel nut. Not surprisingly, other northeastern states, except Sikkim, rounded off the top seven spots in spending on areca nut Manipur (Rs 85.75), Nagaland (Rs 69.47), Assam (Rs 59.72), Tripura (Rs 57.37) and Arunachal Pradesh (Rs 25.54). Spending on cigarettes too is high in the region with Mizoram (Rs 103.62) and Meghalaya (Rs 62.11) claiming first and second spot while Manipur came in third (Rs 40.01) ⁴².

3.3.2 ASSAM

Assam is the largest state of Northeast region compared to the other states. The consumption of alcoholic beverages is no longer a social taboo and consumed by all sections of society in Assam, be it rich or poor, young or old and male or female. As people are gradually emerging out of the cocoon of an orthodox and closed society to that of a more open and liberated one, statistical data portrays that more and more people specifically the youngsters find drinking no more a taboo. As more and more people travel overseas for business and pleasure, adopt new lifestyle patterns and yearn for the good things in life, domestic liquor consumption too has correspondingly increased.

City dwellers still remain the major guzzlers, prices notwithstanding. Globalization has brought with it not just increasing prosperity, but a different drinking culture for which Assam is turning out to be an attractive territory, unexplored destination and considered as a lucrative market for alcoholic beverages. Further the state is surrounded by three prohibited states like Manipur, Mizoram and Nagaland and it is also bordering four wet states namely Arunachal Pradesh, Meghalaya, Tripura, West Bengal and two countries Bangladesh and Bhutan which makes an attractive business proposition for the liquor industry. In alcoholic beverages market of Assam most prominent segment

_

⁴² Dodum, Ranju (2015). *Arunachal tops booze list-state beats Punjab in Country Liquor Category*. The Telegraph. Calcutta, India (http://www.telegraphindia.com/1151225/jsp/northeast/story_60291) Accessed 23/07/2016.

of liquor consumed by the middle classes, is the Indian Made Foreign Liquor (IMFL), which covers most liquor, barring wine, beer and country liquor, and is available in glass or sometimes plastic bottles. Among all the available alcoholic beverages IMFL has the highest market share thus making currently the most consumed branded alcoholic beverages and having commanding presence all over the state.

As per the study conducted in the year 2011- 2012, among all of the alcoholic beverage consumers, 80 per cent consume IMFL, 14 per cent consume beer, 5 per cent consume ready to drink alcoholic beverages and hardly 1 per cent consumes wine. Alcoholic beverages are as important in Assam's economy from economic, political, social and agricultural points of view as the importance of revenue generation, employment generation and spending on social welfare activities. The liquor industry generates huge employment opportunities directly by itself and indirectly in advertising, agriculture, capital equipment, packaging, distribution (wholesale, Retail, bar, club, hotel, restaurants and cafeteria), transportation and shipping etc.

Assam is identified as the largest market in North East India in terms of volume, value, government revenue and per capita consumption of alcoholic beverages. Its growth is rapidly increasing due to increase in production and distribution channels namely wholesale, retail, bar, pub, hotels, restaurants, evolving nightlife and consumer preferences.

Assam ranks as one of the largest alcoholic beverage markets across North East India is actually made up of four types of products mainly IMFL (distilled spirits), Beer, wine and country liquor (Indian Made Indian liquor). The good GDP growth and rising incomes are allowing consumers to upgrade not just from country liquor to IMFL, but also to better brands. Consumers are moving from a saving mindset to a spending mindset. The IMFL sales volume have increased by 14.4 times from 6.72 lakh cases in 1995-96 to 96.68 lakh cases in the year 2011-12 and forecasted to reach 151.08 lakh cases in 2015-16 in Assam. The sales volume of beer have increased by 9.4 times from 2.96 lakh cases to 27.94 lakh cases and forecasted to reach 41.49 lakh cases in 2015-16.

The country liquor volume have also increased by 1.4 times from 77.15 lakh liters to 107.10 lakh liters since 1995-96 to 2011-12 even though the consumers have switched to low priced low strength IMFL products from this category. The average growth rate of 18.70% in sales volume of IMFL, 16.27% of beer and 2.69% of country liquor have been observed in the state during 1995-96 to 2011-12. The economy of Assam is a fund scarce economy. Alcohol, an important industry in Assam, contributes a large amount of revenue for the government. The liquor industry has traditionally been a money-spinner for the government of Assam. This is the second largest source of a states' exchequer and excise department is the second largest revenue earning department of the government and charges multiple taxes on liquor, which is an important source of revenue for them.

The government of Assam collects various excise and other taxes and fees for issuing of new and renewal of licenses for production, storage, distribution and sale of alcoholic beverages. It is seen from the study that the liquor industry is the second highest contributor of revenue to the state exchequer. It has been observed that the direct collection of excise taxes on alcoholic beverages are Rs.503.35 corer in 2011-12, Rs.568.11 corer in 2012-13 and forecasted to reach Rs. 763.72 corer by 2014-15. The bootlegging, smuggling and corruption are ripe in the alcoholic drinks industry but more crippling in the state's tax regime and liquor prohibition in some states have caused illegal liquor trade across states and also enormous loss of revenue for the industry as well as the states. It is very difficult to stamp out illegal inter-state smuggling of liquor.

Alcoholic beverages being the second highest consuming beverages next to tea and also the second highest in state tax earnings, no state government can afford to stop the marketing and sales of these beverages legally because of its contribution of revenue to state exchequer and also for "spurious", "seconds" and "thirds" type of illegal alcoholic beverages sale in the state. Internally, the alcoholic beverages industry is responding with efforts to influence consumer behavior by introducing new products, lower strength beverages, smaller-size packaging, encouraging active lifestyles, and looking into alternative, premixed and low alcoholic ready to drink varieties.

The slumping economy, consumers' growing interest in "healthy living," and state and local policy initiatives to impose new taxes on alcoholic beverages are changing

the landscape against which the alcoholic beverages industry operates, pushing the industry to summon a nearly unrivaled level of resources, coordination, and strategy. Considering that alcohol still has a social taboo attached to it, it may seem paradoxical that the liquor market is growing rapidly in Assam. Like all businesses, the industry faced teething troubles like poor storage and transport facilities, lack of promotional activities and unfavorable rules for domestic marketing. However displaying exceptional determination, the alcoholic beverages industry grew from strength to strength improving their product and made a mark in the economy as well (Nayak, 2014).

3.3.3 MANIPUR

The state of Manipur is situated in the eastern part of the country and selling of alcohols is illegal in the State. On the other hand, local made drinks are widely available and consuming it is strictly not recommended as they blended of local spirit and the detergent powder. Strict action by the state government to curb such illicit brews is in immediate need. Manipur government banned the sale of alcohol in the state in April 1991. The five hill districts of the state were exempt from prohibition, adding about INR 50 corer to the government's exchequer. As of July 2015, the government is considering a total lift to the ban.

3.3.4 MEGHALAYA

According to the household surveys of India that alcohol use among adults, both men and women. Alcohol consumption is higher among men than women. Through this study indicated the prevalence of current use of alcohol ranged from about 7 percent in Gujarat (state officially under prohibition) to a very high 75 percent in Arunachal Pradesh, and its consumption among women exceeded 5 percent only in the Northeastern region. Through District Level Household and Facility Survey (DLHS-4) information on alcohol use by adult men and women comes from a substantial number of respondents (5,532 men and 8,529 women). In Meghalaya 15 percent of adults consume alcohol.

In state, the level of consumption is found much higher among adults age above 25 (over 16%) and highest among other caste (22%). Like use of tobacco, age and education do not make much impact as an important factor on alcohol consumption.

Undoubtedly, use of alcohol is higher among illiterate, as compared to the more educated persons but the proportions do not differ drastically. The level of alcohol consumption by religious affiliation shows that the least consumption is among Muslims (8%) and highest among people with 'No religion' (21%). In Meghalaya, alcohol consumption across the districts shows that of the 7 districts, only in 3 districts the level is less than 15 percent. The prevalence of alcohol use across the state ranges from 12 percent in West Garo Hills to about 17 percent in East Garo Hills. Consumption of alcohol is found high in districts such as East Garo Hills (17%), followed by Ri Bhoi (16.7%) and East Khasi Hills (15.6%) and Jaintia Hills (15%).

In Meghalaya, consumption of alcohol is found more concentrated among males (34%), about ten times higher than among females. Men who are more likely to consume alcohol are those in their 30's and 40's (around 40%), non-literates (40%), who follow 'No religion' (52%) and 'Other' castes (44%). The consumption of alcohol is seen among the teenagers (12%). It is interesting to note that equal proportion of men in both rural and urban areas consume alcohol (34%). Around 16 percent of men are usual drinkers, which is higher in urban areas (19%) than rural areas (14%). Only about 3 percent of adult females reported consuming alcohol in Meghalaya. The consumption of alcohol increases by age, with higher intake among older females age 35 and above (3%). Women who reported higher consumption of alcohol are those from rural areas (3%), non-literate (4%), and belonging to other backward classes (5%). Around 1 percent of women are usual drinkers in Meghalaya (DLHFS, 2012-2013).

3.3.5 MIZORAM

Mizoram, is another State from the Northeast region has banned the sales of consumption of alcohol. Under the Mizoram Liquor Total Prohibition Act banned open sales of liquor in 1997 and later production of wine with lesser quantity of spirit was legalized by the state, amending MLTP Act. The production of wine has been under strenuous scanner since the amendment, however, local made alcohol drinks are sold underground in the State.

3.3.6 NAGALAND

Nagaland is yet another Northeastern State to be listed out and same as all states above the open sales of alcohol is prohibited. The ban was imposed in 1989 but India made foreign liquor (IMFL) is largely available across the State, further, Zutho is a popular local drink and the state police are alleged for being inactive in preventing sales of illegitimate liquors in the State⁴³ in 2014, the government had initiated discussions about lifting the ban.

3.3.7 SIKKIM

Sikkim, a hilly State in Northeast, India is located in the foothills of the Himalayas and shares international border with Nepal, Bhutan and Tibet (Dutta, 2006). In Sikkim alcohol use traditionally had been prevalent among population of Sikkim (Panday, 2015) government of India, has also highlighted a significant prevalence of alcohol use in Sikkim – 45.4% and 19.1% among above 15-19 years of age is males and females (NFHS, 2005-2006). The consumption of alcohol is also high in Sikkim during 2005-06 the total consumption of male percentage is 45.4% and female percentage is 19.1% but now according to NFHS-4 shows that the consumption of alcohol increased year by year like male consumption of alcohol is 51.2% and female alcohol consumption percentage is 23.0% (NFHS-4, 2015-16).

3.3.8 TRIPURA

Tripura is second smallest State next to Sikkim in the Northeastern region of India. Consumption of alcoholic drinks by adults is natural for tribal communities in Tripura barring a few exceptions. Use of alcoholic beverages 'practically seized to exist' amongst the Lushais following 'spread of Christianity' (Chakraborty, 2011). Some amongst the Tripuri and Reang tribes who take to Vaishnavism shun alcohol; but they constitute a very small minority. For the tribal communities in Tripura, alcoholic beverages are essential for all of their social and religious events. They brew their own herbal rice beer and also distil the stronger liquor.

-

⁴³Alcohol Ban: known the dry states of India. http://www.siliconindia.com/news/general/Alcohol Ban KnowtheDryStatesofIndianid190953cid1.html accessed 22/07/2016.

Langi is also an intermediate product in the process that culminates in the distilled varieties of the liquor, known in Tripuri as Chuwarak. Guests are served with homemade Chuwak, a safe and soothing drink, as a gesture of warm welcome. The Reangs, the second largest population of tribes next to Tripuris in the state, know Chuwak as 'Cha' (Gan Choudhuri, 2011), the Kaipengs, know it as Jokla (Bhattacharya, 2002) and the Chakmas as Jogara (Mazumdar, 1997). Lack of official recognition and resultant persecution by law enforcing personnel could not in any way wipe out or even diminish the production and consumption of these traditional beverages. This calls for an out-of-the-box for a remedy.

According to National Family Health Survey-4, 2015 and 2016 in Tripura the consumption of alcohol among men and women is different let see in the percentage the consumption of alcohol by men in urban area is 54.7% and rural area 58.9% the total consumption of alcohol is 57.6% here we can see that consumption of alcohol is higher in rural area as compared to urban area. Likewise the women consumption of alcohol in Tripura in urban area is 0.4% and rural 6.7% and the total 4.8% here also we can easily understand that the consumption of alcohol is high in rural area (NFHS-4, 2015-2016).

So these are the information which is mention above about Northeast region of India regarding alcohol consumption and alcohol production. Most of the States in Northeast region are alcohol prohibition States namely Nagaland, Mizoram and Manipur but the remaining other States alcohol is legal. Alcohol consumption is high in States like Sikkim and Arunachal Pradesh the people of Arunachal Pradesh spends Rs 127.32 each month to quench their thirst while the all India average is Rs 20.26. As well as in Sikkim the consumption of alcohol is high. Assam is the largest States in Northeast region as compared to the other States of Northeast. Assam ranks as one of the largest alcoholic beverage markets across North East India in terms of volume, value, government revenue and per capita consumption of alcoholic beverages.

CHAPTER - 4

PATTERN OF ALCOHOL CONSUMPTION AND ITS IMPACT ON DOMESTIC VIOLENCE: A STUDY OF SIKKIM

4.1 SOCIO ECONOMIC PROFILE OF THE RESPONDENTS

In this study attempt has been made to identify the pattern of alcohol consumption and its impact on domestic violence in Sikkim on the basis of sample population of 100 respondents. These chapters present the analysis and interpretation of the data collection from the respondents of four districts of Sikkim. The field study is based on four districts of Sikkim namely North, South, East and West Sikkim. While in the process of interview, respondent name has been kept confidential for their security as they felt heisted to answer the questions.

Sikkim is a small and beautiful State of India which came into being in 16th May 1975. Sikkim lies in a tiny Himalayan region and it's a part of Northeastern region of India, Sikkim is a second smallest State of India after Goa. The study has been conducted in Sikkim's four districts namely North, South, East and West Sikkim. According to census of 2011, the total population of Sikkim is 6, 07,688. The total population of North Sikkim is 43354, South Sikkim population is 146742, East Sikkim population is 281293 and West Sikkim population is 136299.

The socio-economic profile are analyzed by the variables in the questionnaire method of data collection includes respondent's age, education qualification, occupation, marital status and all. The main aim of the study is to analyze the pattern of alcohol consumption and domestic violence in Sikkim. In Sikkim alcohol is culturally accepted in a society. It is the not the case of Sikkim but the entire parts of the North Eastern parts of India has this tradition of consumption of alcohol as their culture. According to NFHS-3 Report the consumption of alcohol is high in Arunachal Pradesh and Sikkim as compared to the other States of Northeast of India. Alcohol is easily available in four districts of Sikkim there is no restriction on it.

These chapters have been summarized into five categories where the relationship between alcohol consumption and domestic violence has been studied. It also has made an attempt to understand the pattern of domestic violence that is causing much of the problem in the State of Sikkim. In order to counter these difficulties the policies and programmes of the Government in dealing with alcohol composition and domestic violence has been examined.

Table No. 4.1

Age Distribution of the Respondents

| Age Group | Male | Female | Total (%) |
|-----------|------|--------|-----------|
| 15 - 25 | 02 | 08 | 10% |
| 26 – 35 | 18 | 18 | 36% |
| 36 – 45 | 26 | 20 | 46% |
| 46 – 55 | 04 | 04 | 08% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

As per the existing rules of the Government of India, the actual drinking age of alcohol is above 18 years. However people started it at the early age of 15 years also. The above Table 4.1 reveals the age distribution of the respondents. The age of respondents are classified into four categories: i. 15-25 years, ii. 26-35 years, iii. 36-45 years and iv. 46-55 years. As we seen in the Table 4.1 shows the respondent age of 15-25 years is 10 percent and 26-35 years is 36 percent and the maximum respondent is the age between 36-45 years and the percentage is 46 and least respondents is the age between 46-55 years that contributes only 8 percent.

Table No. 4.2
Percentage of Male and Female Respondents

| Age Group | Male | Female | Total (%) |
|-----------|------|--------|-----------|
| 15 – 25 | 02 | 08 | 10% |
| 26 - 35 | 18 | 18 | 36% |
| 36 – 45 | 26 | 20 | 46% |
| 46 - 55 | 04 | 04 | 08% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table data 4.2 shows the total number of male and female respondents. The total male respondents are 50 and the female respondents are also 50 percent and the total percentage of male and female is 100 percent.

Table No. 4.3

Marital Status of Respondents

| Age | Single | Married | Divorce | Widow | Total (%) |
|-----------------------|--------|---------|---------|-------|-----------|
| group 15 – 25 | 00 | 10 | 00 | 00 | 10% |
| $\frac{15-25}{26-35}$ | 00 | 36 | 00 | 00 | 36% |
| 36 – 45 | 00 | 46 | 00 | 00 | 46% |
| 46 – 55 | 00 | 08 | 00 | 00 | 08% |
| TOTAL | 00 | 100 | 00 | 00 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.3 shows the marital status of the respondents. The marital statuses of respondents are viz, Single, Married, Divorced and Widow. The married respondent constitutes the highest number of percent i.e. 100 percent following divorced, widow and single constitute the zero percentage.

Table No. 4.4

Qualification of the Respondents

| Age Group | Illiterate | Below Metric | Metric | High Secondary | Graduate | Total (%) |
|--------------|------------|-----------------|--------|-------------------|----------|-----------|
| 15 – 25 | 04 | 03 | 01 | 01 | 01 | 10% |
| 26 – 35 | 07 | 13 | 05 | 06 | 05 | 36% |
| 36 – 45 | 14 | 10 | 08 | 10 | 04 | 46% |
| 46 - 55 | 04 | 01 | 02 | 01 | 00 | 08% |
| TOTAL | 29 | 27 | 16 | 18 | 10 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Tables 4.4 shows that the educational qualification of the respondents. Educational qualifications of the respondents those who have illiterate are 29 percent, following below metric qualification are 27 percent. The respondents having metric qualification are 16 percent and those who are high secondary are 18 percent. Respondent the qualifications of graduate are only 10 percent.

Table No. 4.5

Number of Family Members of the Respondents

| Numbers | Male | Female | Total (%) |
|-----------|------|--------|-----------|
| 03 | 04 | 05 | 09% |
| 04 | 22 | 31 | 53% |
| 05 | 17 | 08 | 25% |
| And above | 07 | 06 | 13% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.5 shows the family member of the respondents. The numbers of the family members are divided on the basis of numbers like 03 on this group total family numbers are 09 percent likewise 04 on this group there are total 53 family members likewise 05 constitute the 25 percent and finally more than it means above numbers of family members constitutes 13 percent.

Table No. 4.6
Earning Member of the Respondents

| Number of Earning Member | Male | Female | Total (%) |
|-----------------------------|------|--------|-----------|
| 01 | 28 | 31 | 59% |
| 02 | 18 | 17 | 35% |
| 03 | 04 | 02 | 06% |
| And above | 00 | 00 | 00% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.6 shows that the earning member of the respondents. Earning members of the respondents are categories on the basis of numbers like 01 constitute 59 percent in total, like 02 constitute 35 percent and 03 constitute 06 percent and lastly more than it means above shows the zero percent. In most of the respondents family only one person is earning member its very difficult to run their family sometimes due to this reasons the violence has occurred in their family.

Table No. 4.7
Occupation of Respondents

| Age | Unemployed | Private | Government | Business | Total |
|---------|------------|----------|------------|----------|-------|
| group | | Employee | Employee | | (%) |
| 15 - 25 | 05 | 03 | 01 | 01 | 10% |
| 26 - 35 | 13 | 06 | 11 | 06 | 36% |
| 36 - 45 | 12 | 09 | 18 | 07 | 46% |
| 46 – 55 | 05 | 00 | 03 | 00 | 08% |
| TOTAL | 35 | 18 | 33 | 14 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The Table 4.7 shows the occupation of the respondents which are divided on the basis of age groups. The data shows the unemployed constitute the highest rate of 35 percent. Following the 18 percent of the respondent are engaged in private sector. Around 33 percent of them are working in government sectors. And 14 percent of the respondents are engaged in business sectors. Most of the respondents are unemployed like 35 percent of the respondents are unemployed like 35 percent of the respondents are unemployee they are working in private schools as a teacher, peons and also working in private offices like insurance company and a networking company. Respondents those who are government employees they are 33 percent who are working as a teachers, office workers and clerks in government sectors. 14 percent of the respondents are engaged in business sectors they run their small shops in their localities and most of the women are vendors, working at cosmetic shops, and canteens.

Table No. 4.8

Annual Family Incomes of the Respondents

| Annually Family Income | Male | Female | Total (%) |
|---------------------------|------|--------|-----------|
| Less than 50,000 | 19 | 16 | 35% |
| 50, 000 – 100, 000 | 11 | 17 | 28% |
| 100, 000 – 150, 000 | 14 | 13 | 27% |
| More than 150, 000 | 06 | 04 | 10% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.8 shows the family income of the respondents. The table is divided on the basis of annually family income of the respondents. First shows the less

than 50,000 total percentage constitute 35 percent likewise second constitute 50,000 – 100,000 the percentage is 28 percent and third 100,000 – 150,000 constitute the percentage is 27 percent and the lastly more than 150,000 constitute the 10 percent.

Table No. 4.9

Composition of the Respondents by Religion

| Age group | Hindu | Buddhist | Christian | Total (%) |
|-----------|-------|----------|-----------|-----------|
| 15 - 25 | 06 | 04 | 00 | 10% |
| 26 - 35 | 15 | 21 | 00 | 36% |
| 36 – 45 | 18 | 28 | 00 | 46% |
| 46 - 55 | 03 | 05 | 00 | 08% |
| Total | 42 | 58 | 00 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.9 shows the religion status of the respondents which are divided through age group. According to this table we can easily see that most of the respondents are falls under Buddhist religion which constitute the highest percentage of 58 and least 42 percentage of Hindu religion and Christian religion constitute the zero percentage.

4.2 PATTERN OF ALCOHOL CONSUMPTION IN SIKKIM

The consumption of alcohol is traditionally accepted in Sikkim. In Sikkim alcohol is easily available in four districts. In Sikkim it's easy to get alcohol because it's easily available everywhere. Most consume alcohol in Sikkim is beer like most of the people prefer to drink it. The age group between 36-45 years is most alcohol consuming age group in Sikkim.

Pattern of drinking among parents, siblings, friends to be important risk factors, alcohol use could be correlated with the climate geographical location of Sikkim. Wide availability of alcohol in Sikkim is one among important factors for increased number of violence or abuses.

According to Sikkim 2014 report shows that the percentage of male consumption of alcohol is 45.4% and the female percentage is 19.1% but now the change we can see that according to NFHS-4 (2015-16) shows that male percentage of alcohol consumption

is 51.2% and the female percentage is 23.0% we can easily understand that the consumption patter of alcohol in Sikkim increased year by year.

Table No. 4.10

Types of Alcohol Consume by Respondents

| Name of Alcohol | Male | Female | Total (%) |
|-----------------|------|--------|-----------|
| Beer | 27 | 13 | 40% |
| Wine | 02 | 23 | 25% |
| Wishkey | 11 | 02 | 13% |
| Any other | 10 | 12 | 22% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.10 shows the alcohol which are consumed by the respondents. According to this table we can easily estimate that which alcohol is mostly consumed in Sikkim. Beer is the most consuming alcohol in Sikkim which constitutes the 40 percent, and it is cheapest beverage in terms of the others, like wise wine is consumed by 25 percent and whiskey consumed by 13 percent and the local traditional alcohol consume 22 percent.

And second highest is any other like local traditional alcohol which are cereal based fermented products mostly consumed. It is also said that traditional alcohol beverages is an integral part of daily dietary habit and cultural practice in Sikkim. Here more than ten types of ethnic, home brewed alcoholic beverages are consumed. Like wine only 25 percent of the respondents prefer to drink and least whiskey only 13 percent. Like wine and whiskey are quite expensive so that respondents prefer to drink traditional home made beverages and beer.

Table No. 4.11
Respondents Partner to Drink Alcohol

| Respondents Partner | Male | Female | Total (%) |
|----------------------------|------|--------|-----------|
| Friends | 33 | 14 | 47% |
| Family Members | 00 | 06 | 06% |
| Alone | 15 | 25 | 40% |
| Other | 02 | 05 | 07% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.11 shows the respondent prefer usually drinking alcohol. According to this table we can seen that 47 percent of the respondents are prefer drink with friends, likewise with family members only 06 percent and alone prefer 40 percent and any other only 05 percent. Most of the respondents prefer to drink alcohol with friends because they don't feel hesitate with them.

Table No. 4.12

Alcohol Consumer in the Family of Respondents

| Alcohol Consumer | Male | Female | Total (%) |
|------------------|------|--------|-----------|
| Father | 19 | 00 | 19% |
| Mother | 03 | 01 | 04% |
| Brother | 04 | 02 | 06% |
| Sister | 00 | 06 | 06% |
| Any other | 24 | 41 | 65% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.12 reveals the consumption of alcohol in the family member of the respondents. The table clearly shows that respondents father consumed total 19 percent likewise mother of the respondents consumed 04 percent like brother consumed 06 percent like sister of the respondents consumed only 06 percent and any other like husband or wife of the respondents consumed 65 percent.

Table No. 4.13
Place of Alcohol Consumption

| Place | Male | Female | Total (%) |
|-------------------|------|--------|-----------|
| At Home | 26 | 45 | 71% |
| At Friend's House | 04 | 03 | 07% |
| At Restaurant | 14 | 00 | 14% |
| Any Other | 06 | 02 | 08% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The Table 4.13 shows the prefer respondents usually drink alcohol. Most of the respondents prefer drink alcohol at home its constituted 69 percentage. And second highest at restaurant the percentage is 14 percent and friend's house 07 percent and any

other constitute 08 percent. Most of the respondents prefer to drink alcohol at home because home is the safe place for them.

Table No. 4.14

Monthly Expenditure of Respondents on Alcohol

| Expenditure | Male | Female | Total (%) |
|----------------|------|--------|-----------|
| Less than 500 | 25 | 15 | 40% |
| 501 – 1000 | 02 | 23 | 25% |
| 1001 – 1500 | 13 | 00 | 13% |
| More than 1501 | 10 | 12 | 22% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.14 shows the composition of the monthly expenditure on alcohol. Most of the respondents spent less than 500 the total percentage constitute 40 percent those who spent less than 500 and like wise 501-1000 constitute the percentage of 25 like wise 1001- 1500 constitute percentage 13 percent and more than 1501 constitute 22 percent.

Table No. 4.15
Reasons of Alcohol Consumption

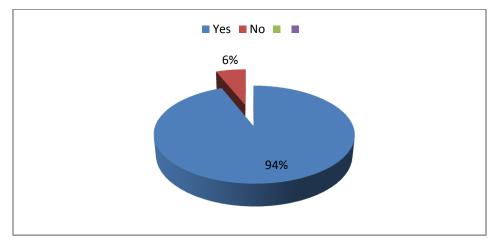
| Reasons | Male | Female | Total (%) |
|--------------------|------|--------|-----------|
| Religious Occasion | 06 | 07 | 13% |
| Family Occasion | 07 | 07 | 14% |
| For Enjoyment | 16 | 05 | 21% |
| Any Other | 21 | 31 | 52% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.15 shows the reason behind consume alcohol. The respondents consume alcohol on the religious occasion like Lochar, Lossong, Namsung, Dipawali etc. like 13 percent respondents prefer to consume alcohol. Family occasion like birthday ceremony, marriage party etc. on that 14 percent respondents consume alcohol. For enjoyment means get together, parties there are 21 percent of the respondents consume alcohol. And lastly 52 percent of the respondents consume alcohol for any other reasons like to forget sorrow, to forget pain, frustration etc.

Figure No. 4.1

Harmful Effects of Alcohol Consumption



Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Figure 4.1 shows the harmful effects of alcohol consumption according to this figure we can see that most of the respondents knows the harmful effects of alcohol consumption like 94 percent respondents knows the harmful effects of alcohol consumption it cause many health problems like High Blood Pressure, Stroke, Liver diseases and other Heart realted diseases. But still the counsumption level is high. And only 6 percent respondents are unaware of it.

4.3 IMPACT OF ALCOHOL CONSUMPTION ON DOMESTIC VIOLENCE IN SIKKIM

Alcohol and domestic violence is not a new phenomenon which is face by every parts of country not only developing countries but also developed countries. Alcohol's impact is not only face by people but societies in many ways and it is determined by the volume of alcohol consumed. Alcohol is one of the harmful risks factors for the health due to it 61 different types of illness or death, which are potentially caused. Like domestic violence is one of the social evil in society which is existing in everywhere.

Impact of alcohol consumption on domestic violence in Sikkim, in Sikkim impact of alcohol consumption is not only face by the women but men also face the same kind of problem. Due to alcohol consumption people face domestic violence in Sikkim. Behind every closed door people face domestic violence and alcohol is one of the important

factor to create domestic violence. Most of the impact of this things are face by children because due to parental dispute or they are not getting proper education and they faced problems.

The impact of domestic violence is not alone on the individual who are the victims, but has extensive effects on the society and nation as whole. Domestic violence is not alone a human right violation, but has increasing health burden demographic consequences. Domestic violence mostly affected on children. For children, home is like their safe haven where they can imagine their dreams and make hopes for their better future but due to these kinds of things they were faced lots of problems.

According to UNICEF every year, hundreds of millions of children are exposed to domestic violence at home. Several studies also revealed that the children who witness domestic violence are more likely to be affected by violence as adults- either as victims or perpetrators. Children those who are exposed to domestic violence they have been psychological affected very much. They don't behave like other normal children, they have been scared of something every time, they are not open up what going on their mind, they remain in silence and they are not playful like others. Due to it children are face lots of problem in their future.

Domestic Violence Due to Alcohol Consumption

YES NO

10%

Figure No. 4.2

Domestic Violence Due to Alcohol Consumption

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Figure 4.2 reveals that domestic violence due to alcohol consumption. Like 90 percent of the respondents said yes due to alcohol consumption domestic violence is happened. The reason is that after consumption of alcohol people loss their control and they became violent, aggressive after that violence has occurred. And only 10 percent respondents said No because for the occurrence of domestic violence there are so many reasons we can't say that alcohol consumption create domestic violence. But this figure clearly shows that the due to alcohol consumption domestic violence is happened.

Table No. 4.16
Behavioral Change Due to Alcohol Consumption

| Behavioural | Male | Female | Total (%) |
|-------------|------|--------|-----------|
| Change | | | |
| Violent | 12 | 11 | 23% |
| Aggressive | 31 | 30 | 61% |
| Any other | 07 | 09 | 16% |
| Total | 50 | 50 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.16 shows the behavior occur when respondents consumed alcohol. Most of the respondents are became aggressive when they consume alcohol like 61 percent of the respondents became aggressive and 23 percent respondents became violent when they consume alcohol and any other only 16 percent. It means that most of the respondents became aggressive when they are consumed alcohol.

Table No. 4.17
Facing Violence or Abuse by Respondents

| Age group | Frequently | Rarely | Never | Total (%) |
|---------------|------------|--------|-------|-----------|
| 15 – 25 years | 02 | 06 | 02 | 10% |
| 26 – 35 years | 01 | 23 | 12 | 36% |
| 36 – 45 years | 02 | 33 | 11 | 46% |
| 46 – 55 years | 00 | 04 | 04 | 08% |
| Total | 05 | 66 | 29 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.17 shows that violence or abuse which are face by the respondents. According to this table we can see the frequently violence or abuse face by the respondents are 05 percent and rarely do they face 66 percent and lastly never 29

percent. According to this table we can see that most of the respondents face rarely violence or abuse frequently face least.

The above Table 4.17 reveals that the 66 percentage experiencing violence rarely, maximum in numbers. Their husband or wife consuming alcohol so violence occurs between their husband and wives. The respondents are facing violence frequently are 05 percentage. These kind of violence occurred in their lives only due to the consumption of alcohol according to respondents. Some respondent reveals that their husband or wives having extra marital affairs blaming her or his say that he or she is not happy or satisfied with them. The highly consumption of alcohol by their husband or wives is the main reason for experiencing frequently or rarely violence. They have also facing physical violence and verbal abuses frequently.

Table No. 4.18

Experiencing Different Types of Violence by Respondents

| Age Group | Physical | Sexual Abuse | Psychological | No | Total |
|-----------|----------|--------------|---------------|----------|-------|
| | Abuse | | Abuse | Violence | (%) |
| 15 - 25 | 05 | 00 | 03 | 02 | 10% |
| 26 - 35 | 16 | 00 | 11 | 09 | 36% |
| 36 - 45 | 22 | 00 | 16 | 08 | 46% |
| 46 - 55 | 03 | 00 | 02 | 03 | 08% |
| Total | 46 | 00 | 32 | 22 | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.18 shows the different types of violence which are face by the respondents. The violence which is faced by the respondents are divided on the basis of age group. Most of the respondents face physical violence like 46 percent and psychological abuse face 32 percentage and sexual abuse face 00 percent of the respondent.

The above table shows that the persons those who face physical violence, sexual violence and psychological abuse. Domestic violence is a pattern of abusive behavior and control that could take any forms of abuses; physical, sexual and psychological. Physical violence is a pattern of assaults and threats used to control over another person. It includes punching, hitting, choking, biting, and throwing objects at a person, kicking and

pushing and using a weapon such as a gun or a knife. Physical abuse usually escalates over time and may end in the woman's death. Sexual Abuse is the mistreatment or the control of a partner sexually. This can include demands for sex using coercion or the performance of certain sexual acts, forcing her to have sex with other people, treating her in a sexually derogatory manner and insisting on unsafe sex.

Psychological abuse involves isolation from others, excessive jealousy, control of his or her activities, verbal aggression, intimidation through destruction of property, harassment or stalking, threats of violence and constant belittling and humiliation.

The above table shows the men and women experiencing different kind of violence. Domestic violence is seen as a tool to control and suppress their rights as equal partners. In every sphere of life women or men are experiencing various forms of abuses like physical abuse, sexual abuse and psychological abuse. Physical violence is like hitting, slapping, kicking with injuries or without injuries. Use weapons to hit like knives, rod, bottle, belt, lathis etc. pull and pushing, dragging and all. Most of the women face verbal abuse when their husband being alcoholic using slang words and unwanted word which makes hurt them too much.

4.4 RELATIONSHIP BETWEEN ALCOHOL CONSUMPTION AND DOMESTIC VIOLENCE

Relationship between alcohol consumption and domestic violence alcohol consumption and domestic violence is not a new phenomenon its exist since so many years. Alcohol is one of the prime factors for the occurrence of domestic violence. Most of the respondents are ready to accept that alcohol consumption and domestic violence have relationship because due to alcohol consumption domestic violence is occurred. After consumed alcohol people loss their control and they became aggressive, violent etc and after that violence had occur.

Alcohol consumption is a major trigger in domestic violence. After consuming alcohol people are intoxicated have less impulse control, and easily frustrated and have greater misunderstanding and generally prove to resort to violence as a solution to problems.

The most common pattern is drinking by both offender and victim, heavy alcohol consumption of both male and female also the risk of violence. Due to it most of the families have on roads because of alcohol. In Sikkim the due to alcohol consumption people face problems like domestic violence.

Table No. 4.19
Perception and Opinion of the Respondents (%)

| Perception and Opinion of the Respondents | Yes (%) | No (%) | Total (%) |
|---|---------|--------|-----------|
| Relationship between Alcohol Consumption and | 77% | 23% | 100% |
| Domestic Violence | 7 7 70 | 23% | 100% |
| Alcohol Leads Domestic Violence | 83% | 17% | 100% |
| Alcohol is the Main Factor of Domestic Violence | 74% | 26% | 100% |
| Causes of Domestic Violence | 57% | 43% | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table 4.19 shows the perception and opinion of the respondents. Like first one is relationship between alcohol consumption and domestic violence. Most of the respondents gives there is relationship between alcohol consumption and domestic violence like 77 percentage of the respondents says yes there is relationship between alcohol consumption and domestic violence and only 23 percentage of the respondents say no there is no relationship between alcohol consumption and domestic violence.

Second one is alcohol leads to domestic violence. Like 83 percent of the respondents said that alcohol is the leading factor which leads to domestic violence. And only 17 percent of the respondents denies the fact about alcohol not leading factor for domestic violence. Alcohol causes domestic violence because after consume alcohol people loss control and violence had occur.

The third one is that the alcohol as the main factor for domestic violence. Most of the respondents said that the alcohol is the main factor to create domestic violence like 74 percent respondents accepted that alcohol as the main factor to create domestic violence.

And only 26 percent respondents denied that alcohol is not the main factor for to create domestic violence. Least respondent denied that alcohol is not main factor for to create domestic violence they said that there are so many factor leading to domestic violence like extra marital affairs, economics crisis, dowry, property disputes etc. not

only alcohol can caused domestic violence these are the other factors which creates domestic violence.

And last one is causes of the domestic violence. Most of the respondents say there is no other reasons for domestic violence only alcohol is the main cause which creates domestic violence but 43 percent respondents says no there is other causes that creates domestic violence like extra marital affairs, dower, economic crisis, property disputes etc are the cause for to create domestic violence.

From the above table we can easily understand that in Sikkim alcohol is the leading factor that has raised the incidence of domestic violence which has been on the verge of increase in Sikkim.

4.5 PLANS AND POLICIES RELATED TO ALCOHOL CONSUMPTION AND DOMESTIC VIOLENCE IN SIKKIM

The plans and policies which are related to the consumption of alcohol and domestic violence government take more initiative to control alcoholism in Sikkim and prevent domestic violence. For alcohol consumption the government made the act like Sikkim Anti-Drug Act this act was launched in 2006.

The main objectives of this act is to create awareness and educate people about the ill effects of alcoholism and substance abuse on the individual, family, workplace and the society and to alleviate the consequences of alcohol dependence amongst the individual, family and society. The legal drinking age of alcohol in Sikkim is 18 for both male and female. In Sikkim excise department is one of the single largest departments which generate high revenue for the state⁴⁴.

Domestic Violence: any act of violence or abuse against a single women, sister, widow, mothers, daughters or even women in live-in relationships amounts to domestic violence. Women can seek protection under the protection of women under domestic violence Act, 2005. It was only in 2005 that the parliament thought it proper to legislate on the specific issue of Domestic violence against the women. In the result Domestic Violence Act, 2005

_

⁴⁴ Liquor industry in Sikkim - Sikkim NIC http://sikkim.nic.in/sws/sikk_liqu.htm accessed 22/11/2016.

has come into existence. The Act deals with aims and objective of the Act. The objective of the protection of women from Domestic Violence Act, 2005 states that it is "an act provide move effective protection to the rights of women guaranteed under the constitution who are victims of violence of any kind occurring within the family and for matters connected there with or incidental there to".

According to Section 3 of the Act, "any act, omission or commission or conduct of the respondent shall constitute domestic violence in case it - (a) harms or injures or endangers the health, safety, life, limb or well-being, whether mental or physical, of the aggrieved person or tends to do so and includes causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse; or (b) harasses, harms, injures or endangers the aggrieved person with a view to coerce her or any other person related to her to meet any unlawful demand for any dowry or other property or valuable security; or (c) has the effect of threatening the aggrieved person or any person related to her by any conduct mentioned in clause (a) or clause (b); or (d) otherwise injures or causes harm, whether physical or mental, to the aggrieved person.

The Protection from Domestic Violence Act, 2005 recognizes different forms of violence and seeks to give a broader definition to what constitutes domestic violence. Article 11 of the Act mentions: "All acts of gender based physical, psychological and sexual by a family members against women in the family, ranging from single assaults to aggravated physical battery, kidnapping, threats, intimidation, coercion, stalking humiliating verbal abuse, forcible or unlawful entry, arson, destruction of property, sexual violence, female genital mutilation, violence related to exploitation through prostitution, violence against workers an attempts to commit such acts shall be termed "Domestic Violence".

Thus, the protection of women from Domestic violence Act 2005 provides immediate emergency remedies for women facing violence such as protection orders, non-molestation orders, the right to reside in the shared households etc. Now, there is a great need to adopt a coordinated approach including civil and criminal law remedies in order to effectively address violence against women within the home and all provision of the IPC as well as the new civil law must be taken as complementary to each other.

Table No. 4.20
Perception and Opinion of the Respondents (%)

| Perception and Opinion of the Respondents | Yes (%) | No (%) | Total |
|--|---------|--------|-------|
| | | | (%) |
| Plans and Policies Implemented by the Government to | 48% | 52% | 100% |
| Prevent Domestic Violence | | | |
| Plans and Policies Implemented by the Government are | 42% | 52% | 100% |
| Working Properly | | | |
| Policies Related to Alcohol | 52% | 48% | 100% |
| Laws and Act of Domestic Violence | 47% | 53% | 100% |

Sources: Field Work, 14th October, 2016 to 30th November 2016, Sikkim

The above Table shows the perception and opinion of the respondents. The First one is the plans and policies which are implemented by the government to prevent domestic violence. Most of the respondents are unaware of these plans and policies which are made by the government like only 48 percent respondents know the plans and policies. They are getting knowledge through reading papers, watching television and asking others those who have knowledge about it. And other 52 percent of the respondents are unaware of these plans and policies. This is because due to lack of education and backwardness. And some of them are confined with the knowledge what they have and don't have much curious to know about rules and laws because they don't need such rules and regulation.

Second one is that the plans and policies which are implemented by the government working properly or not. Most of the respondents said that the plans and policies which are made by the government to prevent alcohol consumption and domestic violence are not working properly like 58 percent of the respondents said No and only 42 percent of the respondents said yes the plans and policies which are implemented by the government are working properly.

The third one is the policies related to alcohol. Like 52 percent of the respondents are aware of these policies and 48 percent of the respondents are unaware of it. The maximum number of the respondents knows the policies which are related to alcohol consumption.

Lastly the laws and Act of domestic violence. Most of the respondents are unaware of the laws and act of domestic violence like 53 percent of the respondents are unaware and only 47 percent of the respondents are aware of these laws and act. The respondents those who know laws and act are only 47 percent. Most of the respondents are unaware of these laws and act as they are being illiterate and they have less interaction or contact with outsiders or other people, they have been confined within their household and some them don't have interest in such things to know about rules and laws as they don't need in life.

Dobash and Dobash (1979) developed the theories of patriarchy theory. These patriarchy theories denote a social system is characterized by male dominance over women. Sikkimese society is considered as the patriarchal society where male member of the family holds power and regulates over the member of the family. The Sikkimese women are staying in the domain of their male members of the family. Women those who are experiencing of violence by family members is seen as a family matter, which is hidden in silence. The patriarchal psyche of submission by women and ownership by man teaches women should accept, tolerate and rationalize the acts of violence. However due to sacred image of family it is the least reported act of violence and it socially legitimate. Patriarchy controls over women for a longtime period. The society which believes that man is a supporter of women. Women should remain controlled by man and they are a port of man's property. In patriarchal society men control women's productivity both within the household and outside in paid work.

In Sikkimese society male member regulates the power to control their wives through their physical strength, economically, using threat of children's emotions. Like in Sikkimese society is patriarchal society and male dominance is there in the society. So men used their power and control over their wives which violence occurs in their relationships.

4. 5 OVERALL ASSESSMENT OF FIELD SURVEY IN SIKKIM

This chapter is purely based on the evidence from the field survey in Sikkim. Data has been collected through the questionnaire method on the basis of sample of 100 respondents. This study has made pattern of alcohol consumption and its impact on domestic violence in Sikkim. Although Sikkim is one of the peaceful state of India but still here traces of domestic violence behind the close doors. The consumption of alcohol is high in Sikkim with the rise in the age group the consumption is also raising. And Sikkim constituted second highest alcohol consuming State in India and Northeastern region after Arunachal Pradesh. Sikkim is patriarchic society where the men have the full sway which is one of the most pertinent reasons of presence of domestic violence. It is not only the case where women are the victims of domestic violence but men too face domestic violence in Sikkim. Most of the respondents accepted that they faced violence due to alcohol consumption. Every men and women throughout their life has faced or experienced domestic violence behind the close doors.

CHAPTER - 5

CONCLUSION

This chapter is summaries the entire thesis which is based on the pattern of alcohol consumption and its impact on domestic violence in Sikkim. The study is based on both the primary and secondary data collection. This chapter provides the essential conclusion which is drawn from the study and recommends and limitation are also shown.

Sikkim is a beautiful and one of the peaceful State of India, its lies in the tiny Himalayan region. Most of the year Sikkim had under the rule of Chogyal and after 1975 only Sikkim became the democratic state when it merged with India on 16th May 1975. In Sikkim alcohol is easily available because it is traditionally accepted here and not only that most of the people consume alcohol here in Sikkim.

`Alcohol was discovered since ancient period the description of alcohol we can get in Vedas also. Alcohol is used since 200 million years ago alcohol was used in religious ceremonies, medical treatment and in many aspects of daily life. Alcohol is a psychoactive substance which has an effect on people in many ways. Alcohol consumption is the major cause of domestic violence or abuse. Due to alcohol consumption many violence are occurred like sexual violence emotional violence self directed violence etc. and domestic violence is one of them it's a very serious and common problem. The consumption of alcohol is not new phenomena its risk for the health not only for health but it destroyed all things.

According to World Health Organization 2004 report shows that around 2 billion people around the world consume alcohol. In 2012, about 3.3 million deaths, or 5.9% of all global deaths, were attributable to alcohol consumption. Alcohol consumption has been an accepted social practice since time immemorial. However, its abuse is considered as world's third largest risk factor for disease and disability. It is a causal factor in 60 types of diseases, injuries, and a component cause in 200 other entities. Globally, 6.2% of all male deaths are attributable to alcohol, compared to 1.1% of female deaths. Worldwide, the per capita consumption of alcoholic beverages in the year 2005 equaled

6.13 l of pure alcohol consumed by person aged 15 years or older. Based on the adult per capita consumption, estimates show that the highest consumption is in developed nations (12.188.65 l), followed by South African region, and the least consumption is in South East Asia (2.20 l) and East Mediterranean region (0.65 l) (WHO, 2011). It has been estimated that about one half of the total adult population worldwide used alcohol. The proportion of users varied across countries, from 18% to 90% among males and from 1% to 81% among adult females (WHO, 2004).

Although India is regarded as a traditional, dry country, it is the dominant producer of alcohol in the South East Asia region 65 percent and contributes to about 7 percent of the total alcohol beverage imports into the region. More than two thirds of the total beverage alcohol consumption within the region is in India. In India, around 7 lakh people die due to use and abuse of alcohol every year and domestic violence is on the increase 3000 family abuse cases are registered every year. About 80% of alcohol consumption is form of hard liquor. India is experiencing a massive increase in alcohol consumption.

The recorded market and consumption levels are still very low as compared to the global standard. The illicit market consumption is far more than legal sales. Country liquor is a distilled alcoholic beverage made from locally available cheap raw materials such as sugarcane, rice, palm, coconut and cheap grains, with alcohol content between 25-45 percent. Common varieties of country liquor are arrack, desi sharab and toddy. Illicit liquor is mostly produced in small production units with raw materials similar to that used for country liquor. With no legal quality control checks on them, alcohol concentration of illicit liquor varies up to 56 percent. In many parts of India, illicit production of liquor and its marketing is a cottage industry with each village having one or two units operating illegally.

Domestic violence is one of the greatest obstacles to the gender equality. In fact women have been victims of violence since ages. It is the most dangerous and destructive form of violence present in the society. It takes place behind the close doors of the home. For this issues government and non-governmental organizations are working at many levels. Among the south East Asian countries, Bangladesh having one of the highest rates

of domestic violence worldwide. There are various act and articles for the safeguarding of women. The special law for women is the protection of women for domestic violence Act, 2005.

In Sikkim the consumption of alcohol is high. Because alcohol is easily available in each districts. There is no any strict law and regulations are made for this due to it the violence is occurred more and more in Sikkim. Sikkimese women and men are still facing domestic violence which is not seen in society. Each and every women and men are facing various kinds of violence in a society. Domestic violence is there within their house hold which is the drawback of the society.

5.1 MAJOR FINDINGS OF THE STUDY

Sikkim is a patriarchal based society i.e. male dominant society. The consumption of alcohol is very high in Sikkim. In Sikkim the consumption of alcohol is traditionally accepted. According to field study it shows that in four districts of Sikkim the consumption of alcohol are very high in each district.

People are facing so many kinds of violence namely like physical, sexual and psychological. Most of the people in Sikkim face the physical violence frequently. Like 80 percent people face this kind of violence and second psychological violence and least sexual violence, its shows that every household face the domestic violence in Sikkim behind the close doors. The women were victim of domestic violence but men were also the victim of domestic violence.

Domestic violence is not only a gender based issue, but it is a social issue. Only one gender cannot be abuser and other victim. Sikkimese society is a live example of this because here not only women face the domestic violence but men too. Our society and culture has always portrayed woman as a victim but man too are victim all due to the consumption of alcohol in a male dominated society. Our society has always depicted that man as the bread earner but here in Sikkim most of the cases women are the earner as well as the care taker of the family. The male members can be sometimes taken as the victims of the woman in their family. But the outer shell of the society has portrayed women as the victims and man as the abusers when alcohol is taken in consideration.

5.2 FEW RECOMMENDATIONS

Alcohol and domestic violence are not only problem of Sikkim or its problem of nation which has a global problem. Even the developed countries like USA and Europe could not eradicate these problems from their country or society. According to the World Health Report alcohol is the third highest risk factor for the health. India is one of the developing countries in this contemporary world. India facing lots of social problems which are still could not eradicate from the society. Domestic violence and alcohol are the social issues which our country is facing till date. This research has been made to analyze the pattern of alcohol consumption and its impact on domestic violence and this study contribute that weather in Sikkim due to alcohol consumption domestic violence is really exist or not.

As we all know that Sikkimese societies are patriarchal based society. In Sikkim the consumption of alcohol is traditionally accepted whereas the consumption is also high in Sikkim. The indigenously brews in Sikkim like rakshi, chhang and tongba are relatively much cheaper than anywhere else. Therefore, government of Sikkim should discourage these local products by strict vigil and by making policies and taking legal action against them. Since alcohol is easily available in all the districts of Sikkim, government of Sikkim should give a serious thought on its decision to open up a large number of liquor shops in Sikkim.

For the betterment of society people should changed their nature or consumption habit for a better future and society. Sikkim is still developing as compared to the other States of India in every field. Government should also take strict action toward these kinds of issues and make strong rules and regulation and implement it. NGOs and more civil societies should take more of these kinds of cases. As most of the NGOs and civil societies are not given proper authorities and function for this cause like drugs, alcohol and suicide etc.

Like Sikkim breweries are known for their products in the eastern Himalayas which also supply a large quantity of brews in the local market in a cheaper rate. This kind of attitude by the brewery manufactures should be changed by changing the policy

by the state government. There is a tax rebate on the sale of alcohol consumption among people in Sikkim. The government of Sikkim should change its decision and imposes tax on the production as well as sale of breweries in the state. Counseling services should also be available for helping people who have various misconceptions for starting different substances, for changing their positive attitude towards various substances and also helping people those who are suffering from various problems in their life.

BIBLIOGRAPHY

Primary Sources

Alcohol Report (2015), WHO www.who.int>mediacentre>factsheets/fs349/en/, accessed on 23/02/2016.

Lama, Mahindra, P. (2001). *Sikkim Human Development Report*. New Delhi: Government of Sikkim, Social Science Press.

National Family Health Survey III 2006, *Fact Sheet*. New Delhi: ministry of Health and Family Welfare, Government of India.

National Family Health Survey - 4. 2015-2016, State Fact Sheet Sikkim. Mumbai:

International Institute for Population Sciences Deemed University.

National Family Health Survey-4. 2015-2016, Government of India Ministry of Health and family welfare. Tripura.

Sikkim Human Development Report (2014). New Delhi: Routledge.

World Health Organisation (2002). World Report on Violence and Health. Geneva: summary.

World Health Organisation (2002). World Health Report. Reducing Risks, Promoting Healthy Life.

World Health Organisation (2003). *Prevention of Harm from Alcohol Use*, Get High on Life Without Alcohol.

World Health Organization (2004). *Global Status Report on Alcohol*. Geneva: World Health.

Organization Department of Mental Health and Substance Abuse. Geneva.

World Health Organization (2007). *Alcohol and Injury in Emergency Departments: A Summary of the Report from the WHO Collaborative Study on Alcohol and Injuries.*

World Health Organization Department of Mental Health and Substance Abuse. Geneva.

World Health Organisation (2009). *Global Health Risks Morality and Burden of Diseases Attributable to Selected Major Risks*. Switzerland: Geneva.

World Health Organisation (2011). *Global Status Report on Alcohol and Health*. Switzerland: Geneva.

Secondary Sources

Ahuja, Ram (1997). Social Problem in India. New Delhi: Rawat Publication.

Alcohol prohibition to remain in Nagaland. https://en.m.wikipedia.org>wiki>Alcohol, accessed on 23/07/2016.

Allen, Marry (2013). Social Work and Intimate Partner Violence. London and New York: Routledge.

Arulrhaj, S. (2005). IAPA www.apapaonline.org>meeting_Reports>files, accessed on 14/03/2016.

Barun, Ankur (2013). Alcoholism among Adolescent Students of Tadong in East Sikkim, *Journal of Asian Scientific Research*, vol. 3(11), pp. 1105-1108.

Benegal, V. Murthy, P. Shantala, A. Janakiramaiah, N. (2002). *Alcohol Related Problems*: A Manual for Medical Officers.

Bhattacharyya, Rinki (2004). *Behind the Closed Doors Domestic Violence in India*. New Delhi: Saga Publication.

Davis, Richard L. (2004). *Domestic Violence: Intervention, Prevention, Policies and Solutions*. New York: CRC Publication.

Das, P.K (2007), *Universal's Hand Book on Protection of Women from Domestic Violence Act & Rules*, Universal Law Publishing, New Delhi.

Dutta S. Chakabarti A. A profile of substance abusers using the emergency services in a tertiary care hospital in Sikkim. Indian J. psychiatry 2006; 48; 243-7.

Esteal, P. (1994). Violence against Women in the Home. How Far Have We Come? How Far to Go? *Family Matters*. Vol. no 37. pp 86-93.

Ganley, Anne L. (1998). *Improving the Health Response to Domestic Violence*. https://www.futureswithoutviolence.org, accessed on 12/07/2016.

Geol, Aruna (2009), *Women Empowerment Myth or Reality*, Deep and Deep Publication Pvt.Ltd, New Delhi.

Indian Alcohol Policy Alliance (2008). Alcohol Atlas of India.

International Institute for Population Science (IIPS) and Macro Internal (2007). National Family Health Survey (NFHS-3), 2005-06: India: volume I. Mumbai: IIPS.

Jain, Ranjana S. (1992). Family Violence in India. New Delhi: Radiant Publisher.

Jaising, Indira (2007), Law of Domestic Violence, Universal Law Publishing, New Delhi.

Jewkes, Rachel (2002). "Intimate Partner Violence: Causes And Prevention", *the lancet*. Vol. 359, pp. 1423-1229.

Karinthayil, Fr. Chako (2005). *Whiter Drug–Driven North East India? Ishani*. Vol 1(5). www.Indianfolklore.org>Ish>article>view, accessed on 25/07/2016.

Kaushal, Rachana (2010), Protection of women from Domestic violence Act 2005-An Appraisal. *Economic and Political weekly*, National Publishing House, Delhi, No.11, Vol. XL VIII, March 6, Pp.19-26.

Kaushik, P. D (2007), Women's Rights: Access to Justice, Book well, New Delhi.

Kilmartin, Christoper and Julie Allison (2007). *Men's Violence against Women Theory, Research and Activism*. London: Lawrence Erlbaum Associates.

Korhonen, Marja (2004). Alcohol Problems and Approaches: Theories, Evidence and Northern Practice. Ottawa, Ontario.

Lalwani, S. and Dogra, T.D. (2005). Legal Aspects of Drug Abuse in India. In Lal R. (ed.). *Substance Use Disorder: A Manual for Physicians*. pp. 181-189. New Delhi: National Drug Dependence Treatment Centre, All India Institute of Medical Science.

Livingston, M. (2011). A Longitudinal Analysis of Alcohol outlet Density and Domestic violence. *Addiction*, Vol. 106, pp. 919-925.

Loyi, Tumge (2009). Prevalence and Pattern of Alcohol Use among College Students: Comparing Scenario in Arunachal Pradesh and Kerala. Kerala: Sree Chitra Tirunal Institute for Medical Sciences and Technology.

Mathur, kanchan (2004). Countering Gender Violence Initiatives towards Collective Action in Rajasthan. New Delhi: Saga Publication.

McGregor, (1990). Domestic Violence: Alcohol and Other Distractions- A Grassroots Perspective. Canberra.

Mello, Nancy K and Mendelson, Jack H. (2015). *Alcoholism A Biobehavioral Disorder*. United States of America: International Psychotherapy Institute.

Mishra, Preeti (2006), *Domestic Violence Against Women Legal Control and Judicial Responses*, Deep and Deep Publications, New Delhi.

Mohan, D. Sharma, H. (1985). International Review Series: Alcohol and Alcohol Problems Research. *Br J Addict*. Vol. 80, No. 4, pp. 35-15.

Mukherjee, Sanchari Roy (2007), *Indian Women Broken Words*, Distant Dreams, Levent Books, Kolkata.

Naik, Dr. NTK. Lal, Dr. Suresh (2013). Impact of Alcohol Consumption on Health and Economy, *IOSR Journal of Nursing and Health Science*. Vol. 1, No. 5, pp. 18-23.

Nair, G. Rajesh Kharan (2011), *Gender Justice: Under Indian Criminal System*. New Delhi: Eastern Law House.

Nayak, Bijay Kumar (2014). A Study on Indian Made Foreign Liquor Market in Assam and its Future Prospects, *International Journal of Research in Commerce Economics and Management*, (IJRRCEM). Vol. 1(3), pp. 96 - 97.

Panday, et.all (2015). Socioeconomic Characteristics of Alcohol and Other Substance Users, Seeking Treatment in Sikkim, North East India. https://www.ncbi.nlw.nih.goc >articles, accessed on 23/07/2016.

Pegu, Rajeswar, Gogoi, Jitu Tamuli, Ajit K and Teron, Robin (2013). Apong, an Alcoholic Beverage of Cultural Significance of the Missing Community of Northeast India. *Global Journal of Interdisciplinary Social Sciences*. Vol.2, No.6, pp. 12–17.

Rahman, Ataur and Ahmad, Shekh Belal (2010). Domestic Violence in India. In Singh Subash Chandra (ed.). *Family Violence in India*. New Delhi: Serials Publications.

Rehm, J. Room, R. Monterio, M. et. al, (2004). Alcohol use in: Ezatti, M. Murray, C. Lopez, A.D. Rodges, A. (ed.). Comparative Qualification of Health Risks: Global and Regional Burden of Diseases Attributable to Selected Major Risk Factors. *World Health Organisation*, Geneva. Vol.1, pp, 959-1108.

Rehm, J. Anderson, P. Kanteres, F. A. L. (2009). *Alcohol, Social Development and Infectious Disease*. Toronto: Center for Addiction and Mental Health.

Religion of Sikkim (2011). *Census of India Religious Composition. Government of India*, Ministry of Home Affairs. https://en.m.wikipedia.org>wiki>Sikkim, accessed on 23/02/2016.

Shrivastava, Karuna A.G. Greeshma and Srivastava, Brijesh (2012). Biotechnology in Tradition A Process Technology of Alcoholic Beverages Practiced By Different Tribes of Arunachal Pradesh, Northeast India. *Indian Journal of Traditional Knowledge*. Vol. 11, No. 1, pp. 81-89.

Singh, A.K et.all, (2009), *Domestic Violence against Women in India*, Madhav Books, Gurgoan.

Sood, Sushma (1990), Violence against Women, Arihant, Jaipur.

Subadra (1999), Violence against women wife battering in Chennai, *Economic and Political weekly*, Akansha Publication House, New Delhi, Vol.34 (16-17), April17-24, Pp.WS28-33.

Subba, Bitu (2014). Women "Quest" for Empowerment in Sikkim's Society. *International Journal of Scientific and Research Publications*. Vol. 4(9), pp. 2250-3153.

Suman, L.N. (2011). Family Violence and Alcohol Abuse. In Singh Subash Chandra (ed.). *Gender Violence*. New Delhi: Serials Publications.

Suryanarayana et.all. (2010). *Domestic Violence on Women*. (www.articlesbase.com>domesticviolence), accessed on 22/06/2016.

Tamang, J.P. Thapa, S. Tamang, N. and Rai B. (1996). Indigenous Fermented Food Beverages of Darjeeling Hills and Sikkim: Process and Product Characterization. Vol. 9, No.2, pp. 401-411.

Tamang, J.P. and Nikkuni S. (1996). Selection of Starter Culture for Production of Kinema, a Fermented Soybean Food of the Himalaya. *World Journal of Microbiology and Bio-technology*. Vol.12, pp. 629 - 635.

Tamang, J. Thapa, N. Rai, B. Thapa, S. Yonzan, H. Dewan, S. Tamang, B. Sharma, R. Rai, A. and Chettri, R. (2007). Food Consumption in Sikkim with Special Reference to Traditional Fermented Foods and Beverages, *Journal of Hill Research*. Vol. 20, pp. 1-3.

Teron, R. (2006). Hor, the Traditional Alcoholic Beverage of the Karbi Tribe of Assam. *Natural Product Radiance*. Vol. 5, No.5, pp. 377 - 381.

The Schumacher Centre for Technology and Development www.itdg.org/html/technical,enquiries/docs/toddy palm wine.pdf, accessed on 2/02/2016.

Wongyal, Thinlay (2003). Prevalence of Hazardous Drinking and Its Correlates in a Community in Gyalshing, West Sikkim, India. Kerala: Sree Chitra Tirunal Institute for Medical Sciences and Technology Thiruvanathapuram.

ANNEXURE - 1

QUESTIONNAIRE

1. SOCIO-ECONOMIC BACKGROUND OF THE RESPONDENTS

| 1.1. N | Jame: |
|----------------|--|
| 1.2. A | age . |
| | a) 15 - 25 |
| | b) 26 - 35 |
| | c) 36 - 45 |
| | d) 46 - 55 |
| 1.3. C | Gender: |
| | Male: Female: |
| 1.4 . E | ducational Qualification |
| | a) Illiterate |
| | b) Below Metric |
| | c) Metric |
| | d) High Secondary |
| | e) Graduate |
| | f) Post Graduate |
| | g) Any other |
| 1.5 . H | low many family members are there in your family? |
| | a) 3 |
| | b) 4 |
| | c) 6 |
| | d) And above |
| 1.6 . H | low many earning members in your family? a) 1 b) 2 c) 3 d) And above |

| 1.7. Occupation |
|---------------------|
| a) Unemployed |
| b) Self Employee |
| c) Private Employee |
| |

- d) Government Employee
- e) Business
- f) Any other

1.8. Family income (annually)

- a) Less than 50,000
- b) 50,000 100,000
- c) 100,000 150,000
- d) More than 150,000

1.9. Religion

- a) Hindu
- b) Buddhist
- c) Christian
- d) Any others

1.10. Marital status

- a) Single
- b) Married
- c) Divorce/ separated
- d) Widow

2. RELATIONSHIP BETWEEN ALCOHOL CONSUMPTION AND DOMESTIC VIOLENCE

- **2.1.** Have you ever heard about the term domestic violence? Yes _No_
- **2.2.** Do you know the relationship between alcohol consumption and domestic violence?

| 2.3. Do you think alcohol consumption leads to domestic violence? |
|---|
| Yes_No_ |
| 2.4. Do you consider alcohol as the main factor of domestic violence? Yes _ No _ |
| 2.5. Do you have any idea about the others causes of domestic violence? Yes _No _ |
| If yes, what are those |
| 2.6. In your understanding, what are the prime factors of domestic violence? Any other |
| Suggestions? |
| 3. PATTERN OF ALCOHOL CONSUMPTION IN SIKKIM |
| 3.1 . Do you consume alcohol? |
| Yes No |
| 3.2. What type of alcohol that you first tried? |
| a) Beer |
| b) Wine |
| c) Whisky |
| d) Any other |
| 3.3. With whom do you usually drink alcohol? |
| a) With friends |
| b) With family members |
| c) Alone |
| d) Any other |
| 3.4. Who else consumes alcohol in the family? |
| a) Father |
| b) Mother |
| c) Brother |
| d) Sister |
| e) Any other |

| 3.5. Where do you usually drink alcohol? |
|---|
| a) At home |
| b) At friend's home |
| c) Open area |
| d) At restaurant |
| e) Any other |
| 3.6. What is your monthly expenditure on alcohol drinks? |
| a) Less than 500 |
| b) 501 – 1000 |
| c) 1001 – 1500 |
| d) 1501 – 2000 |
| e) More than 2000 |
| 3.7. What was the reason behind your drink of alcohol? |
| a) Religious occasion |
| b) Family occasion |
| c) For enjoyment |
| d) Any other |
| 3.8 . Are you aware of the harmful effect of consuming of alcohol? Yes No |
| 3.9. Has anyone of in your family discussed with you about the harmful effect of drinking |
| Alcohol? Yes No |
| 4. IMPACT OF ALCOHOL CONSUMPTION ON DOMESTIC VIOLECE IN SIKKIM |
| 4.1. Do you think, there is domestic violence due to the consumption of alcohol? |
| Yes_No_ |
| 4.2 . Do the people change their nature or behavior when they consume alcohol? |
| Yes_No_ |

| т.Э. | What kind of nature or behavior occurs when she/he consumes alcohol? |
|--------------|---|
| | a) Violent |
| | b) Aggressive |
| | c) Any other |
| 4.4. | Do you face any kind of violence/ abuse at your home due to consumption of alcohol by Family members? |
| | a) Frequently |
| | b) Rarely |
| | c) Never |
| 4.5. | What kind of violence/ abuse have you experiences? |
| | a) Physical abuse |
| | b) Sexual abuse |
| | c) Psychological assault |
| | d) No Violence |
| | LANS AND POLICES RELATED TO ALCOHOL CONSUMPTION AND DOMESTIC VIOLENCE |
| 5. 1. | Do you know the policies which are related to alcohol? Yes _No _ |
| | |
| 5.2. | Do you have any idea regarding the laws and act of domestic violence? Yes_No_ |
| | Do you have any idea regarding the laws and act of domestic violence? Yes_No_ Do you have any idea about plans and policies which are implemented by the government to prevent domestic violence? Yes_No_ |
| 5.3. 5.4. | Do you have any idea about plans and policies which are implemented by the |