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Women Construction Workers in Bangladesh: Health, Wellbeing, and Domestic Abuse during the COVID-19 Pandemic

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Abstract: This article draws on in-depth research conducted during the first two years of the COVID-19 pandemic with a group of 35 women who work as construction labourers in Sylhet, northern Bangladesh. We particularly focus on these women's narratives of economic crisis, domestic abuse, coercive control and intimate relations during the pandemic. Here, we consider the ways in which the COVID-19 pandemic between 2020 and 2021 particularly affected this group of women participants as they employed survival strategies to support their families through a time of extreme economic and social crisis. A key issue they raised was the negative impact the pandemic has had on their health and wellbeing, particularly exacerbated by an increase in experiences of intimate partner violence (IPV), more commonly termed domestic abuse or domestic violence in the local context. The violence they faced was not necessarily a new experience for many of these women, but it was intensified by pressures brought to bear on interpersonal relations within their household as a result of lack of access to incomes, rising levels of poverty, and the stresses placed on families trying to survive in a time of extreme socio-economic and health insecurity.

Keywords: women; construction workers; Bangladesh; health; wellbeing; domestic abuse; intimate partner violence; COVID-19 pandemic



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1. Introduction

This article draws on in-depth research conducted during the first two years of the COVID-19 pandemic with a group of 35 women who work as construction labourers in Sylhet, northern Bangladesh. Here, we particularly focus on these women's narratives of economic crisis, domestic abuse, coercive control and intimate relations during the pandemic. These women are part of a larger group of 70 participants with whom we have worked over the course of the past several years, all of whom participated in research led by Tanzina Choudhury as part of the GCRF-funded Global Gender and Cultures of Equality (GlobalGRACE) Project.¹ Here, we consider the ways in which the first two years of the COVID-19 pandemic between 2020 and 2021 particularly affected this group of women participants as they employed survival strategies to support their families through a time of extreme economic and social crisis.

Since the onset of the COVID-19 pandemic, we have seen numerous reports alerting us to an alarming increase in levels of gender-based violence (GBV), violence against women and girls (VAWG) and domestic abuse or intimate partner violence (IPV) across the world. Indeed, levels of GBV spiked globally to such an extent that the United Nations called this escalating violence a 'shadow pandemic' perniciously manifesting throughout the international health crisis (UN Women 2020a). As Phumzile Mlambo-Ngcuka, Executive Director of UN Women, stated: "In Argentina, Canada, France, Germany, Spain, the United Kingdom, and the United States, government authorities, women's rights activists and

civil society partners have flagged increasing reports of domestic violence during the crisis, and heightened demand for emergency shelter. Helplines in Singapore and Cyprus have registered an increase in calls by more than 30 per cent. In Australia, 40 per cent of frontline workers in a New South Wales survey reported increased requests for help with violence that was escalating in intensity" (Mlambo-Ngcuka 2020, n.p.).

In the context of Bangladesh, we similarly found increased reports that incidences of gender-based violence and domestic abuse had risen during the pandemic, and this was also a key issue raised by the women who participated in our study. Indeed, the women with whom we worked frequently talked about the negative impact the pandemic has had on their health and wellbeing, particularly exacerbated by an increase in experiences of IPV, more commonly termed domestic abuse or domestic violence in the local context. The violence they faced was not necessarily a new experience for many of these women, but it was intensified by pressures brought to bear on interpersonal relations within their household as a result of lack of access to incomes, rising levels of poverty, and the stresses placed on families trying to survive in a time of extreme socio-economic and health insecurity. Hence, as we discuss in greater depth below, levels of GBV globally, nationally in Bangladesh, and more specifically for these women participants in Sylhet have long been a cause for serious concern prior to the COVID-19 pandemic. Nevertheless, the spread of COVID-19 has exacerbated key underlying flash points of domestic abuse, including increased economic deprivation and household precarity in both local and global contexts. In what follows, we briefly locate the study within a broader contextual, methodological, epistemological and theoretical framework, before drawing on three key themes emerging from the women's narratives, exploring their experiences of interhousehold and intimate relations, socio-economic deprivation and survival strategies, and coercive control and intimate partner violence during the pandemic.

2. Contextualising the Research: A Note on Method, Methodology and GlobalGRACE

Initially, and to contextualise these data, we should explain that our analysis builds on over a decade of in-depth qualitative research with and among women construction workers in Sylhet, a city with a population of approximately 890,000 people in north-eastern Bangladesh (World Population Review 2021). Since 2009, through ethnographic observation, life history interviews, focus groups and, more recently, as part of the GlobalGRACE Project, through participatory creative workshops, photography and filmmaking, we have worked with a total of 70 female construction workers and 50 members of their wider families. The GlobalGRACE Bangladesh project (2017 to 2022) in turn builds on longitudinal research led by Choudhury (see, for example, Choudhury 2014; Choudhury and Clisby 2018, 2020a, 2020b) with resource-poor women workers in Sylhet. This article thus emerges from a long relationship with relatively marginalised women living and working in Sylhet, and this study sits within this wider research context. However, here we draw specifically on data gathered from 35 of this larger group of women construction workers in Sylhet who were aged between 24 and 51. We worked in small groups, listening to conversations with the same groups of between 11 and 12 women participants through a series of 9 focus group discussions (FGDs) over several weeks between January and July 2021. We followed up on issues emerging within these discussion groups and talked in more detail about the wider context of their lives and experiences of living and surviving through the pandemic in subsequent individual in-depth interviews with 18 of these women. The specific FGDs and in-depth interviews we draw on here were conducted during and within the context of the GlobalGRACE Bangladesh project's weekly workshops and creative activities, working with a larger group of women who participated in the GlobalGRACE project. The research was, of course, conducted with the informed consent of all participants, conversations were audio recorded with permission, all names were pseudonymised, and the study was subject to a rigorous ethical review process. We thematically analysed the data, drawing on our qualitative feminist methodological approach, and, for the purposes of this article, we thematized their narratives into three areas of focus: *talking about economic crisis, unequal*

burdens and domestic abuse; talking about enforced proximity and coercive control; and talking about sex and intimacy during the pandemic.

To provide a little more context about the *Global Gender and Cultures of Equality* Project within which this specific study sits, working in six countries worldwide, GlobalGRACE, responds to two key UN Sustainable Development Goals: gender equality (SDG5) and health and wellbeing (SDG3). We know of course that links exist between intersecting inequalities and diminished wellbeing, and this is something we have been concerned with unpacking in each work package from diverse global perspectives. Throughout the project, we have drawn on interdisciplinary and multi-sensory methodologies to investigate people's everyday experience of inequalities and together investigate the variety of ways that people's creative practices challenge systems of privilege and engender new possibilities for more equitable ways of living together.

GlobalGRACE Bangladesh particularly explores how collaborative filmmaking and participatory photography, led and curated by women construction workers, can be used by them to show and tell their stories, as well as to generate public awareness of their lives and make visible their everyday struggles and achievements as they make inroads into an occupation normatively gendered as masculine. Since 2018, the Sylhet-based research team has been working closely with a core group of 12 female construction workers in the material culture, film making and photography project, and this expanded to over 50 women participants in more recent 'creative activism' workshops (see [Choudhury and Clisby 2020a](#)) throughout 2020–2021. The project successfully generated wider public impact through the curation and production of a series of short films, photographic exhibitions and digital media presence led and curated by this group of female construction worker participants. The workshop participants also created their own Workers' Manifesto of Rights for women construction workers, as well as a Women's Manifesto of Rights, and they have also established their own social enterprise involving several hundreds of women across the city.

Over the past three years, we have held regular day-long workshops—weekly throughout 2018, and then when possible after the onset of the pandemic in 2020, in which participants were supported and trained in mobile phone-based film making and photography, alongside creative material culture and craft workshops.² As these women are day labourers who are only paid for the days they work on building sites in Sylhet, we ensured that they were supported through financial and subsistence resources during their participation. These workshops also—importantly—became a safe space where friendships and support networks were built, where they were able to talk about their lives, share experiences and provide one another with an important source of mutual care. The participants also developed wider skills in event planning, coordination, budgeting, and publicity in the lead up to a large community festival they organised to showcase their films and photography. Hence, and as we discuss in more detail elsewhere ([Choudhury and Clisby 2020a](#)), through working closely together over a period of three years, the participants built strong friendships and networks, created a safe space to focus on their own health and wellbeing, enhanced their self-esteem and confidence, and explored issues of gender in/equalities, rights and social justice. In this way, as Clisby previously explored in relation to women's support services and networks, their bodies in the space of the workshops "are themselves a form of embodied infrastructure, sites in which women themselves become a critical part of the infrastructure of support. Women's bodies and minds, working within physical spaces, become bridges, material supports [. . .] it is also in these spaces that women are actively recognizing and challenging processes of gendering as forms of structural, symbolic and visceral violence, enabling women to enhance their confidence, wellbeing and capacities for change as situated knowers." ([Clisby and Holdsworth 2014](#), p. 183).

As with all GlobalGRACE research, here we are trying to bring feminist, decolonial and participatory methodological approaches and creative praxis to our work. We take seriously the position of the participants as 'situated knowers', a concept that is important within feminist epistemology, and it is from this perspective that we understand gendered beings

as, “knowers situated in relation to what is known and experienced by both themselves and in relation to other knowers. [We understand that] what is known, and the way that it is known, [. . .] reflects the situation or perspective of the knower [and that] This is itself legitimate knowledge” (Clisby and Holdsworth 2014, p. 4). Through our feminist praxis, we also try to acknowledge, understand, as well as mitigate the fluid power imbalances between researchers and participants, beginning with the experiences and standpoint of the women with whom we are working.

3. From ‘Embodied Infrastructures’ to ‘Border Bodies’: Women Working in Construction in Bangladesh

Throughout the research project, our central focus was thus on gender-based in/equalities, poverty, health and wellbeing among female construction workers who are employed as day labourers on building sites in the city. As we have discussed in more depth elsewhere (Choudhury and Clisby 2018, 2020a, 2020b), women who work in the construction sector in Bangladesh pose important challenges to normative gender roles and expectations. In Bangladeshi society, as in many other socio-cultural contexts worldwide, the private sphere continues to be perceived by many as an essentially female space, while the public sphere is normatively understood as a male-dominated arena. There also remains a concomitant differential gender hierarchy in terms of value and status accorded to ‘male’ versus ‘female’ spaces (Choudhury 2014; Choudhury and Clisby 2020a). Despite some shifts in normative gender roles and women’s participation in the workforce over the past few decades, especially among more highly educated middle classes, cultural taboos and negative stereotypes continue to exist surrounding women’s involvement in the public domain, and women’s visible large-scale inclusion in the formal labour market was relatively negligible until the 1980s (Feldman 1992; Kabeer 2007; Hossain 2011). It was at this time when, following a shift in neoliberal governmental policy, Bangladesh saw the introduction of increasing numbers of new market factories, whose foreign owners favoured a largely younger female workforce. This preference was often based on their own culturally specific gender stereotyping and biologically essentialist notions around ideas of cheap labour, feminine docility and feminised skills in, for example, sewing (Elson and Pearson 1981; Feldman 1992; Kabeer 1997, 2007; Pearson 1992, 1998, 2000).

However, women who worked in these new factories were often regarded within the communities in which they lived as socially and morally suspect, as in violation of norms of *Purdah*, and, as such, could be subject to public abuse. Nevertheless, needs must, and, initially at least, a primary motivating factor in women’s engagement in paid employment in the visible, public sphere was economic need. Familial poverty necessitated the entry of these women into the public sphere, poverty that was often compounded by men’s unwillingness and/or inability to discharge their culturally normative provisioning role (Kabeer 2000; Choudhury 2014; Choudhury and Clisby 2018). In the last few decades since this initial expansion of female labour in the formal economy, Bangladesh has witnessed a steady increase in women entering formerly ‘male’ employment arenas. One such arena is within the construction sector, which over the past few decades has seen increasing numbers of particularly situated women entering these masculinized spaces as day labourers. However, this type of labour continues to be perceived as relatively taboo for women—working in dirty environments alongside men in a visible public space doing what is still seen as ‘men’s’ work—and as such the kinds of women who seek work as day labourers on building sites tend to be those for whom other forms of work may not be so accessible (Choudhury and Clisby 2020b). These female labourers thus tend to live in resource-poor households, are often rural migrants, and women whose access to formal education as girls was extremely limited. What is particularly significant from a gendered perspective in wider contexts of global labour patterns is that female construction workers continue to pose some significant challenges to normative gender codes. These are women whose bodies, labour and visibility on building sites draw together interesting dynamics of intersectional gender in/equalities. As we have argued elsewhere (Choudhury and Clisby

2020b), these women's bodies are themselves situated at the margins, at the borders, of socio-cultural and gendered norms, an argument which we summarise here:

"In the frame of normative gender roles in Bangladesh, these women are indeed 'border bodies out of place'. They work outside in highly visible public spaces, doing what is perceived as 'men's work' in a highly masculinised arena—lifting very heavy loads, breaking rocks, carrying sand, stone, cement, and water in baskets and containers balanced on their heads, and, although less commonly, doing the 'skilled' work building walls and roofs and constructing bamboo scaffolding—all the tasks required on a building site. Their labour is no less arduous, and no less skilled (when given the opportunity) than that of their male counterparts. However, their experiences at work are specifically gendered. These female construction workers are perceived as marginal, perceptually located at the edges of this public sphere. They are, inevitably, paid less than male construction workers, labelled as unskilled, of lower status and lesser value, and given the worst jobs on the building sites. They usually work for up to 12 h a day, carrying rocks and cement, breaking up rubble, and receive around 350–400 taka or about £4 per day. As casual day labourers with no formal employment rights in an unregulated, and dangerous, sphere, they experience higher levels of precarity than many workers. Moreover, they are also subject to sexual and physical abuse—because to occupy this public male space it is often assumed that they must already be morally suspect which renders them 'loose women' and hence sexually available" (Choudhury and Clisby 2020b, p. 169).

Through this difficult and at times dangerous work, women can experience health harms, poor mental wellbeing, labour exploitation, gender-based discrimination and sexual abuse. However, these women and their 'border bodies' also challenge normative gender codes in Bangladesh pertaining to women's appropriate roles, employment and public visibility which can generate valuable public debate, and, as we go on to explain:

"we cannot lose sight of the radical potential of these women and their 'border bodies'. Female construction workers in this study pose important challenges to normative gender roles and expectations and they are actively queering the margins of male space both in the public sphere of the building site and within the private sphere—whether or not there exists a desire to acknowledge this within their own families and communities, or even by themselves. In the private sphere they may not, as yet, control all of their own income, but they are nevertheless destabilising the 'maleness' of the breadwinner role by becoming the main earners. In the public sphere, their bodies and their labour conflict with normative patriarchal codes of women's place in society because they constitute an invasion, a border crossing, of female bodies into male space. They challenge patriarchal ideas about women's bodily strength and skills by performing all the arduous 'macho' labour required on a building site: digging foundations, breaking rocks, carrying heavy loads. They are thus highly visible performers of masculinised labour in the public arena and as such we would argue that their bodies blur the borders of normative constructions of appropriate femininity and masculinity. For these reasons we argue that female construction workers stand at a front line of patriarchy, 'queering the margins' of male space, and the radical potential of these 'border bodies' must be recognized" (Choudhury and Clisby 2020b, p. 182).

Having provided some key contextual background, we now turn to focus in this article on some of the experiences of a group of 35 women construction workers—from within the larger total participant group of 70 women—as they navigated through the first two years of the COVID-19 pandemic from 2020 and throughout 2021. At a time when construction sites closed and work became scarce or non-existent, when people were frightened, confined to their homes, and in real danger of health harms and hunger through loss of livelihoods, one key issue that emerged within all this was the exacerbation of what participants themselves

refer to as domestic violence or domestic abuse, but what is also referred to within wider academic and policy terms as intimate partner violence.

Throughout this article, we will use the terms domestic abuse, domestic violence or intimate partner violence, not in any attempt to confuse, but to reflect both the terminology used by participant women whose voices are represented here and also the terminology that we tend to use within our own work, and that which is used within United Nations and World Health Organization (WHO) frameworks. We also refer to gender-based violence (GBV) or violence against women and girls (VAWG) more broadly, which the UN defines as “any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life” (United Nations 1993, p. 2).

The WHO defines intimate partner violence as ‘behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours’ (World Health Organization 2021, n.p.). Similarly, the UN states that domestic abuse, “also called “domestic violence” or “intimate partner violence”, can be defined as a pattern of behavior in any relationship that is used to gain or maintain power and control over an intimate partner. Abuse is physical, sexual, emotional, economic or psychological actions or threats of actions that influence another person. This includes any behaviors that frighten, intimidate, terrorize, manipulate, hurt, humiliate, blame, injure, or wound someone. Domestic abuse can happen to anyone of any race, age, sexual orientation, religion, or gender. It can occur within a range of relationships including couples who are married, living together or dating. Domestic violence affects people of all socioeconomic backgrounds and education levels” (United Nations 2021, n.p.).

Hence, working within these definitional frameworks, the main focus of this article is to explore and unpack this group of participant women’s experiences of the pandemic during the period from 2020 to 2021. Through an analysis of their narratives as they talk about their experiences of survival and intra-household relations in a time of crisis, we particularly think about their narrative themes of domestic abuse, intimate relations and reproductive decision-making.

4. Gender-Based Violence and the COVID-19 Pandemic

As we are unfortunately all too aware, gender-based violence (GBV), violence against women and girls (VAWG), and intimate partner violence (IPV) or domestic abuse continue to be a major cause of health harms for women and girls, affecting one in three women worldwide (UN Women 2020b). According to UN Women (2020b, p. 1); “The impact of violence ranges from immediate to long-term physical, sexual and mental health consequences for women and girls, including death. It negatively affects women’s general well-being and prevents women from fully participating in society. Violence not only has long-lasting consequences for women but also their families, the community and the country at large. It also has tremendous costs, from greater health care and legal expenses to productivity losses, impacting national budgets and overall development”.

The COVID-19 pandemic has served to increase levels of GBV/VAGW and domestic abuse or intimate partner violence (IPV)³ globally. The UN, for example, and as cited above, have noted reports of increased levels of gender-based violence and heightened demand for emergency support services and shelters in over a dozen countries across the globe. Alarm over the escalating levels of GBV led the UN to name violence against women and girls the ‘shadow pandemic’ when in 2020 they reported that approximately “243 million women and girls aged 15–19 have been subjected to sexual and/or physical violence perpetrated by an intimate partner in the previous 12 months”, a figure that they anticipated to increase in 2021 as “security, health, and money worries heighten tensions and strains are accentuated by cramped and confined living conditions” (UN Women 2020a).

Similarly, focusing on GBV within the European context, [Böök \(2021, n.p.\)](#) conducted a review of increased levels of GBV during the COVID-19 pandemic and reported that; “it emerged that a major consequence of the crisis was “a horrifying global surge in domestic violence”, as António Guterres, Secretary-General of the UN, commented. Europe was no exception. While more data is still needed, reports by the gender experts of the European Equality Law Network as well as those from news outlets and international organisations paint a grim picture: in France, a 32% increase in domestic violence cases was reported in just one week during the national lockdown, and in Lithuania, 20% more cases were reported during three weeks of lockdown when compared to the same period in 2019. In Croatia, rape cases increased by 228% during the first 5 months of 2020 in comparison to 2019, and the percentage of attempted rapes rose by 175%”.

Indeed, there have been numerous reports worldwide concerning rising levels of GBV and domestic abuse during the 2020–2021 pandemic (see, for example, [Dlamini 2021](#); [Peterman et al. 2020](#); [Roesch et al. 2020](#); [Sharma and Borah 2020](#)), and, as we discuss further below, the situation in Bangladesh is no exception.

In order to contextualise the prevalence of intimate partner violence in Bangladesh, we should consider the situation prior to the pandemic and acknowledge that according to extant governmental data, NGO reports and academic research, levels of domestic abuse have been persistently high for as long as data has been gathered. A governmental survey from 2011 reported that as many as 87% of Bangladeshi married women stated that they had been abused by their husband ([Bangladesh Bureau of Statistics \(BBS\) 2013](#)) and from 2015 data, the BBS and UN Population Fund (UNFPA) found that over 70% of ever-married women and girls had experienced intimate partner violence in their lifetime, and 54.7% had experienced violence during the previous 12 months ([Bangladesh Bureau of Statistics \(BBS\) 2016](#)). In fact, at a reported 43%, South Asia has the highest regional prevalence of intimate partner violence, and among South Asian countries, Bangladesh has the highest prevalence of intimate partner, sexual and physical violence ([Solotaroff and Pande 2014](#)). Joint research conducted by ActionAid Bangladesh and the Jatiyo Nari Nirjaton Protirodh Forum in 2018 ([Ibrahim 2018](#)) similarly reported that two-thirds of women in Bangladesh have been victims of domestic violence, of whom 72.7% had never disclosed their experience to others.

Research that has focused in more depth on VAWG and IPV in the Bangladeshi context has highlighted some relationships between socio-economic context and the kinds of domestic abuse experienced by women. [Sambisa et al. \(2011\)](#), for example, found that resource-poor women living in urban slums face more violence in comparison to more economically secure women within more middle- and upper-class households. [Choudhury \(2014\)](#) found that women in her research who were living within resource-poorer households in Sylhet regularly faced domestic abuse perpetrated almost exclusively by their husbands or male partners, but she also found that women themselves identified poverty as the main cause of the intimate partner violence they were subjected to rather than blaming the perpetrators. Links between relative poverty and higher levels of intra-household domestic abuse in Bangladesh have been made in a range of studies (see, for example, [Hadi 2005](#); [Sambisa et al. 2011](#); [Islam et al. 2014](#); [Akyüz et al. 2014](#); [Vanderende et al. 2015](#)). Similarly, links have been made between lower levels of educational access and attainment and higher incidences of intimate partner violence. [Hadi \(2005\)](#) and [Murshid et al. \(2015\)](#) found a correlation between limited educational attainment and higher levels of domestic abuse perpetrated by husbands or male partners, and [Schuler and Islam \(2008\)](#); [Akyüz et al. \(2008\)](#); and [Sanawar et al. \(2018\)](#) demonstrated that the risk of domestic violence is higher among women with little or no formal education. The households with whom we have been working in this research in Sylhet are also socio-economically disadvantaged and have had very limited access to formal education. This is not to suggest, however, that VAWG and intimate partner violence is the preserve of the working classes and poorer communities. As we are very well aware, GBV and domestic abuse cuts across socio-cultural and economic boundaries—although it can be the case that levels of abuse may be more

opaque and rendered less visible among higher class and wealthier communities (Kumar and Casey 2017; Ptacek 2021).

Hence, in summary, what the data indicate is that VAWG and IPV have constituted a persistent and pernicious national crisis for a long time prior to the COVID-19 pandemic. Nevertheless, and in line with international reports as discussed above, the outbreak of COVID-19 has exacerbated key underlying flash points of domestic abuse including increased economic deprivation and household precarity in global contexts. As construction workers relying on day labour, which for most of them disappeared practically overnight at the onset of the pandemic and national lockdowns, the women participants in this study rapidly experienced extreme economic hardship across their households and communities. In this context, it is not difficult to imagine how this crisis situation could exacerbate levels of IPV in Bangladesh, as it has across the world, and indeed, a survey conducted by the [Manusher Jonno Foundation \(MJF\) \(2020\)](#), a local human rights organisation, revealed that the spread of COVID-19 and the following lockdown increased incidences of domestic violence in Bangladesh by over 30% among those households surveyed. Resonant with our own findings, MJF found that those women who reported experiencing domestic violence for the first time in 2020 blamed the socio-economic stresses of the pandemic crisis and lockdown for their situation. They stated that their husbands were becoming increasingly frustrated at home due to a lack of social interaction and angry about losing their jobs due to the COVID-19 lockdown, and some were venting their frustration by resorting to violence against their wives. [UNICEF \(2020, p. 2\)](#) also reported a 'growing wave of violence' during the pandemic that 'further worsened the vulnerabilities of children, urban poor, migrants, displaced people and refugees', and they emphasized the 'need for psychosocial support for children and women amid the social and economic challenges caused by the COVID-19 pandemic' in Bangladesh.

In this study, we continued working with women construction worker participants following the outbreak of the pandemic and, as far as we were able (at which point the mobile phones we had provided participants became an ever more crucial means of contact and support) during the lockdown periods when work, travel and social interaction were restricted in Bangladesh at various junctures throughout 2020–2021. In this article, we focus on shining a spotlight onto the experiences of this group of women during a time of extreme crisis for themselves and their households. Here, we particularly draw out their narratives from their group discussions and through the in-depth interviews as they talk about their experiences of enforced familial proximity, domestic abuse and coercive control, and intimate relations during this period of crisis.

5. Living through the Pandemic, Talking about Their Experiences

As we explained above, the 35 participants whose narratives underpin this research are all female construction day labourers aged between 24 and 51 and have been involved in the Bangladesh element of the GlobalGRACE Project for varying lengths of time: 12 women have been a core part of the material culture, film making and photography project since the inception of the workshops at the beginning of 2018, and the rest joined the group at various points through to March 2020, when they were first affected by the pandemic and related socio-economic restrictions. The women involved in this research are all married to a male partner and have children within their household. The majority of the participants had little or no formal education as girls, at the time of the research they all lived in relatively resource-poor communities in Sylhet, and they are also predominantly the main breadwinners for their family, regardless of who (whether a male or female family member) was considered the head of the household.

As the COVID 19 pandemic spread through the country in early 2020, in line with most governments worldwide, the Bangladeshi government attempted to control the pace of the spread of the virus through a range of urgent measures. As reported by [UNICEF \(2020, p. 1\)](#), this approach "included closing all schools and educational institutions, which resulted in over 42 million children without access to education, including children who

were already out of school”. Although the impact on children is not an issue we have space to elaborate on here, it is nevertheless an important problem raised by UNICEF (2020, p. 1), who stated that the “containment measures also meant that vulnerable children became more vulnerable”. Another key strategy was to try and restrict people’s movements through the closure of businesses and workplaces and restrictions on social gatherings. This inevitably resulted in a significant loss of access to economic activities, incomes and household provisions. The combination of economic crisis and household isolation through loss of social networks led to anecdotal and media reports of increased physical health and mental wellbeing problems for many families, and as Manusher Jonno Foundation (MJF)’s (2020) study indicated, women reported increased levels of domestic abuse which they attributed to the stresses of the pandemic.

The participants in this study similarly reported that they experienced serious economic hardship through loss of day labour, and said that social distancing measures constrained their capacity to socialize with others or find ways to secure any alternative sources of income. They also spoke about the negative impacts of the ‘lockdowns’ on their physical health and mental wellbeing. In response to women’s concerns, the GlobalGRACE Bangladesh team particularly focused on trying to support participants’ wellbeing during the pandemic in a variety of ways. We provided a platform of support through both regular mobile phone communication, and, when possible during the year, and with some safety and distancing measures in place, we continued holding the Friday workshops where participants could come together, spend time together, eat together, and if they so wished, talk about their experiences.

The women participants had developed a strong bond during the GlobalGRACE workshops over the previous year prior to the onset of the pandemic, and so this continued space for social support was clearly important for the group. As outlined above in our brief note on methods, during these days, we also held a series of slightly more formal small group discussions over a period of seven months with 35 women divided into three groups of 11–12 people to ask them about their survival strategies and experiences during the pandemic. Although we explained that we were interested in listening to and audio recording their experiences for the purposes of the research, with their informed consent, these were nevertheless relaxed discussions where women could talk together, support one another and share their experiences, if they wished to do so. We said that we would like to hear about their experiences during the pandemic and about their household and family relationships, but we did not ask formal questions during these discussions, rather we followed the women’s lead and allowed the conversations to meander where they wished. In addition to the discussion groups, we conducted in-depth one-to-one interviews with 18 of these same women, to talk in more depth about their daily lives, experiences and household relations during the pandemic. The participant women were aware of the purposes of the research and gave their informed consent for us to use their pseudonymised interview data in this study. It was during these confidential interviews that women spoke about their experiences of economic crisis, about domestic abuse, coercive control and about their intimate relations. In the next three sections, we focus on the key themes emerging from their narratives.

6. Talking about Economic Crisis, Unequal Burdens and Domestic Abuse

The majority (over 90%) of the 35 women both in the discussion groups and within the in-depth interviews explained that, for them, domestic abuse was not an uncommon occurrence in their household prior to the pandemic. In line with the findings of the survey conducted by the Manusher Jonno Foundation (MJF) (2020), they said that the additional household stresses resulting from the effects of the pandemic had led to an increase in their experiences of IPV. The outbreak of COVID-19 significantly curtailed the opportunity to work and earn a living for many people living in their already relatively socio-economically marginal communities. The participants’ husbands were working as casual day labourers, for example as rikshaw pullers or street vendors, prior to the

pandemic ‘lockdowns’ and so, in similar ways to the women themselves as construction day labourers, their husbands were also seriously affected by loss of access to work and incomes. The women talked about how the precarious economic balance of their households rapidly tilted from ‘just surviving’ to ‘acute poverty’ and ‘going hungry’. A common narrative within the participants’ accounts was that their husbands initially stayed at home to abide by the government’s restrictions on movement, and because there was a sudden loss of available work. However, when the government started relaxing the restrictions, just less than half (14) of the women said that their husbands had become somewhat habituated to spending time at home and that some of their husbands seemed ‘no longer interested’ in finding work to support the household. One effect of their lack of earning was that, according to the women’s narratives, the increased precarity and poverty made their husbands more violent towards their wives and children. Here, Shafiah and Meena⁴ talk about some of their recent experiences of familial conflict:

Before the outbreak of virus my husband used to pull rickshaw, not so regularly though. However, after the spread of the virus and following lockdown he had the excuse to stay at home. Before he used to go out to spend time with his friends, had tobacco, tea and snacks from the nearby tea stalls. Now no one goes out, so he stays at home as well and gets grumpy. My husband is not at all a nice man. He tries to find an opportunity to initiate fights. The other day I came back home from the congregating point [where she was trying to secure day labour] and found that the water bucket was broken. I was so shocked to see this as I [borrowed] this bucket from someone I know. He broke the bucket and the reason he gave for breaking it was—the lid of the bucket was not opening easily! Can you imagine? My husband does not need an issue to pick a fight. His main motive is to force me to earn a living for the whole family alone, he does not want to work—he just wants to live on my money. The women of our slum are not nice—they say malicious things about me to my husband and my husband gets the chance to beat me up! My husband wastes money on gambling. He wants me to give him money so that he can spend it on gambling. If I [refuse], he beats me. I had to borrow money from MFIs [loan agencies] to finance his gambling. I do not know how I will be able to repay the loans. (Shafiah)

My husband wants tk. 100/200 every day to buy his medicine for heart disease and for his tea, tobacco, etc. I do not find work, as such cannot manage money to buy necessary food items for the family, but he wants me to give him money [. . .] He fights with me to get the money for his medicines and other personal expenses. I also fight with him [to ask him to try to find] work and earn some money to spend on himself. I go to the congregating point every morning to find work [as a construction worker] but I do not get work. As soon as I come back home, my husband starts fighting with me. He screams at me saying—other women find work, why don’t you find something? Then the fight begins and keeps continuing. (Meena)

Another participant, Sufia, also explained that her husband had become more abusive since the onset of the pandemic, and financial hardship had exacerbated the levels of domestic violence that she was experiencing. A particular flash point in her household was when the rent was due to be paid. She said that their relationship became more strained, and her husband would start fighting with her, insisting that she should pay the rent. Sufia said that she felt very anxious, as in recent months she had very limited income due to the exceptionally scarce work opportunities. She felt frustrated and angry with what she perceives as her husband’s irresponsibility and selfishness to the extent that she found it “very difficult to keep my head cool” and she would also fight with her husband and “speak back to him”. Ripa recounted similar experiences, stating that she had “never found happiness in her life” as her husband was “not a nice man”. Ripa said that her husband did not seem to want to work to earn a living and when she insisted that he needed to find work, he claimed that before getting married she had promised him that she would feed him, and that he would not have to work. Ripa said that she was completely taken by surprise to hear such a claim and commented “I do not understand why on earth I would make such

promise! He however tells this story to the whole neighbourhood. I feel annoyed when hear him spreading such lies and fight with him." Again, economic pressures and frustration over lack of shared responsibilities, all heightened by the effects of the pandemic, became a flash point for intra-household conflict for Ripa and her husband.

Parbisa's narrative similarly echoed those of other participants. She explained that her husband seemed more reluctant to find work since the lockdowns in 2020 and said that he had become more dependent on her income, and at the same time levels of household violence had increased. She said that her husband *"showed anger all the time"*, especially when she failed to find work, but that he refused to look for work himself and became more violent towards her if she questioned his lack of financial contribution to the household. At the time of the interview, Parbisa was five months pregnant. She explained that it was not easy for a pregnant woman to find work in the construction sector as recruiters always want to select only the apparently fittest workers. Nevertheless, she said that she would go to the congregating point early each morning and try hard to find work, and if she was fortunate to be chosen for a day's labour, she *"did not hesitate to go despite my poor health condition"*.

Arisa's narrative resonates with that of Parbisa, in that she also feels that the main responsibility to support the household financially falls on her, and arguments about money and work burdens lead to intra-household conflict between her and her husband, which she says have been exacerbated during the pandemic. As she explains:

My husband is screaming at me all the time alleging that I had clandestinely sent all his money to my brother [and] that was why there was no money at home. I am categorically denying these accusations as they are completely baseless. Actually, there was no money at home and if there were money, he would have spent it by himself. He just kept saying these things to blame me. You know even before the pandemic my husband's income was limited. Due to health-related issues, he had not been working in full force. Before I had earned the lions' share of our family's income; during the pandemic I was not earning much as there were very few works. My natal family members are fighting their battle against poverty and as such unable to extend much financial help. Despite this, one of my cousin's brothers gave me 2000 taka to pay the house rent. My husband however does not want to appreciate this. [. . .] My husband [says] many things to blame me. It is not that I do not try to earn money, in fact I am trying very hard—this morning also I went to the congregating point as early as 2.30am with the hope to find some work but there was nothing. In addition, I became completely drenched as it was raining heavily. After making all this effort to earn money, I am still not appreciated. This makes me annoyed. [. . .] I do not have work at this moment. No work means no money. (Arisa)

For Nazima, levels of conflict between her and her husband also increased during the pandemic, which she blames partly on what she perceives as an unequal burden of responsibility placed on her to maintain the household. She explained that her husband stayed at home after the onset of the pandemic, and she said that it seemed to her that he was happy to be *"a stay-at-home man"*. His lack of income and apparent lack of desire to earn an income had become a major source of familial conflict between them. Prior to the pandemic, he was a street food seller, but since the outbreak and following periods of lockdown, his business dried up. After the restrictions on movement relaxed, he started selling lemons and cucumbers, but not on a regular basis. Nazima said that she wanted him to go out selling every day, but he did not want to, which led to fights. She explained that their relationship had deteriorated since the start of the pandemic, that her husband regularly *"batters"* her and threatens her with divorce.

Indeed, almost all the participants reported similar experiences of household conflict exacerbated since the pandemic, and that much of this conflict centred around perceived unequal household labour and economic contribution, and that this conflict has led to increased levels of domestic abuse. Monu's husband had lived with his other wife and her family⁵ for quite a while and had only recently moved in with Monu. For her, the source of conflict is underpinned by her unhappiness that when he could earn money, he spent it on his other family, but when ill-health led to him being unable to work, he came to live

with her and expected her to support him. This made her angry and she admitted that she sometimes vented her frustration on her husband, which was reciprocated and led to violence between them because, as she said, she “*could not keep quiet*”. She said that they now seemed to be fighting almost every day as they were “*troubled by hunger*”, uncertainty about the future and their sudden loss of income. By fighting with each other, she felt that they were expressing, but also in some way “*suppressing*” their “*frustration*”.

At 51, Naju is the oldest participant in this study, and said that as she and her husband have grown older, there is now less conflict between them. However, her concern was not for herself but for her daughters-in-law, who she sees experiencing violence at the hands of her sons. As has been reported in cogent research (for example, [Hadi 2005](#); [Murshid et al. 2015](#); [Sanawar et al. 2018](#)), younger women can be more vulnerable to domestic violence, perhaps in part linked to issues of relative power and powerlessness, responsibility for younger children and other household pressures in patriarchal contexts. Naju’s sons are casual labourers and have had little or no income during the pandemic. The acute poverty there are subjected to, she feels, has caused them to become more violent towards their wives and children, as she explained: “*when their wives ask for money to buy household essentials they yell at them. Sometimes they scream at their children for the same reason. The children ask them to buy things which makes them infuriated.*” (Naju).

In summary, the majority of the participants in this study told us that COVID-19 has led to increased levels of domestic abuse and intimate partner violence within their own or, in the case of Naju, within their son’s households. As an effect of the pandemic, all of the participants experienced a significant and catastrophic loss of income, and many women said that increased poverty had compounded the incidences and severity of familial conflict. Participant narratives indicated that domestic abuse and conflict was further exacerbated in households where husbands were reportedly already heavily or absolutely dependent on their wife’s earnings. Most of the women reported that they felt that the pressures their husbands placed on them to be the main breadwinner in a time of economic crisis and limited earning potential had heightened conflict between the couple. They said that this made them feel that they were bearing the brunt of the pandemic and their sudden loss of income and resulting poverty.

7. Talking about Enforced Proximity and Coercive Control

It comes as no surprise that when households—no matter where they may live—are forced into prolonged close proximity, with all the additional stresses of heightened economic and health concerns during the crisis of the global pandemic, the strain on relationships between all family members can have a seriously detrimental impact on people’s wellbeing. The families in this study are no exception, and all the women we interviewed, and those who talked about their experiences and concerns within the group discussions, spoke frequently about the stresses of being ‘locked down’ in close proximity with family members in often very confined spaces within resource-poor households. Although in their narratives, these women participants do not use the terminology of coercive control, we would suggest that this is an appropriate way of framing much of the experiences they talked about with us and with one another. Here, we define coercive control as “an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim” ([Women’s Aid 2021](#), n.p.). Similarly, coercive control is linked with ‘controlling behaviour’, which, based on UK government legal guidance, can be defined as: “a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour” ([Crown Prosecution Service 2021](#), n.p.).

All the women participants, in both the discussion groups and within individual interviews, recounted times when enforced familial proximity, in tandem with heightened health, wellbeing and economic anxieties during the pandemic, led to increased

intra-household conflict and outbursts of anger leading to domestic violence, as Asia articulates here:

My husband, like all other men around us, throws tantrums for no reason. [. . .] There is no work for us, so no money is coming to our hand. Whole days we are sitting at home without anything meaningful to do. In this situation we all lose our temper. My husband shouts at me, shows anger. I also cannot control my anger—I shout, I yell—we both fight, scream; this morning also he slapped me. However, I calm down every time and tell myself it is no use fighting with my husband. Fighting with him is not the solution to our problem. This morning my husband initiated a fight, he shouts at [the] children. Nowadays he frequently gets mad at them and starts beating them. What my husband did the other day—I got a smartphone from the [GlobalGRACE] project, I wanted to watch movies, dramas on my phone. I bought credit with data so that I can use the phone for recreation purpose but when my husband found out that I had credited my phone to use data to watch dramas he went mad. It came to his mind immediately that I am spending all the money on my phone. He tends to believe that in his absence I talk over phone with men. He has a suspicious mind. He snatched my phone and slammed it on the floor very hard. My phone's screen was broken. I am very upset.

In addition to the household conflict exacerbated by a whole range additional stress factors that were heightened through the enforced lockdowns, one of the issues Asia also raises here is that of the unintentional consequences that can arise from participatory research projects such as ours. As part of the GlobalGRACE project, we provided participant women with smart phones and credit, initially to use for their film making and photography projects, but they were also an important means to keep in touch and maintain social networks with one another. This became all the more significant during the pandemic, when face to face social contact became restricted. Using their mobile phones, the group were able to keep in touch with the project team and one another to maintain support networks throughout the crisis periods. Many resource-poor women in Sylhet do not own a smart phone for both socio-patriarchal and economic reasons. Within some Sylheti households, 'new' technologies are still perceived as a male preserve, not something resource-poor women should own, or could own due to the expense. As such, we found that ownership of the smart phones became not only a source of support for their mental wellbeing through maintained networks between women—a means of underpinning the embodied infrastructures they had created prior to the pandemic—but also, in some households at least, a source of intra-familial conflict. Some of the women told us that their husbands were angry that they had been given a smart phone (especially if they themselves did not own one), were angry if they suspected that they were spending scarce resources on buying credit (beyond that which the project paid for), and accused their wives of using the phones to talk to other men. In this context, for some women, the technology became a focus or flash point for domestic violence and coercive control. As such, and while in no way 'excusing' male violence, we were understandably anxious that within some participant households, the phones we had provided had become implicated in male violence and coercive control.

Although not specifically linked or restricted to the period of the pandemic, similarly to Asia, Ojufa also talked about how she perceived that her husband's "suspicious" and the coercive control he subjected her to had been heightened through her ownership of a mobile phone. She said that she knew that her husband covertly checked her phone on a regular basis to see if she was talking to men or doing anything that he did not like; however, as a construction worker, she explained that she has to work alongside men—as it is a male-dominated work space—and she needed to be connected at least with some of her male co-workers, sarders (male supervisors who select day labourers from congregating points in the city), and contractors in order to secure her casual labour. For Ojufa, ownership of the phone helped her secure labour, and so brought direct economic benefits in addition to other social advantages such as enabling her to maintain networks with her friends and family. She continued to explain how, without her permission, her husband kept deleting

phone numbers from her phone so that she could not call these men. He also diverted some of her phone calls to his phone which she was not initially aware of, and he even went to the extent—as she later discovered—that he had inserted a device in her phone to record all her voice calls. When Ojufa eventually found out what her husband had done and confronted him about it, she said that he became extremely violent and shouted abuse at her. She reported that he said:

“you slut, you need these men’s phone numbers so that you can flirt with them! Why do you come home? If you need to remain connected all the time with these men, then why don’t you stay with them? You prostitutes do not remain content with one man, you need many men to fuck you!” (Ojufa reporting what her husband said to her)

Men’s attitudes and feelings about women’s participation within projects was the subject of research conducted by [Karim et al. \(2018\)](#) and has some resonance here. Karim et al. similarly observed that many of the husbands in their study of men’s attitudes towards women’s project participation in rural Bangladesh spoke of their fears of losing their ‘male authority’ as a result of their wife’s involvement in development initiatives. [Karim et al.’s \(2018\)](#) focus was not on intimate partner violence or coercive control, and so we do not know if in their study men attributed their fears of loss of authority to any perpetration of domestic violence, this certainly resonated with many of the women’s narratives in this study.

8. Talking about Sex and Intimacy during the Pandemic

One issue that women wanted to talk about together, which may seem surprising given the personal nature of the topic, was their experiences of and feelings about sex and intimate relations in the context of the greater enforced household proximity during the pandemic. During the group discussions in particular, Asia, Fulmoti, Ojufa and Khairun talked about how the frequency of intimate relations had declined through the pandemic because both they and their husbands felt anxious about their lack of income and ensuing poverty, and constant worries about the present and future. However, conversely, most participants talked about how they felt that their husband’s sexual desire had not been as affected by the stresses of the pandemic as they might have expected. These women talked about how they continue to find it difficult to refuse a husband’s unwanted desire for sexual intimacy, and that this could also become a source of conflict leading to incidences of violence.

As Monu explained, she felt stressed about the enforced proximity and increasingly irritated by the constant presence of her husband in their house. As the sole breadwinner, she was very worried about money and said that she felt anxious all the time thinking about the expenses of the family. She told us that in this context, she was not interested in having intimate relations, but that her husband did want to have sex frequently. This annoyed her but she, however unwillingly, felt that she had to comply with his desires. Both Monu and Shafia agreed that it seemed like *“men always want sex on a regular basis”* and they were all too aware that persistent socio-cultural gender norms continue to dictate that *“good”* and *“obedient wives”* *“should not deny him”*. Meena joined Shafia and Monu’s discussion in agreement, and commented that her husband also always seemed keen to have sex. She explained that it was not the case that she herself never wanted to have sex, but that the whole day she would remain so anxious about the ongoing financial crisis of her family that she would find it hard to concentrate on anything else. Similarly, Sufia, Chayna, Nazima and Parbisa, in another discussion, talked about how their sexual desire and that of their husbands differed during the pandemic, each woman feeling that while their desire was reduced due to the stresses they were experiencing, their husbands did not seem to feel any less keen on regular intimate relations. Sufia said that sometimes she *“even turned down her husband and he had accepted it”*, but that she was afraid if she kept denying him sexual access frequently, he might resort to violence and so to avoid more trouble, she tried to *“abide by his desires”*. Parbisa talked about feeling less sexual desire during her current pregnancy, saying that did not enjoy sex much at the moment, but that her husband

“did not want to understand” and insisted they have sex. She said that she felt she had to be acquiescent to avoid more difficult relations. Sahera, whose husband is younger than her, said that in her case she felt bad as she could not match her husband’s desire, and that this was a source of intimate partner violence within her relationship. Sahera explained:

My husband is still very young and wants to have sex frequently. My body does not respond to his call that often. For me having sex two to three times a month is enough, but this is not the case for my husband. He wants to have sex every day. If I somehow manage to stop him for a day, he will make me promise that the next day we will definitely have sex and I must not make any excuses. My husband is nice and takes care of me but denial to have sex enrages him. He does not fight with me for other issues. However, if I keep saying no for sex for a day or two, he gets mad and slaps me. (Sahera)

Sultana contributed that she and her husband had heard from talk in the community that COVID-19 could be spread by having sex and being close to one another. She said that they were frightened of becoming ill with the virus and had both initially agreed to abstain from having sex for fear of being infected. However, she said that her husband warned her that he could not abstain from intimate relations for long, and after a few days, he wanted to resume regular sexual relations regardless of how she felt. She explained that sometimes, even though she was not prepared or physically did not feel well, she felt that she had to grant her husband sexual access because refusing him would “make him very angry and his anger would only subside after beating me [Sultana] up”.

For Ripa, it was her anxiety about her husband leaving her that she said made her comply with unwanted sex. She said that “in the midst of all this tension and anxiety” she did “not really look forward to sex”. She felt “worried about the situation” but her husband did not seem worried and “was ready all the time and did not ever act as a responsible person”. Ripa nevertheless felt that she could not turn him down as she felt that if she did not grant him sexual access, “he might run after another woman”.

The discussions of sexual intimacy led to some talk about pregnancy and babies, with many of the women expressing great concern about economic hardship during the pandemic and their inability to feed their existing children properly or meet their basic needs. We asked if they were worried about becoming pregnant or having another child at this time, and several participants told us that their husbands wanted to have another baby despite already having a number of children, but that they did not seem overly concerned about—or they thought they had not really considered—the consequences or potential issues of having another child in the current context of the global health crisis.

Rejia, for example, had recently remarried and had four children from a previous relationship. Her present husband wanted another baby, but she said that in their decision making about another child, they had not really talked about this in terms of the pandemic. She explained that rather than because of concerns about pandemic-related stresses, she was not keen to have another baby at this point more because her sisters had advised her to take some time to get to know her new husband better before having a baby. However, she said that her husband became angry when she seemed reluctant to have his baby and threatened her that there would be consequences and that she would be held responsible if their marriage did not work out. Monu felt that her breadwinner role gave her more power over decisions about whether to have another child. She explained that while her husband wanted more children and she did not, he did not that feel he could not argue much as he knew she was the one who was earning for the family. She said that she had decided to use birth control pills because she knows that she does not have enough money to raise more children—regardless of the current economic crisis.

In sum, most of the women who talked about sex and intimacy indicated that they felt that their husbands wanted sex more frequently than they did, despite the enhanced anxieties they faced during the pandemic. However, their intimate relations were still shaped by normative patriarchal gender codes, which led women to acquiesce with demands for sex for fear of violence or abandonment. Ultimately, what these discussions indicate is that issues of power and control over women’s bodies, sexual relations and

reproductive decision making continue to be complex, but also that the pernicious power of patriarchy comes to the fore within these intimate spaces, and can be exacerbated at a time of extreme crisis.

9. Conclusions

Focusing on narratives about interpersonal gender relations and incidences of intimate partner violence, this article has provided detailed insights into the experiences of a group of 35 women construction workers in Sylhet, northern Bangladesh during the first two years of the global COVID-19 pandemic between 2020 and 2021. We consider the experiences of this group of women participants as they employed survival strategies to support their families through a time of extreme economic and social crisis. A key issue they raised was the negative impact that the pandemic has had on their health and wellbeing, particularly exacerbated by an increase in experiences of intimate partner violence. The violence they faced was not necessarily a new experience for many of these women, but it was intensified by pressures brought to bear on interpersonal relations within their household as a result of a lack of access to incomes, rising levels of poverty, and the stresses placed on families trying to survive in a time of extreme socio-economic and health insecurity. These women all live within resource-poor and relatively marginalized communities, already struggling for household survival prior to the pandemic-related economic crisis. It is important to understand that almost all the participants in this study said that they had been subjected to domestic abuse within their households prior to the onset of the pandemic. Nevertheless, the majority of the participants told us that COVID-19 has led to significantly increased levels of domestic abuse and intimate partner violence within their own or within the households of close family members, such as their sons.

It was thus clear from these discussions that almost all of the women participants felt that levels of household conflict and intimate partner violence they experienced had been exacerbated through the pandemic as a result of the additional stress factors they faced. All of the participants experienced a critical and devastating loss of income from the point of the first 'lockdowns' in 2020, and most of the women said that increased poverty had compounded the incidences and severity of household conflict. Participant narratives indicated that domestic abuse and conflict were further exacerbated in households where husbands were reportedly already heavily or absolutely dependent on their wife's earnings. Most of the women reported that they felt that they were bearing the brunt of their sudden loss of household income and increased poverty as a result of the pandemic, and that, moreover, the pressures their husbands placed on them to be the main breadwinner in a time of economic crisis and limited earning potential had heightened conflict between the couple.

When talking about sex and intimacy during the pandemic, most of the women participants indicated that they felt that their husbands wanted sex more frequently than they did, despite the enhanced anxieties they faced during the pandemic. However, their intimate relations continue to be shaped by normative patriarchal gender codes which led to patterns of coercive control within their relationships. In these cases, the women said they had to acquiesce with demands for sex for fear of violence or abandonment. What these discussions indicate is that issues of power and control over women's bodies, sexual relations and reproductive decision making continue to be complex, but also that the pernicious power of patriarchy comes to the fore within these intimate spaces, and can be exacerbated at a time of extreme crisis.

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Notes

- ¹ The Global Gender and Cultures of Equality (GlobalGRACE Project: <http://www.globalgrace.net> accessed on 10 December 2021) was a 51 month GCRF-AHRC-funded research project (2018–2022) directed by Suzanne Clisby (Coventry University) and Mark Johnson (Goldsmiths, University of London) working across six countries. The GlobalGRACE Bangladesh research team was led by Tanzina Choudhury (Shahjalal University of Science and Technology). The GlobalGRACE project has received funding from the United Kingdom Research and Innovation (UKRI) programme Global Challenges Research Fund (GCRF) under grant reference AH/P014232/1.
- ² Of course, as these women are day labourers who are only paid for the days they work on the building sites in Sylhet, we ensured that they did not lose any income through their participation in the research project. Participants were provided with equivalent expenses to cover their day's labour, and travel expenses, food and equipment were covered by the project.
- ³ We will refer to gender-based violence (GBV), violence against women and girls (VAWG), domestic abuse, domestic violence and intimate partner violence (IPV) throughout this article to reflect the different terminologies used both within a range of cogent research, but also to reflect the terminology used by the women who participated in the study. We are well aware of the important, if sometimes subtle, differences in meaning and distinctions between the various terms, as articulated by, for example, Hughes et al. (2016), but an analysis of these distinctions is not the primary focus of this article.
- ⁴ All the names of participants used here are pseudonyms.
- ⁵ Polygamy continues to be legal and is still practiced by some men in Bangladesh (for more information, see, for example, Ahmed (2021)).

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