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## EFFECTIVENESS OF SOCIAL CASEWORK IN ADDRESSING DOMESTIC VIOLENCE AMONG SLUM- DWELLING WOMEN IN DHAKA CITY: A QUALITATIVE STUDY ON INTERVENTION AND INDIGENIZATION

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**Abstract.** Domestic violence is a pervasive issue among slum-dwelling women in Dhaka, Bangladesh, exacerbated by poverty, gender inequality, and limited support systems. This qualitative study examines the effectiveness of social casework in supporting victims within urban slum contexts. Employing a case study approach, data were collected through 15 in-depth interviews, 2 focus group discussions in Korail and Kamrangirchar slum, and 5 key informant interviews with NGO officials, university faculty, and MSS social work students. Secondary data, including literature and reports, were used to validate findings. Findings demonstrate that indigenized social casework, applying the four stages study, diagnosis, treatment, and follow-up effectively empowers women to express trauma, understand their rights, and adopt coping strategies. Interventions included counseling, safety planning, emotional support, legal referrals, and income-generating skills training. Core social work principles like acceptance, confidentiality, and self-determination-built trust and resilience, while regular follow-ups reduced re-victimization and fostered behavioral change. The study recommends culturally adapted social casework integrated into community-based organizations and public health systems, alongside community awareness initiatives and multi-agency collaboration. These findings are valuable for social work students, young researchers, casework practitioners, policymakers, urban planners, university faculties, and NGO/Government workers providing case-based support to marginalized women, offering evidence-based strategies to empower survivors and improve service delivery in low-resource urban settings.

**Key-words:** social casework, domestic violence, slum-dwelling women, intervention effectiveness, indigenization.

## *1.1 Introduction*

### **Study Background**

Social casework, as a core method of social work, provides a structured approach to address domestic violence while fostering women's empowerment across social, psychological, and economic dimensions. It is particularly effective for marginalized women, including those residing in slum communities, where vulnerabilities are heightened. The application of casework in these contexts necessitates careful indigenization, aligning interventions with local cultural norms, religious beliefs, and political practices to ensure relevance and acceptance. By integrating these contextual factors, social casework can not only respond to immediate needs but also build sustainable pathways for empowerment. It also enables women to assert agency, access resources, and transform their socio-economic realities even within historically underserved and marginalized communities.

Domestic violence remains a pervasive issue among slum-dwelling women in Dhaka, Bangladesh, where poverty, gender inequality, and limited support systems increase women's vulnerability (Sultana & Koly, 2025; World Health Organization [WHO], 2012). Social casework, a core method of professional social work, involves individualized interventions to help clients cope with and resolve personal and social problems (Parvin & Sultana, 2016). Evidence from a study in Bangladesh reveals that casework interventions significantly enhanced patient satisfaction and improved adherence to treatment and follow-up attendance (Shadhin, Islam, & Mridha, 2024). Its application in urban slum settings is particularly important for identifying and supporting victims of domestic violence, enabling women to access services, make informed decisions, and gain empowerment (Koly & Sultana, 2025; Naved et al., 2018).

### **Problem Statement**

Domestic violence against women in Bangladesh affects not only individuals but also families and the broader society, creating obstacles to peace, development, and social cohesion (Islam & Dey, 2013). In urban slums of Dhaka, domestic violence is prevalent, particularly among women with low educational backgrounds. The forms of violence include physical, economic, emotional, psychological, and sexual abuse, while contributing factors include dowry demands, marital conflict, poverty, and substance abuse (Zaman & Hossain, 2014; Sambisa & Curtis, 2011). This multifaceted violence results in negative social, physical, mental, and economic outcomes, such as family disorganization, trauma, and restricted autonomy for women (Naved et al., 2018; Parvin & Sultana, 2016). Despite the high prevalence, interventions remain limited, and women's vulnerability persists in the absence of culturally appropriate social support systems (Sultana & Koly, 2025).

### **Rationale of the Study**

The rationale for this study is based on the urgent need to address domestic violence among slum-dwelling women and the potential role of social casework in mitigating its impact and implement casework in local way and with the demand of local context. Social casework enables professionals to provide tailored interventions that support victims' empowerment, facilitate access to social and legal services, and promote behavioral change (Parvin & Sultana, 2016; Koly & Sultana, 2025). While the effectiveness of social casework has been recognized globally, its application and adaptation to the socio-cultural context of Dhaka's slums remain underexplored. By

investigating the effectiveness of social casework in these settings, this study aims to contribute to evidence-based practices that can support marginalized women, inform social work education, and guide policymakers, urban planners, and NGOs in designing targeted interventions (Sultana & Koly, 2025; WHO, 2012).

## ***1.2 Study Principle and Specific Objectives***

### *Principal Objective*

To examine the effectiveness and adaptability of social casework in supporting and empowering slum-dwelling women experiencing domestic violence in Dhaka.

### **Specific Objectives**

I. To identify the nature, patterns, and consequences of domestic violence experienced by housewives in the Mirpur-10 slum area.

II. To assess the applicability and effectiveness of the social casework method (study, diagnosis, treatment, follow-up) in supporting victims of domestic violence in urban slums.

III. To explore how social casework principles (such as confidentiality, self-determination, and acceptance) facilitate trust-building and emotional resilience in survivors.

IV. To analyze the outcomes of individualized interventions (e.g., counseling, safety planning, legal referrals, skills training) on the coping capacity and empowerment of domestic violence survivors.

V. To evaluate the challenges and prospects of indigenizing social casework within the socio-cultural and economic context of urban slum communities.

## ***1.3 Operational Definition of Key Terms***

### **Social Casework**

**Scholarly Definition:** According to Richmond (1917), social casework is “the art of assisting individuals to understand and solve their problems in living, based on principles of human behavior and social environment” (Richmond, 1917; cited in Kadushin & Kadushin, 2005). It emphasizes individualized intervention, client self-determination, and confidentiality.

**Operational Definition in this Study:** In the context of this study, social casework refers to the individualized interventions provided by caseworkers in Bangladesh to women experiencing domestic violence. Here, a **caseworker** may include NGO staff, social work students, or trained practitioners who use social casework principles—assessment, counseling, intervention, and follow-up—to empower women. Since social work is not professionally recognized in Bangladesh, many NGOs implement social casework informally, adapting methods to local cultural and resource constraints.

### **Effectiveness**

**Scholarly Definition:** Effectiveness refers to “the degree to which intended outcomes are achieved through planned interventions” (Patton, 2015). It involves assessing both the quality of intervention and its impact on beneficiaries.

**Operational Definition in this Study:** Effectiveness in this study is measured by the extent to which social casework interventions (counseling, safety planning, legal referrals, and skill development) empower women to cope with domestic violence,

understand their rights, adopt coping strategies, and reduce risks of re-victimization in slum communities.

### **Domestic Violence**

**Scholarly Definition:** The WHO (2012) defines domestic violence as “any behavior within an intimate relationship that causes physical, psychological, or sexual harm to those in the relationship, including physical aggression, sexual coercion, psychological abuse, and controlling behaviors.”

**Operational Definition in this Study:** In this study, domestic violence refers to physical, emotional, sexual, and economic abuse experienced by slum-dwelling women in Dhaka, perpetrated mainly by intimate partners or family members, which affects women’s mental, physical, and social well-being.

### **Slum-Dwelling Women**

**Scholarly Definition:** According to UN-Habitat (2003), slum-dwellers are “residents of areas lacking durable housing, sufficient living space, access to clean water, sanitation, and secure tenure.”

**Operational Definition in this Study:** Slum-dwelling women are married or cohabiting women residing in urban slums of Dhaka, such as **Korail and Kamrangirchar**, characterized by high population density, low income, and limited access to formal support services.

### **Indigenization of Social Casework**

**Scholarly Definition:** Indigenization refers to “adapting social work methods and practices to fit the cultural, social, and economic context of the target population” (Chowdhury, 2018).

**Operational Definition in this Study:** In this study, indigenization involves adapting social casework to the socio-cultural and resource-constrained context of Dhaka slums. It includes modifying counseling approaches, legal advice, and empowerment strategies to suit local norms, traditions, and realities while maintaining core social work principles.

## ***1.4 Methodology of the Study***

### **Research Approach and Design**

This study employed a qualitative research approach, which is appropriate for exploring complex social phenomena, such as domestic violence, within their socio-cultural context (Creswell & Poth, 2018). A case study design was adopted to examine in-depth experiences of women residing in urban slums of Dhaka who have been exposed to domestic violence and have received social casework interventions.

### **Main Method**

The primary method used was social casework assessment complemented by face-to-face qualitative interviews. Social casework provided a framework to understand individualized support processes, interventions, and their effectiveness in addressing domestic violence (Parvin & Sultana, 2016).

### **Sample and Respondents and Study Locations**

The study included a purposive sample of 20 slum-dwelling women in Dhaka who had experienced domestic violence and had received social casework support. Participants were selected based on their willingness to share experiences, ensuring diversity in age, marital status, and education level from slum area named Korail Slum

and Kamrangirchar as those 2 are very big in term of area and cover maximum diversity of population. Additionally, social workers from different NGOs and casework practitioners involved in interventions were included to triangulate data and provide professional perspectives.

### **Data Collection Methods and Tools**

Primary data were collected through in-depth interviews and field observations with women participants to explore their experiences of domestic violence and the impact of social casework interventions. Key informant interviews (KIIs) were conducted with university faculty from social work departments, senior NGO officials, and MSS-level fieldworkers practicing social casework in slum areas to understand intervention strategies and challenges. Focus Group Discussions (FGDs) were also conducted with multiple stakeholders, including community leaders, journalists, fieldworkers, NGO staff, eyewitnesses, and victims of domestic violence, to obtain diverse perspectives and richer insights. For data collection, a case study guide was used for case studies, an open-ended checklist was applied for FGDs, and a semi-structured interview guide was employed for KIIs. Secondary data were gathered from relevant literature, including peer-reviewed journal articles, reports, and government/NGO records on domestic violence and social casework practices in Bangladesh, to triangulate and validate the findings.

### **Data Analysis**

Data were analyzed using thematic analysis (Braun & Clarke, 2006). Interviews were transcribed verbatim, and manual coding was applied to identify recurring themes and patterns related to the effectiveness and challenges of social casework interventions. Emerging themes included empowerment, coping strategies, accessibility of services, and cultural adaptation of interventions.

### **Validity and Reliability**

Triangulation of data sources, including participants and practitioners, enhanced the credibility of the findings, while member checking with a subset of participants ensured that their experiences were accurately represented. The consistent application of thematic coding, combined with detailed documentation of procedures, further strengthened the dependability and transferability of the study results.

### **Potential Limitations of the Study**

The qualitative design of this study limits the generalizability of its findings to other contexts or populations. Given the sensitive nature of domestic violence, participants' self-reports may be influenced by bias, affecting the accuracy of the data. The study's limited sample size and focus on specific slum communities may not fully capture the diversity of experiences among slum-dwelling women in Dhaka. Additionally, language and cultural nuances could lead to partial interpretation of participants' perspectives, despite careful translation and contextual understanding.

### **Ethical Considerations**

- a) Informed verbal consent was obtained from all participants, emphasizing voluntary participation and the right to withdraw at any time.
- b) High confidentiality was maintained; names and identifying information were anonymized in all documentation.
- c) Interviews were conducted in safe, private locations to ensure participants' comfort and security.

d) Sensitive topics were approached with care to minimize emotional distress, and participants were provided referrals to local support services when needed.

e) Ethical approval was obtained from the relevant institutional review body, and all procedures adhered to international ethical guidelines for research with human subjects, including respect for autonomy, beneficence, and non-maleficence (World Health Organization, 2012).

## **1.5 Findings of the Study**

### **1.5.1 Presentation of Case study Result with Analysis**

The case study result and analysis revealed eight major thematic areas corresponding to the guiding questions: the nature and impact of domestic violence, the process of engaging with social workers, the types of support received, and the perception of professional values in practice. Together, these findings illustrate both the effectiveness and the cultural adaptation of social casework in addressing the lived realities of slum-dwelling women in Dhaka.

#### **Nature and Impact of Domestic Violence**

Most participants reported that violence was not a one-time incident but a recurrent pattern embedded in everyday life. Physical violence, emotional humiliation, and economic deprivation emerged as the dominant forms. One respondent named *Rakhi* narrated:

*“My husband beats me almost every week when he is drunk or frustrated with money. Sometimes he throws me out of the house at night. My children cry, but no one dares to interfere.”*

The cumulative effect of such abuse was reflected in deteriorating mental health, disrupted family life, and an insecure environment for children. Several women spoke about developing chronic anxiety, while others mentioned feeling **“trapped with no way out.”** This underscores how domestic violence in urban slums is not limited to individual suffering but extends to intergenerational trauma, reinforcing the urgency of targeted social work intervention.

#### **First Contact with Social Workers**

Entry points into professional support were often indirect. Women commonly came into contact with social workers through neighbors, NGO outreach, or local healthcare centers. One participant recalled:

*“A community apa [sister] told me about a social worker coming to our area. I was hesitant, but I went because I had no one to share my pain with.”*

This highlights the importance of grassroots referral networks in contexts where victims are reluctant to self-disclose. Initial hesitation reflected women’s fears of social stigma, but timely outreach efforts facilitated access to casework services.

#### **Types of Support Received**

The interventions provided through social casework demonstrated both structural and emotional significance. Counseling was repeatedly cited as the first step in building trust and enabling women to narrate their experiences openly. For instance, one survivor named Puspoo age 22 noted:

*“For the first time, someone listened to me without blaming me. The NGO apa told me that I have rights and that I am not alone.”*

Other forms of support included legal referrals, safety planning, and vocational training opportunities. A woman who received sewing training stated:

*“Now I earn a small income from stitching clothes. This makes me less dependent on my husband and gives me courage.”*

Such narratives reveal how economic empowerment, combined with counseling, helped women regain a sense of agency. The structured application of casework stages—study, diagnosis, treatment, and follow-up, ensured that interventions were not fragmented but progressive.

### **Respect, Confidentiality, and Trust**

Participants consistently emphasized that respect and confidentiality were central to their willingness to engage with social workers. In a cultural context where women often experience blame and silence, the professional principles of acceptance and non-judgment were particularly empowering. One woman shared:

*“She [the caseworker] promised me that what I said would stay between us. That gave me the courage to tell everything. I felt safe for the first time.”*

This demonstrates how adherence to ethical principles strengthened the therapeutic alliance and contributed to emotional resilience. Importantly, women reported that regular follow-ups, even through informal visits, reassured them of ongoing support and reduced the likelihood of returning to abusive conditions.

### **Decision-Making and Coping Strategies**

Survivors reported that social workers played a crucial role in helping them make informed decisions and develop coping strategies for dealing with ongoing violence. Emotional support was the first step, followed by practical planning. One woman shared:

*“NGO bhai told me I could stay strong even if I could not leave immediately. He helped me plan what to do if the violence got worse and also told me where I could go for legal help.”*

For some, job training or small income opportunities were part of coping strategies. Another participant recalled:

*“She encouraged me to join sewing training. Now when I earn even a little, I feel I can survive without begging my husband for money.”*

This demonstrates how caseworkers supported both short-term safety planning and long-term empowerment, balancing immediate needs with sustainable coping mechanisms.

### **Changes After Receiving Support**

Nearly all women noted some positive changes in their lives after receiving casework support. Emotional strength and reduced isolation were most frequently mentioned. One participant stated:

*“Before, I used to cry all day and feel hopeless. Now, I feel like I am not alone. I can talk and I feel lighter.”*

Others described improvements in family dynamics:

*“My husband still gets angry, but he has reduced hitting me. Maybe because he knows someone is watching, or maybe because I also speak up now.”*

These accounts highlight the psychological, behavioral, and relational shifts that occurred through consistent casework interventions.

### **Challenges in Receiving and Continuing Support**

Despite the benefits, participants identified several challenges. Family resistance and community stigma were common barriers. A woman explained:

*“My mother-in-law said I was bringing shame by telling outsiders about family matters. Sometimes I felt scared to go to the sessions.”*

Financial constraints also made it difficult for some women to continue support activities. As one participant noted:

*“The training center is far. I need bus fare, which I cannot always manage.”*

These experiences reveal how systemic limitations and community attitudes can undermine the continuity of casework support.

### **Ongoing Needs and Future Support**

When asked about continuing needs, survivors expressed a strong desire for ongoing counseling, legal protection, and income opportunities. One woman emphasized:

*“I still need someone to talk to when I feel weak. If the apa comes regularly, I feel strong.”*

Another called for better access to legal aid:

*“I want to know my rights clearly. If I go to the police, I need someone to stand with me.”*

Others focused on economic independence and community awareness:

*“If we get more training and jobs, we can live without fear. Also, if neighbors understand that hitting wives is wrong, it will help all women.”*

These responses suggest that survivors require a combination of continuous psychosocial support, legal empowerment, economic opportunities, and community-level sensitization to ensure long-term resilience.

### **Analytical Insights**

The case study findings show that individualized interventions provided through social casework foster both immediate coping strategies and long-term empowerment. Survivors emphasized emotional support, safety planning, and skill-building as critical for making informed decisions and regaining agency. The narratives reveal that even small steps toward independence such as earning a modest income significantly strengthened self-confidence and reduced vulnerability.

At the same time, challenges such as family pressure, financial barriers, community stigma, and inconsistent follow-up limited the effectiveness of interventions. These constraints highlight the fragility of progress in resource-poor and socially conservative settings.

Most importantly, survivors articulated a continued need for sustained support, particularly in the form of ongoing counseling, accessible legal aid, and expanded opportunities for income generation. They also highlighted the importance of community awareness, indicating that individual change is difficult to sustain in the absence of broader cultural shifts.

In sum, the case studies illustrate that social casework interventions can catalyze meaningful psychological and behavioral change, but their sustainability depends on consistent follow-up, supportive community contexts, and integrated linkages to legal and economic resources.

### ***1.5.2 Findings from Focus Group Discussions (FGDs)***

The two FGDs provided a multi-dimensional understanding of domestic violence in slum settings, incorporating perspectives from survivors, community leaders, eyewitnesses, media professionals, and NGO social workers. Thematic analysis revealed four interrelated domains: community perception of domestic violence, barriers to addressing abuse, the role of media and advocacy, and the effectiveness of social casework interventions. Cross-analysis demonstrated both convergence and divergence across stakeholder perspectives.

#### **Community Perception of Domestic Violence**

Slum leaders and eyewitnesses recognized domestic violence as a persistent social problem, yet framed it as a *“family matter”* that often remains behind closed doors. One slum leader remarked:

*“In our community, people see beating a wife as a private issue. Even when we know it happens, we hesitate to intervene unless it becomes life-threatening.”*

In contrast, victimized women emphasized the normalization of abuse in daily life, linking it to patriarchal attitudes and poverty-related stress. A survivor shared:

*“People say, ‘It’s normal for a husband to scold or hit his wife.’ But for us, it is not normal—it destroys our peace and our children’s lives.”*

This tension between community tolerance and women’s lived realities highlights the cultural challenges in addressing domestic violence openly.

#### **Barriers to Seeking Help**

Across groups, stigma, economic dependency, and lack of safe spaces were identified as major obstacles. Social workers noted that women often feared social isolation if they disclosed abuse. One NGO worker explained:

*“Many women tell me, ‘If I go to the police or leave my husband, my family will reject me.’ This fear makes them silent even when they are suffering.”*

Media professionals, however, emphasized that awareness-raising is gradually breaking this silence. One journalist commented:

*“We try to highlight stories of survivors in local newspapers, but victims are scared to appear in media. Without community support, our coverage alone cannot change things.”*

Thus, while NGOs and media aim to amplify women’s voices, social stigma remains a pervasive barrier.

#### **Role of Media and Advocacy**

Media participants stressed the importance of framing domestic violence as a public issue rather than a private matter. As one reporter noted:

*“If we can show domestic violence as a violation of rights, not just a family fight, society will slowly change its attitude.”*

Slum leaders acknowledged the influence of media but argued that poverty often overshadows awareness. An eyewitness pointed out:

*“We hear about rights in TV programs, but in our area, people worry more about food and rent. Violence becomes secondary in their struggle.”*

This contrast illustrates a gap between media advocacy and ground-level realities, reinforcing the need for context-sensitive awareness campaigns.

### **Effectiveness of Social Casework Interventions**

Participants across both FGDs generally agreed that individualized interventions by social workers brought meaningful change. Survivors spoke about gaining confidence through counseling and vocational training. One woman expressed:

*“The bhaiya [social worker] told me I could earn money and live with dignity. Her words gave me courage I never had before.”*

NGO social workers, however, highlighted resource limitations and lack of institutional collaboration. One practitioner stated:

*“We can support women with counseling and small training, but without proper shelter homes and police cooperation, our hands are tied.”*

Media participants echoed this limitation, emphasizing that advocacy must be backed by structural services. This demonstrates how casework interventions are effective at the micro-level but require macro-level institutional integration to sustain impact.

### **Challenges**

Challenges identified in the FGDs highlighted persistent stigma, fear of social exclusion, and mistrust toward formal services. Limited institutional support and inadequate resources further constrained survivors' ability to seek justice and sustain long-term recovery from domestic violence.

### **Cross-comparison from FGDs**

A cross-comparison of the FGDs shows overlapping recognition of domestic violence as a critical issue but varying degrees of responsibility assigned to stakeholders.

- **Convergence:** All groups acknowledged that domestic violence undermines women's wellbeing and children's futures. Survivors and social workers particularly highlighted the role of counseling, trust, and follow-up as key to recovery.

- **Divergence:** While media professionals emphasized awareness and framing, slum leaders viewed poverty and family honor as greater priorities than addressing abuse. Social workers focused on service gaps, while survivors stressed emotional support and economic independence.

- **Intersection:** Eyewitnesses often bridged both perspectives, acknowledging both community hesitation and the urgency of intervention.

This triangulation underscores that while individualized casework is effective, sustainable progress requires cultural shifts at the community level, stronger advocacy from the media, and structural backing from state and non-state institutions.

### **1.5.3 Findings from Key Informant Interviews (KIIs)**

The KIIs provided a rich perspective on the prevalence of domestic violence, the application of social casework, and the adaptability of its stages and principles within the Dhaka slum context. Participants included two senior NGO officials experienced in program implementation, two social welfare faculty members with academic and research expertise, and one MSS student engaged in thesis work on casework practice.

### **Prevalence and Pattern of Domestic Violence**

All respondents agreed that domestic violence in slums is both widespread and underreported. NGO officials emphasized the intersection of poverty, substance abuse, and patriarchal norms. One official noted:

*“In the slum areas, violence is not exceptional but almost routine. Alcohol, financial stress, and social acceptance of male dominance fuel the cycle.”*

Faculty members highlighted cultural and structural barriers that suppress disclosure. A professor observed:

*"Women rarely report abuse because they fear losing their only economic support and facing community stigma. Underreporting is a major obstacle for policy interventions."*

The MSS student echoed these insights, pointing out from fieldwork experience:

*"Many women tell me they hide bruises or stay silent because they think no one will believe them."*

### **Social Casework as an Intervention Method**

There was consensus that social casework is a highly relevant tool for individual-level intervention. NGO officials emphasized its practicality in building trust and supporting survivors. One KI remarked:

*"Casework gives us a step-by-step way to engage with women who otherwise have no safe space to talk. It helps them realize they have choices."*

Faculty members, however, stressed both its strengths and limitations. As one university faculty member stated:

*"Casework is effective at the micro-level, but without community awareness and structural support, its impact is limited. It cannot be the only strategy."*

The student expressed optimism about casework's adaptability:

*"Even with limited resources, I saw that women felt stronger after just a few counseling sessions. It is small but powerful."*

### **Application of the Four Stages of Casework**

Most participants agreed that the four stages named study, diagnosis, treatment, and follow-up, were observable in practice, though not always implemented consistently. An NGO official explained:

*"We manage study and diagnosis well, but follow-up is the biggest challenge. Once a woman leaves our immediate support, it is hard to monitor her safety regularly."*

Faculty respondents emphasized contextual adaptation. One professor said:

*"In Bangladesh, study and diagnosis must include cultural context family honor, religious considerations, and social stigma. Without these, treatment plans may not work."*

The student pointed out gaps in systematic application:

*"In my thesis work, I saw caseworkers sometimes skip the formal diagnosis step because of workload. This makes the treatment less targeted."*

### **Core Principles in Practice**

All key informants highlighted confidentiality, acceptance, and self-determination as essential for casework effectiveness. One NGO official emphasized:

*"If women fear exposure, they will never open up. Confidentiality is not just ethical; it is survival for them."*

A faculty member linked principles to empowerment:

*"Self-determination helps women feel that they are making choices, not just being guided. It is a vital step toward recovery. But most of NGO workers do not have proper knowledge about how to apply the principles of case work in field."*

The MSS student-01 reflected on field-level practice:

*"Sometimes, community workers struggle to fully maintain confidentiality in crowded slum settings. Still, survivors said they valued the effort and felt respected."*

### **Role of Individualized Interventions in Empowering Survivors**

All respondents agreed that individualized interventions such as counseling, legal aid, and skills training had transformative potential in empowering women. NGO officials emphasized that personal growth and financial independence were particularly critical. One official noted:

*“When women learn tailoring or small business skills, they no longer have to beg their husbands for money. This reduces dependency and gives them confidence to say ‘no’ to abuse.”*

Faculty members highlighted counseling as a foundation for empowerment. As one professor explained:

*“Skill-building is valuable, but without counseling, women cannot process their trauma. Counseling helps them believe they deserve dignity, and then income opportunities sustain that change.”*

The MSS student-02 echoed this, stating:

*“In my field visits, I saw women smiling for the first time after learning they could earn a little on their own. It is small, but it changes how they see themselves.”*

This indicates that individualized interventions create a holistic pathway: psychological recovery through counseling, legal awareness for protection, and economic independence through skill-building.

#### **6. Challenges in Applying Casework Methods in Slum Settings**

Social workers face numerous barriers in applying the full scope of casework in low-resource areas. NGO officials identified resource shortages and caseload pressure as the most urgent. One explained:

*“We often handle 20–30 cases at once with very few staff. It is impossible to follow every step systematically.”*

Faculty members emphasized training gaps and cultural challenges. A professor commented:

*“Many frontline workers are enthusiastic but not formally trained in social work. Without professional knowledge, casework becomes mechanical and loses its therapeutic value.”*

The MSS student added a contextual barrier:

*“Sometimes community members interfere, saying we are breaking families. This discourages both workers and survivors.”*

This demonstrates that practical, cultural, and institutional challenges undermine the consistent application of casework principles in slum contexts.

#### **Indigenization and Adaptation of Casework**

Participants stressed the need to adapt social casework to Bangladesh’s cultural and resource realities. NGO officials underscored using local language, metaphors, and culturally resonant examples in counseling. One official shared:

*“When we use simple Bangla and local stories, women relate more. Technical words from books don’t work here.”*

Faculty members emphasized family involvement and local networks as essential. A professor explained:

*“In Bangladesh, decisions are rarely individual. If we ignore family dynamics, interventions may fail. Involving mothers-in-law or community leaders cautiously can make change sustainable.”*

The MSS student highlighted the value of peer-support networks:

*“Survivors told me they feel stronger when other women in the slum share their stories. Group sessions could complement casework.”*

This suggests that indigenization involves linguistic, cultural, and relational adaptation—anchoring social casework in familiar contexts and community structures while preserving its professional integrity.

### **Policy and Program-Level Recommendations**

All informants emphasized that systemic reforms are required to complement casework practice. NGO officials prioritized integration of services and stronger NGO-government collaboration. One official argued:

*“Casework alone cannot protect women if shelter, legal aid, and healthcare are missing. We need one-stop service centers in slums.”*

Faculty respondents stressed training and workforce development. A professor noted: *“Bangladesh must invest in professional social workers. Without a trained workforce, casework will remain fragmented and underutilized.”*

The student recommended legal reforms and community-level campaigns:

*“Women need to know that laws exist to protect them. At the same time, local campaigns should break the silence around domestic violence.”*

Collectively, these recommendations underscore that while individualized casework interventions are effective, broader structural measures, such as integrated service delivery, legal empowerment, and workforce capacity are necessary to strengthen survivors’ support systems.

### **Analytical Insights**

The KII findings reveal that domestic violence in Dhaka’s slums is normalized yet concealed, posing major barriers to intervention. Social casework emerged as a vital micro-level strategy, enabling survivors to share experiences, process trauma, and build resilience through its structured stages of study, diagnosis, treatment, and follow-up. Stakeholders highlighted differing priorities: NGO officials stressed resource constraints, faculty emphasized contextual adaptation to cultural norms, and the MSS student underscored training gaps and community resistance while acknowledging survivors’ positive feedback. Across groups, individualized interventions like- counseling, legal aid, and skills training—were recognized as empowering, reducing dependency and enhancing confidence. Yet, these efforts were deemed insufficient without systemic reinforcement. Sustainability requires linking casework with broader reforms, including integrated services, trained professionals, and stronger legal frameworks. Overall, effectiveness in slum settings depends on balancing micro-level support with macro-level institutional and policy integration to create lasting change.

### **1.6 Discussion of the Study**

The present study investigated the prevalence, patterns, and responses to domestic violence in Dhaka’s slum communities through a triangulated approach combining case studies, focus group discussions (FGDs), and key informant interviews (KIIs). The findings collectively underscore that domestic violence is both normalized and underreported, while social casework interventions though impactful; face structural and cultural barriers in achieving sustainable outcomes. This section situates these findings in relation to existing literature, critically reflecting on the validity, reliability, and broader implications of the study results.

**a) Domestic Violence as a Normalized but Hidden Phenomenon**

Across FGDs, KIIs, and case studies, a consistent picture emerged: domestic violence is widely perceived as “normal” within slum contexts, often framed as a private matter rather than a social problem. Women survivors recounted frequent physical and emotional abuse, but most hesitated to report incidents due to family honor, economic dependency, and community stigma. This finding aligns with earlier studies in South Asia which document how patriarchal norms sustain the cycle of silence and underreporting (Haque & Clarke, 2019; Naved & Persson, 2010).

The reliability of these findings is reinforced by the consistency across respondent groups: survivors described lived experiences of silence, slum leaders emphasized economic struggles over women’s safety, and NGO workers highlighted institutional barriers to reporting. While not every respondent agreed on the centrality of domestic violence compared to other urban poverty issues, the thematic convergence suggests validity. Moreover, the alignment with literature on cultural barriers to disclosure supports the conclusion that underreporting is not incidental but systemic.

**b) The Role and Relevance of Social Casework**

Casework as a micro-level method emerged in all datasets as a vital intervention tool. Survivors valued emotional support and safety planning, FGD participants recognized its role in creating trust, and KII respondents emphasized its structured approach (study, diagnosis, treatment, follow-up). The principles of confidentiality, acceptance, and self-determination were repeatedly identified as central to effectiveness.

These echoes established social work literature, which underscores that client-centered approaches are most effective when survivors can control disclosure and decision-making (Hepworth et al., 2017). Similarly, research in low-resource settings indicates that trust and confidentiality are essential for breaking cycles of silence (Ahmed, Chowdhury, & Rahman, 2022).

Yet, the findings also suggest limitations in practice. NGOs reported inadequate follow-up due to high caseloads, and survivors noted inconsistent support over time. This gap reflects what Payne (2015) identifies as a disjuncture between theoretical fidelity and field realities in social casework, especially where resource scarcity prevails. Thus, while the validity of casework as a framework is confirmed, its reliable application in slum contexts remains partial, constrained by institutional weaknesses.

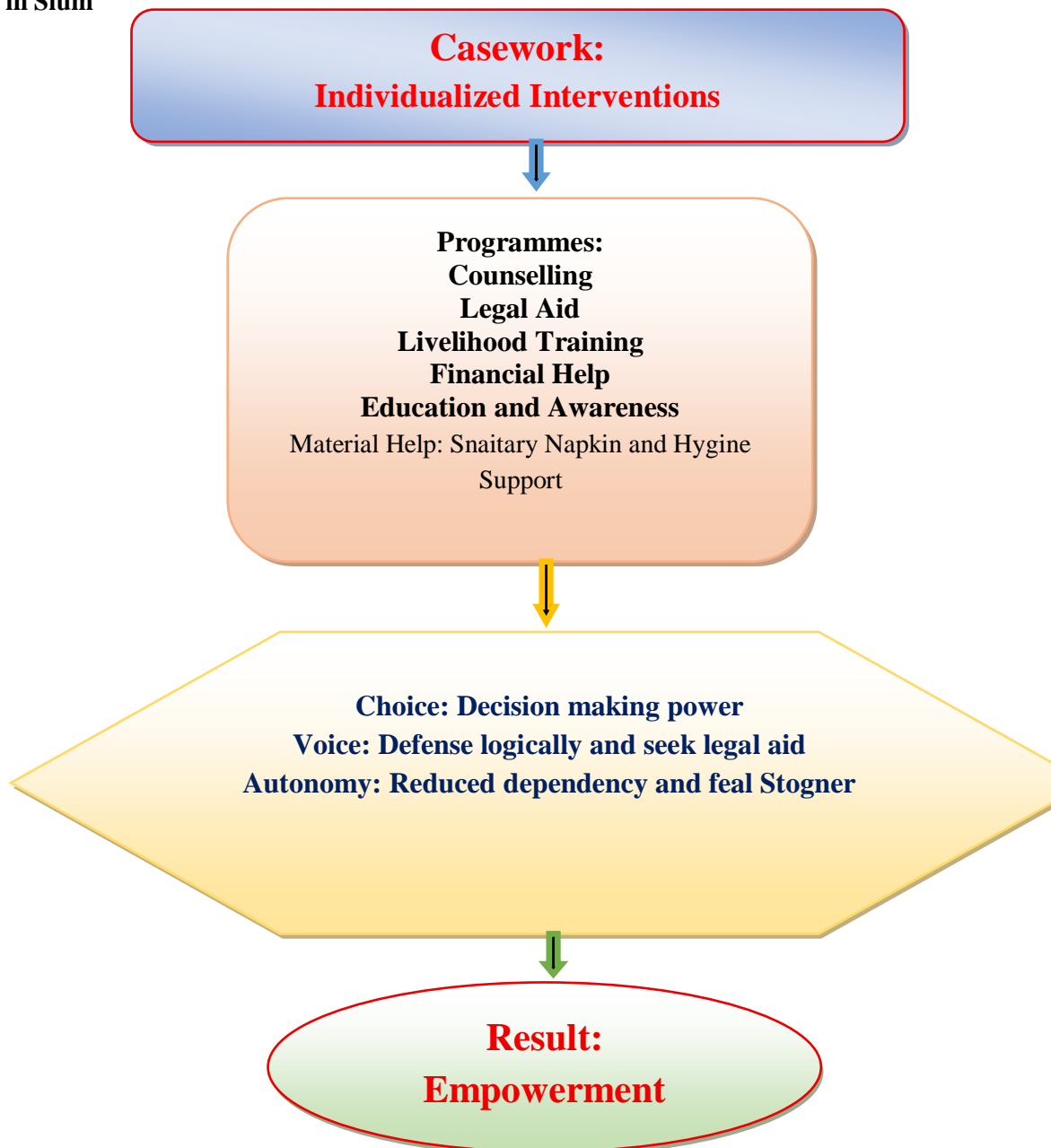
**c) Individualized Interventions and Empowerment**

The case studies revealed that individualized support such as counseling, legal aid, financial and material help and livelihood training provided tangible pathways toward empowerment. Women described feeling “stronger” after accessing such support, with some securing modest income and others pursuing legal remedies. This is consistent with global findings that economic empowerment reduces vulnerability to intimate partner violence by decreasing dependency (Jewkes et al., 2015).

However, the study also found that such progress is fragile without systemic support. Survivors reported family pressure to withdraw from legal proceedings, stigma from neighbors, and financial constraints limiting long-term independence. Similar concerns are raised in the literature on empowerment programs, which caution that economic interventions without community sensitization can exacerbate backlash (Schuler, Nazneen, & Bates, 2013). casework interventions were found to strengthen emotional support, coping skills, and family communication, all of which contributed to improved well-being

(Shadhin et al., 2024). Thus, while the primary data confirm the empowering role of individualized interventions, they also suggest that empowerment must be situated within a broader ecosystem of community and policy change.

**Chart 1: Individualized Interventions and Empowerment of Victim Women in Slum**



**d) Challenges of Applying Casework in Low-Income Urban Areas**

All respondent groups, but particularly NGO officials, pointed to systemic and contextual challenges in applying casework in slum settings. These include overburdened

staff, inadequate training, financial constraints, and the difficulty of culturally adapting Western models of casework. Survivors also experienced gaps in service continuity, underscoring the practical limitations of interventions.

These challenges resonate strongly with secondary literature. Research in Bangladesh and other Global South contexts emphasizes that imported casework models often require indigenization to remain effective (Farooqi, 2011). Language barriers, family dynamics, and collective cultural norms complicate individualized casework, while under-resourced social service sectors exacerbate inconsistencies (Kabir & Sultana, 2018). The alignment between field findings and existing scholarship confirms the reliability of this theme: casework is conceptually valid but operationally constrained in low-income, resource-poor environments.

**Table 1: Challenges of Applying Casework**

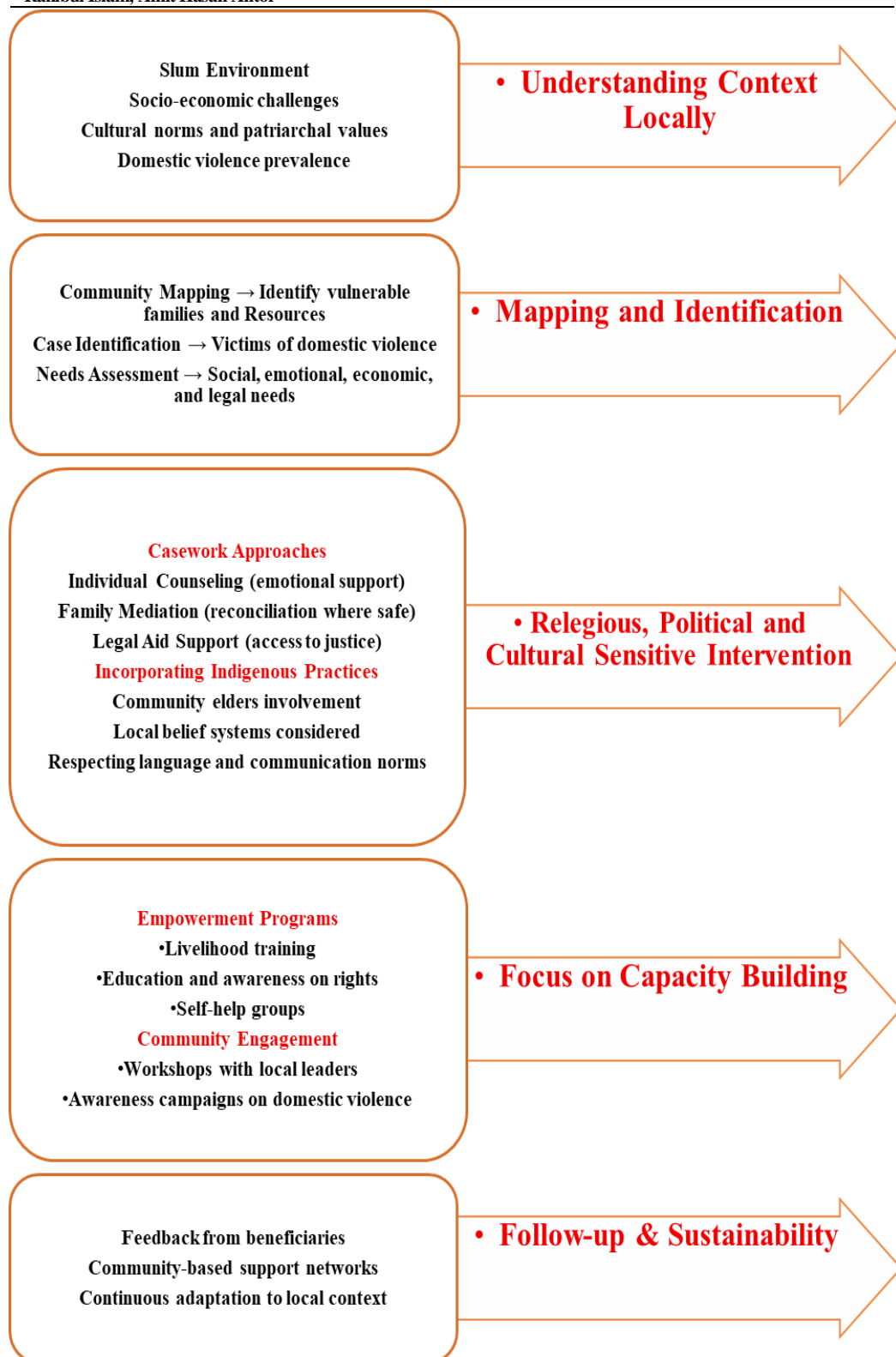
Nature of Challenge	Source / Cause	Impact on Casework Effectiveness
<b>Staffing and Workload</b>	Overburdened social workers and NGO staff; high caseloads	Limited follow-up, reduced individualized attention, delays in service delivery
<b>Training and Capacity Gaps</b>	Inadequate professional training for field staff; lack of practical exposure	Inconsistent application of casework methods; diminished quality of interventions
<b>Financial Constraints</b>	Limited funding for NGOs and community programs; resource-poor settings	Inability to sustain long-term support, gaps in counseling, and follow-up services
<b>Cultural and Contextual Adaptation</b>	Western-origin casework models not fully adapted to local norms; language barriers; family dynamics; community stigma	Reduced acceptance by survivors; challenges in applying study, diagnosis, treatment, and follow-up stages effectively
<b>Service Continuity</b>	Irregular visits, absence of structured follow-up, fragmented NGO services	Fragile progress for survivors; risk of relapse or re-victimization
<b>Structural/Systemic Barriers</b>	Under-resourced social service sector; lack of institutional support	Constrains scalability of interventions; limits integration into public health or community systems

Source: Field data (Case Studies, FGDs, KIIs), Farooqi (2011), Kabir & Sultana (2018)

**e) Adaptation and Indigenization of Casework**

A major insight from KIIs was the call for indigenization of social casework for Bangladesh’s slum context. Suggestions included using local dialects, incorporating family mediation where safe, and building on existing community networks. Concern faculty members and researchers highlighted the importance of integrating micro-level casework with macro-level advocacy and meso-level community organizing. This aligns with theoretical debates in social work, where culturally sensitive practice is emphasized as a prerequisite for effectiveness (Gray, Coates, & Yellow Bird, 2010). In South Asian contexts, studies show that family-inclusive approaches can increase acceptance of interventions, provided they do not compromise survivor safety (Panday et al., 2012). The convergence between primary findings and established literature indicates that this theme is not only valid but critical for future practice.

Chart 2: Adaptation and Indigenization of Casework in context of Bangladesh



The diagram illustrates a comprehensive framework for implementing social casework to address domestic violence among slum-dwelling women in Dhaka, integrating findings from the present study, researcher observations, and field experience. The first stage emphasizes understanding the local context, highlighting the importance of analyzing socio-economic challenges, cultural norms, patriarchal values, and domestic violence prevalence. This contextual awareness enables caseworkers to design interventions that are culturally relevant and responsive.

The second stage, mapping and identification, involves community mapping to identify vulnerable families, case identification of domestic violence victims, and needs assessments to determine social, emotional, economic, and legal support requirements. The third stage, religious, political, and cultural sensitive intervention, underscores the use of individualized counseling, family mediation, legal aid, and incorporation of indigenous practices, including local belief systems and community elder involvement, ensuring interventions are respectful of communication norms and local traditions.

Capacity building forms the fourth stage, focusing on empowerment programs such as livelihood training, rights awareness, self-help groups, and community engagement, supported by workshops and awareness campaigns. Finally, follow-up and sustainability emphasize continuous feedback from beneficiaries, community-based support networks, and ongoing adaptation to the local context.

This framework reflects the study's findings that structured, culturally sensitive social casework rooted in local understanding, targeted interventions, and continuous support effectively empowers women, enhances resilience, and reduces the risk of re-victimization, offering practical guidance for NGOs, social workers, and policymakers working in low-resource urban communities.

#### **f) Policy and Program-Level Changes**

Across datasets, there was a strong call for structural changes to strengthen support systems. Respondents recommended integrated service delivery, greater NGO–government collaboration, legal reforms to protect survivors, and expansion of professional training for social workers. Survivors specifically emphasized the need for sustained counseling and livelihood opportunities, while NGOs stressed the importance of institutional funding and follow-up mechanisms.

The literature similarly identifies policy gaps in Bangladesh, where fragmented service provision, weak coordination, and limited legal enforcement undermine anti-violence efforts (Hossain, 2017). Research also emphasizes the importance of integrating psychosocial and economic interventions for long-term recovery (World Bank, 2020). The alignment between field findings and policy literature reinforces the reliability of this theme, suggesting that micro-level casework effectiveness is dependent on macro-level structural reforms.

#### **g) Triangulated Insights**

A cross-analysis of FGDs, KIIs, and case studies suggests both convergence and divergence in perspectives. Survivors emphasized emotional and economic needs, NGOs highlighted practical service gaps, academics focused on theoretical adaptation, and slum leaders minimized the issue in favor of poverty concerns. Eyewitnesses and media professionals offered intermediary perspectives, bridging denial with recognition of urgency.

This triangulation mirrors the multi-layered understanding of domestic violence interventions presented in global social work literature. Scholars argue that sustainable change requires alignment across micro (individual), meso (community), and macro (policy) levels (Healy, 2014). The findings of this study echo this framework, suggesting validity through consistency with theoretical models. However, the divergence between academic ideals and field realities points to partial reliability, where casework principles are widely endorsed but inconsistently practiced in real-world contexts.

**Table 2:** Synthesized Qualitative Findings

Theme	Key Insights	Implications / Relevance
Prevalence and Patterns of Domestic Violence	Domestic violence is widespread, normalized, and underreported; women face physical, emotional, and sexual abuse; stigma and family honor restrict disclosure.	Highlights need for awareness campaigns, confidential support, and culturally sensitive interventions.
Access to Social Work Interventions	Survivors accessed services mainly through NGO outreach, community referrals, and university field projects.	Emphasizes importance of community trust and proactive outreach for intervention uptake.
Role of Individualized Casework	Emotional support, safety planning, and skill-building enabled coping strategies; structured casework stages enhanced empowerment.	Confirms effectiveness of social casework methodology and psychosocial focus.
Behavioral and Psychological Changes	Survivors experienced increased self-confidence, emotional resilience, and partial reduction in abuse; income-generation complemented empowerment.	Indicates psychosocial interventions promote sustainable behavioral change.
Challenges and Barriers	Family resistance, financial constraints, community stigma, and inconsistent follow-up limited intervention effectiveness; NGOs face resource and training gaps.	Highlights operational and systemic constraints; underscores need for capacity-building and institutional support.
Community and Multi-Agency Roles	Multi-stakeholder collaboration is essential, but cultural norms can impede reporting; media, leaders, and NGOs have complementary roles.	Suggests integration of community sensitization, advocacy, and coordinated service delivery.
Indigenization and Cultural Adaptation	Local language use, family involvement, and culturally relevant approaches increase intervention acceptance.	Aligns with global literature emphasizing culturally sensitive social work practice.
Policy and Structural Support	Sustainable outcomes require institutional recognition of social work, trained workforce, legal reforms, and integrated service delivery.	Validates need for macro-level reforms to complement micro-level interventions.

The reliability of these findings is strengthened by convergence across respondent groups and alignment with existing literature. However, their partial validity must be acknowledged, given the structural barriers and inconsistent practices observed. This suggests that while social casework holds promise, its effectiveness in slum contexts depends on systemic support, cultural sensitivity, and alignment with broader policy frameworks. The above discussion demonstrates that social casework is a valid and relevant method for addressing domestic violence among slum-dwelling women in Dhaka, but its success is constrained by cultural, institutional, and resource-related barriers. The triangulated findings, supported by secondary literature, highlight the need for both micro-level interventions and macro-level reforms. Ultimately, sustainable change requires bridging the gap between survivor needs, NGO capacity, academic models, and state responsibility.

### ***1.7 Policy Recommendations***

#### **Professional Recognition of Social Work in Bangladesh**

**Recommendation:** The government should formally recognize social work as a professional discipline with standardized certification, career pathways, and regulatory oversight. This would legitimize the profession and ensure ethical, skilled practice in addressing complex social issues like domestic violence.

**Implementation Responsibility:** Ministry of Social Welfare, Bangladesh Association of Social Workers, and relevant regulatory bodies.

#### **Targeted Social Work Interventions in Slum Areas**

**Recommendation:** Social work interventions should prioritize low-income urban settlements, particularly slums in Dhaka, as primary sites for casework practice addressing domestic violence. Programs should apply the four-stage casework method—study, diagnosis, treatment, follow-up—tailored to the slum context.

**Implementation Responsibility:** Community-based organizations (CBOs), NGOs working in urban poverty and domestic violence, public health systems, and university social work departments.

#### **Field-Based Learning and Research Integration**

**Recommendation:** University students in social work programs should be actively involved in field practicums and applied research in slum communities, under supervision of faculty and experienced caseworkers. Such participation should be recognized as part of formal degree requirements.

**Implementation Responsibility:** University social work departments (e.g., Dhaka University), collaborating NGOs, and supervisory faculty.

#### **Capacity Building for NGO and Community Workers**

**Recommendation:** NGOs and community workers applying social work methods should receive structured training on social casework, including study, diagnosis, treatment, follow-up, and adherence to core principles such as confidentiality, acceptance, and self-determination.

**Implementation Responsibility:** NGOs, Ministry of Social Welfare training units, professional social work associations.

#### **Alignment with Social Work Principles and Values**

**Recommendation:** All interventions should strictly adhere to social work values and philosophy, emphasizing client-centered approaches, ethical responsibility, and

empowerment rather than transactional assistance. Core principles—confidentiality, self-determination, nonjudgmental acceptance—must guide every stage of casework.

**Implementation Responsibility:** Social workers, supervisors, NGOs, academic mentors, and professional associations.

### **Prioritization of Psychosocial Support Over Economic Aid**

**Recommendation:** While economic support (e.g., income-generating activities) can complement recovery, social casework interventions should focus primarily on psychosocial well-being, trauma processing, emotional resilience, and legal awareness. Economic support should be secondary and contextual.

**Implementation Responsibility:** Social workers, NGOs, and CBOs operating in slum areas.

### **Enhanced Community Awareness and Multi-Agency Collaboration**

**Recommendation:** Programs should include community sensitization campaigns on domestic violence, its consequences, and available support services. Multi-agency collaboration between NGOs, social service offices, local authorities, health services, and law enforcement should be institutionalized to create a safer environment.

**Implementation Responsibility:** Local government, NGOs, community leaders, media professionals, and law enforcement agencies.

### **Monitoring, Evaluation, and Follow-Up Systems**

**Recommendation:** Establish structured monitoring and evaluation mechanisms for casework interventions, including systematic follow-up with survivors to assess progress and address emergent challenges.

**Implementation Responsibility:** NGOs, social service officers, university supervisors, and the Ministry of Social Welfare.

### **Policy Advocacy for Institutional Support**

**Recommendation:** Advocate for policy reforms that allocate funding, expand trained social work personnel, and integrate domestic violence interventions into public health and social welfare systems.

**Implementation Responsibility:** Ministry of Social Welfare, NGOs, professional associations, and academic institutions.

On the other hand, the following table showing recommendations for indigenizing social work in Bangladesh’s slum areas regarding domestic violence, **along with** practical implementation strategies:

**Table 3:** Recommendations for Indigenizing

<b>Recommendation</b>	<b>How to Implement / Action Steps</b>
<b>Culturally &amp; Religiously Sensitive Interventions</b>	<ul style="list-style-type: none"><li><input type="checkbox"/> Conduct preliminary community assessments to understand local beliefs, customs, and religious norms.</li><li><input type="checkbox"/> Design counseling and mediation sessions incorporating local languages, traditions, and ethical frameworks.</li><li><input type="checkbox"/> Train social workers to respect religious and cultural sensitivities while addressing domestic violence.</li></ul>
<b>Community-Driven Participation</b>	<ul style="list-style-type: none"><li><input type="checkbox"/> Identify and collaborate with local leaders, women’s groups, and informal community networks.</li><li><input type="checkbox"/> Organize participatory workshops to co-create</li></ul>

	intervention strategies. <input type="checkbox"/> Establish peer support groups to enhance trust and facilitate reporting of violence.
<b>Capacity Building &amp; Economic Empowerment</b>	<input type="checkbox"/> Provide vocational training, microfinance access, and skill-building programs tailored to women in slums. <input type="checkbox"/> Integrate psychosocial counseling to strengthen mental health and resilience. <input type="checkbox"/> Monitor progress and offer follow-up support to ensure sustainable empowerment.

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## ЕФЕКТИВНІСТЬ СОЦІАЛЬНОЇ РОБОТИ У ВИРІШЕННІ ПРОБЛЕМИ ДОМАШНЬОГО НАСИЛЬСТВА СЕРЕД ЖІНОК, ЩО МЕШКАЮТЬ У НЕТРАХ МІСТА ДАККА: ЯКІСНЕ ДОСЛІДЖЕННЯ ВТРУЧАННЯ ТА ІНДИГЕНІЗАЦІЇ

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*Анотація.* Домашнє насильство є поширеною проблемою серед жінок, що мешкають у нетрах Дакки, Бангладеш, що посилюється бідністю, гендерною нерівністю та обмеженими системами підтримки. Це якісне дослідження вивчає ефективність соціальної роботи з питань підтримки жертв у міських нетрах. Використовуючи підхід тематичного дослідження, дані були зібрані за допомогою 15 глибинних інтерв'ю, 2 фокус-групових дискусій у нетрах Корайл та Камрангірчар, а також 5 ключових інтерв'ю з представниками неурядових організацій, викладачами університетів та студентами соціальної роботи MSS. Для підтвердження результатів було використано вторинні дані, включаючи літературу та звіти. Результати показують, що соціальна робота з питань корінних народів, що застосовує чотири етапи: дослідження, діагностика, лікування та подальше спостереження, ефективно надає жінкам можливість висловити травму, зрозуміти свої права та прийняти стратегії подолання. Втручання включали консультивання, планування безпеки, емоційну підтримку, юридичні направлення та навчання навичкам, що генерують дохід. Основні принципи соціальної роботи, такі як прийняття, конфіденційність та самовизначення, зміцнили довіру та стійкість, тоді як регулярні подальші спостереження зменшили повторну віктимізацію та сприяли змінам у поведінці. Дослідження рекомендує інтеграцію культурно адаптованої соціальної роботи в громадські організації та системи охорони здоров'я, поряд з ініціативами з підвищення обізнаності громади та міжвідомчою співпрацею. Ці висновки є цінними для студентів соціальної роботи, молодих дослідників, фахівців з роботи з випадками, розробників політики, міських планувальників, викладачів університетів та працівників неурядових організацій/урядових організацій, які надають підтримку на основі конкретних випадків маргіналізованим жінкам, пропонуючи стратегії, засновані на доказах, для розширення можливостей постраждалих та покращення надання послуг у міських умовах з низьким рівнем ресурсів.

**Ключові слова:** соціальна робота з випадками, домашнє насильство, жінки з нетрів, ефективність втручання, індигенізація.

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