Gender-based Violence & Health

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Gender-based violence is violence that targets an individual or groups of individuals on the basis of their gender or sex.

Gender-based violence can be physical, sexual, psychological, economic or socio-cultural in nature, and includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of freedom.

Around the world, a majority of victims/survivors of gender-based violence are women and girls, due to their subordinate social status compared to men.

However, men, boys and trans persons can also be victims of gender-based violence.
The term ‘violence against women’ means any act of gender-based violence that results in or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.

‘Gender based violence’ refers to violence directed towards a woman because she is a woman or affects a woman disproportionately.

The terms “violence against women” and “gender-based violence” are interchangeably used to refer to the range of abuses committed against women that stem from gender inequality and women’s subordinate status in society relative to men.
Gender based Violence

- GBV is a human rights violation, a public health crisis, and an obstacle to equality, development, security, and peace.

- GBV is pervasive and a global problem
  - 1 in every 3 (35%) women worldwide have experienced either physical and/or sexual intimate partner violence or non partner violence in their lifetime
  - 30% women have faced physical/sexual violence by their intimate partners in their lifetime
  - 38% of murders of women are committed by intimate male partner
VIOLENCE AGAINST WOMEN - INDIA (2016)

- 8,982 women were killed due to dowry related violence
- 4,485 women were abetted to commit suicide
- 1,10,378 women were tortured by their husband and his relatives
- 38,947 women were raped
- 40,387 women were sexually harassed (Insult to the modesty of women-Sec. 509 IPC)
- 82,800 women were molested (Assault on women with intent to outrage her modesty-Sec 354 IPC)
- 26,683 women were kidnapped/abducted

Source: NCRB 2016
252 women were subjected to Dowry related violence

783 women and children were raped. Out of this, 203 were gang raped (93 women, 108 children and 2 unknown)

266 women were victims of sexual harassment

33 women became victims of acid violence

Source: ODHIKAR, 2018
Root Causes of GBV

- Gender inequality and unequal power relationships between men and women
- Patriarchal system where women are considered subordinate and inferior to men resulting in discrimination and inequality
- Men use violence to maintain their power over women.
- GBV has deep cultural and historical roots
- It is accepted, condoned and justified by culture, religion and society.

Problem of silence around violence
FORMS OF GENDER BASED VIOLENCE

- Physical Abuse
- Mental/Psychological Abuse
- Sexual Abuse
- Economic Abuse
FORMS OF GENDER BASED VIOLENCE

**Emotional abuse** -
- Discrimination in nutrition, education, health
- not giving food to eat
- name calling,
- making a woman believe she is worthless/ so called ‘crazy’ / responsible for the violence
- using children to make her feel guilty and / or threatening to take them away
- making her feel like a servant
- Harmful Traditional Practices
- Character Assassination
- Threats

**Sexual abuse** -
- Sexual Assault/ rape
- Sexual harassment
- Sexual abuse
- Child sexual abuse
- Incest
- Making one do sexual acts against her will
- Treating her as a sex object,
- Sexual harassment at work, in educational institutions and public places
FORMS OF GENDER BASED VIOLENCE

Economic abuse -
- Not giving her money
- Keeping her financially dependent
- Not allowing her to work
- Not allowing her to spend her money
- Taking away her earnings

Laws / Policies -
Numerous laws, practices and governmental policies discriminate against women on the basis of sex and reinforce inequalities leading to violence.
SPECIFIC IDENTITIES INCREASING VULNERABILITY TO GBV

- Rape of women during armed conflict
- Violence against women due to communal, class or caste conflict
- Violence against women due to HIV/AIDS
- Violence against women due to disability
- Violence against women due to sexual orientation
- Single/widowed/unmarried women subjected to physical, sexual and psychological violence by members of their natal/matrimonial families
- Older women are often subjected to violence by their children (age)
- Sexual assault on women prisoners/detainees/ inmates in prisons/jail custody/shelter homes
Impact of GBV

- Has **negative social and health** consequences for individual **women and children** affecting their
  - **physical mental/psychological, sexual and reproductive health**, well being and behaviour.
- It also **negatively impacts families, societies and state institutions** at a larger level.
Impact of GBV –
Individual consequences

**SOCIAL CONSEQUENCES**
- Victim blaming
- Social Stigma
- Economic hardship
- Lack shelter
- Withdrawal from community life
- Difficulty in taking care of children
- Rejection by marital and natal families
- Social rejection/isolation
- Lack of social support

**HEALTH CONSEQUENCES**

**Fatal health consequences**
- AIDS-related mortality
- Maternal mortality
- Homicide
- Suicide
Impact of GBV –
Individual consequences - non-fatal

**Impact on Mental Health/ Psychological / Emotional consequences**

- Depression
- Suicidal thoughts, behaviour, attempts
- Tendencies to inflict self-injuries/harm.
- Sleep disorders
- Post-traumatic stress disorder
- Mental illness

- Psychosomatic disorders like headaches, stomach aches, nausea, heart disease, hypertension, other stress-related diseases
- Phobias and panic disorder
- Emotional problems related to rage and fear
- Anxiety and suspiciousness
- Forgetfulness, concentration problems
Impact on Mental Health/ Psychological /Emotional consequences

- Feelings of shame, guilt, insecurity, self-hate, self-blame, self-doubt
- Feeling of helplessness, anger, humiliation, fear, isolation
- Poor self-esteem & lack of self-confidence.
- Lack of trust & interest
- Loss of dignity & identity.

Depending on the intensity of the impact, some of these women survivors are partially and some are gravely dysfunctional. There is a high prevalence of psychiatric illness amongst women facing domestic violence.
Impact of GBV - Individual consequences

**Negative Health Behaviours**
- Smoking
- Alcohol and drug/substance abuse
- Unsafe sexual behaviour, Sexual risk-taking
- Physical inactivity, Reduced physical functioning
- Eating disorders

**Impact on physical health**

**Injuries**
- Cuts, Bruises and welts, scars from burns, swelling, blood clotting,
- Fractures, broken bones, loss of vision/hearing
- Lacerations and abrasions
- Abdominal/thoracic injuries
- Permanent disability
- Ocular damage
## Impact of GBV - Individual consequences

### Chronic Conditions
- Chronic infections
- Chronic pain syndromes
- Irritable bowel syndrome
- Gastrointestinal disorders
- Somatic complaints
- Fibromyalgia
- Headaches.
- Poor subjective health
- Severe obesity

### Impact on Sexual/Reproductive health
- Gynaecological disorders
- Pregnancy complications/Infertility
- Menstrual disorders
- Unsafe abortion/Forced abortions/abortions due to violence
- Unwanted pregnancy
- Pelvic inflammatory disease
- Sexual dysfunction/disorder
Impact of GBV – Individual consequences

Impact on Sexual/Reproductive health

- Sexually transmitted diseases, including HIV/AIDS
- Miscarriage/low birth weight
- Negative foetal health
- Poor Maternal physical or mental health.
- Studies show that more than 50% of pregnant women have experienced severe violent physical injuries
- Risks for perinatal and neonatal mortality about two and a half times higher among mothers who had experienced domestic violence than those who did not (A study conducted in North India)
Impact of GBV – Individual consequences

**Impact on Children**
- Anxiety about being hurt or killed
- Fighting with others.
- Temper tantrums.
- Suicide attempts.
- Substance abuse.
- Eating disorders.
- Bed-wetting or regression to earlier developmental stages.
- Medical problems like asthma, arthritis, ulcers etc.
- Headaches or stomachaches
- Sleeplessness.
- Stealing or other juvenile crimes.
- Identification with the aggressor.
- Behave like aggressor
- Withdrawal from other people and activities.
- Overachieving.
- Feeling they must protect their mother or younger children.
- Denial of any problem/s or dissociation
Impact of GBV – Societal consequences

Societal Consequences

► Strain on medical system
► High economic expenses for medical care for Victims of GBV
► Affects availability of human resources as Victims cannot participate in the development and economic growth of the country.
► ‘Estimates made by the World Bank indicate that gender victimization is responsible for one of every five days of healthy life lost by women in their reproductive years.
► Expensive, drain on community resources; family, neighbours, friends, schools, community leaders, social service agencies, police, etc.
► If perpetrators are not apprehended or arrested, this sends a strong message that the behaviour is somehow acceptable, leading to further incidents
Impact of GBV – Societal consequences

Legal/Justice System
- Strain on police/court resources already challenged and overburdened
- Lack of sensitivity to the issues on the part of some judges and legal officers
- Costs incurred by the victim
- Lack of access to legal system due to lack of knowledge of existing laws or victim reluctant to report due to heavy stigma attached to sexual abuse

Security, Physical Environment of the Community
- Victim feels insecure, threatened, afraid, climate of fear and insecurity impacting women’s freedom and perception of personal safety
- Lack of female participation in the community life,
- Fear of traveling to school or work, the market, etc.
GBV violates human rights

- The right to life, liberty and security of person
- The right to the highest attainable standard of physical and mental health
- The right to freedom from torture or cruel, inhuman or degrading treatment or punishment
- The right to freedom of opinion and expression, to education, to social security and to personal development.
- The right to freedom of movement
- The right to enter into marriage with free and full consent and the entitlement to equal rights to marriage, during marriage and at its dissolution
- The right to cultural, political and public participation, equal access to public services, work and equal pay for equal work.
Violence against women must be recognised as a public health issue and access to comprehensive health care (physical as well as psychosocial) must be ensured along with other requisite services for survivors.

The response of health practitioners and the health system to VAW is crucial.

Medical treatment and medical evidence both play a vital role in improving
- a woman’s physical and emotional health & well-being
- strengthening her case, her fight for justice.
Role of health services – our experience

- Health services - often the first port of call but Weakest link in the chain of services to women.
- Barely any referrals, lack of understanding of role
- Do not enquire about how woman sustains injuries or mental health problems
- Role largely restricted to the provision of medico-legal services in cases of non partner sexual violence.
- Domestic violence rarely identified as one of the major causes of several physical and mental problems
- Often the details of the injury like area and age of wound, description, nature and cause of the injury are not recorded.
- Not written in her prescription hence does not serve as evidence
- Illegible writing & signatures leading to inability to understand what is written and to summon doctors
- Result - negative implications on a woman’s case-
Issues to keep in mind

- Women do not report that their injuries or health problems are due to violence.
- Abusers accompany them to prevent them from speaking up.
- The problem is treated, the violence remains hidden, unidentified and therefore unaddressed.
Required health care response: Taking care of survivors needs

Caring for survivors -

- **Providing** emergency contraception, treating STI’s in case of sexual abuse
- **Treating injuries** and relevant medical care
- **Taking a pro-active role** -
  - Keeping in mind that women coming to you may present certain injuries or symptoms and look beyond the obvious causes of complaints.
  - Screening women patients for incidence of violence
- **Being sensitive to women’s needs, assure confidentiality, create a safe space** for them to speak (see who is with them in terms family – whether she is at risk).
Required health care response: Taking care of survivors needs

- **Empathising and validating women’s experiences** - Support women who are abused, not blame them.

- Facilitating **coordination between the different departments**, to develop an extensive network with the casualty/emergency/psychiatric departments of the hospital for crisis management.

- **Preventing recurrence of violence** through **appropriate referrals** of women survivors of violence to **relevant support services** including psychosocial counselling with therapists/counsellor (rather than psychiatric depts), NGO’s, police and other appropriate legal and social support services.

- **Creating an environment** so that the woman knows she can talk about the issue. For eg - **Putting up Posters** talking about violence in OPD’s, chambers etc.
Collecting Medical evidence and medico-legal documentation

- Ensure that **medical history is documented in a way that will facilitate legal justice**
  - Medico-legal documentation for all suspected cases of violence
  - Dying declarations in cases of burns, suicides, homicides, dowry deaths
  - Forensic and medical evidence in cases of sexual assault
Providing Training/education for all health professionals

- **How to screen** women patients for incidence of violence
- **How to document** the history of domestic violence, molestation, sexual assault, burns
- About the **role of medical facilities and health professionals under the laws in each country**
  - For eg PWDVA, 2005 (India) makes it mandatory to provide medical assistance to a woman facing DV if she (PO or SP) approaches any medical facility, provide a medical examination report free of cost to woman, refer her to the Protection Officer or any other services
- **Educating health professionals** on VAW through medical curriculum as well as continued medical education.
- **Discontinuing** discriminatory, unethical and **violative practices such as the finger test** in the medico-legal process.
Myths

- Women are responsible for the violence they face
- Violence occurs only in poor, uneducated and problem families.
- Home is the safest place for women
- Spousal Violence is a private matter. Nobody has the right to interfere.
- Alcohol and drug abuse are responsible for spousal violence
- Most sexual assaults are involuntary acts committed by strangers