

Prevalence of Gender Based Violence in Selected Wards of Kathmandu, Nepal

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Abstract

Background and Objective: Gender-based violence is a human rights violation, a public health challenge, and a barrier to civic, social, political, and economic participation. The objective of study was to find out existence of gender based violence in selected ward of Kathmandu metropolitan city.

Materials and Methods: Descriptive design was used for the study. Simple random sampling was used to select wards (25% of total wards) and then stratified disproportionate sampling for required sample size estimation and then purposive sampling technique to select sampling population for an interview. Data were collected by face to face interview through semi structured questionnaires.

Results: About three fourth of i.e. 70.5% of respondents had exposed to violence. Among them about one third i.e. 34.3% were exposed to physical violence whereas only 1.9% of respondents were exposed to sexual violence. About two third of respondents i.e. 62.85% were exposed to psychological violence and near to one third were exposed to economic violence. Residence ($p=0.001$) of respondent is significantly associated with exposure of gender based violence. Residence ($p=0.002$), occupation ($p=0.001$) and marital status ($p=0.002$) at CI=95% of respondent are significantly associated with physical violence.

Conclusion: About two third of respondents i.e. 62.85% were exposed to psychological violence and near to one third were exposed to economic violence. Whereas residence ($p=0.001$) of respondent is significantly associated with exposure of gender based violence. Residence ($p=0.002$), occupation ($p=0.001$) and marital status ($p=0.002$) at CI=95% of respondent are significantly associated with physical violence.

Keywords: Gender based violence; prevalence

Introduction

The United Nations defines violence against women 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. 'Gender-based violence' is a term that is often used to state that mostly violence is inflicted by men on women and girls, which signifies the power inequalities and dominating nature of men in patriarchal Nepalese society [1].

Violence

An incident of violence is an act or a series of harmful acts by a perpetrator or a group of perpetrators against a person or a group of individuals. It may involve multiple types of and repeated acts of violence over a period of time, with variable durations. It can take minutes, hours, days, or a lifetime [2].

Types of Sexual and Gender-based Violence

There are 5 types of Sexual and Gender-based violence; Sexual Violence, Physical Violence, Emotional and Psychological Violence, Harmful Traditional Practices and Socio-Economic Violence. [3] Women from lower-caste groups or religious minority groups, widowed, divorced, or separated women, and women living in the hill regions, were significantly more likely to report lifetime experiences of violence. Reports of recent violence were associated with older women (above 35 years), women with lower levels of social networking, and women living in the hill districts [4-5].

Gender-based violence is a human rights violation, a public

health challenge, and a barrier to civic, social, political, and economic participation. It undermines not only the safety, dignity, overall health status, and human rights of the millions of individuals who experience it, but also the public health, economic stability, and security of nations [6-8].

Domestic violence has also emerged as a central concern within the field of women and development because such violence impedes women's economic and social development and capacity for self-determination and the adverse health consequences affecting women and their children.

Violence Act does not recognize domestic violence as a crime against state. Rape cases have to be filed within 35 days; this time period may also need to be revisited considering the reluctance of many women and girls to open up and discuss the issue publicly. Women who seek formal support may suffer negative outcomes including discrimination, stigma and social isolation [5].

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Judges and justices need to be provided with training and orientation to make them more sensitive to the issues related to violence against women. Officials in government agencies need to change their response to cases of violence against women. Additional efforts need to be made to create gender friendly work place for women. Meaningful participation of women in all state structures including in political parties and their access to resources are key to end the cases of gender based violence [9].

Objectives of Study

General Objective

To find out the prevalence of gender based violence against women.

Specific Objectives

- To find out the type of violence among women.
- To assess the situation of Gender based violence in ward no. 16 of Kathmandu.
- To find out association between types of violence and selected socio demographic variables

Research methodology

Research Design

Descriptive Cross-sectional design was used for study.

Study Area

Ward no: 2, 6, 9,11,15,16, 19 and 30 of Kathmandu Metropolitan City

Selection criteria of study population

Inclusion criteria

- Those who have willingness to participate in study.
- Married and unmarried female aged 15-49 years

Exclusion criteria

- Those who do not meet inclusion criteria.
- Not available at the time of data collection.

Sample size: 105

Sampling Method

Multistage sampling technique. Simple random sampling to select wards (25% of total wards) and then stratified disproportionate [10-12] sampling for required sample size and then purposive sampling technique to select sampling population for interview.

Data Collection Technique

Purposive sampling was done to select required number of respondents present in home at the time of data collection in all wards. Formal permission from each respondent was taken for data collection. The data was collected by face to face interview.

Instruments / Questionnaire: semi structured questionnaires were developed which consists of:

Part I: Questionnaires related to socio-demographic status

Part II: Questionnaires related to assessment of gender based violence

Ethical Consideration

The ethical clearance was taken from the Institutional Review Committee of Padma Kannaya campus. Formal permission was taken from ward. Participation was voluntarily taken. Informed (verbal and written) consent was taken from each participant. Confidentiality and anonymity was maintained by writing code number instead of name of participants

Results and discussion

Table 1 depicts socio-demographic information of respondents. About three fourth of respondents i.e. 79% belongs to Hindu religion. Only fifteen percentages of respondents had university level education where as 29.5% of respondents have lower secondary level of education [13]. Near to half percentage of respondents were housewife and only 8.6% were students. Majority of respondent's i.e. 82.9% reside in urban area where as only 17.1% reside in rural area. Nearly three fourth of respondents were married i.e. 70.5% whereas only 29.5% were unmarried. More than half of respondent's i.e. 56.2% belonged to middle class and only 21% of respondents belonged to working class [14].

Table 2 depicts experience of violence of respondents. Only 1.9% of respondents were personally engaged in real fighting whereas 14.3% of respondents had witnessed sexual violence in real life [15-17]. More than three fourth of respondents i.e. 78.1% had seen beating whereas 82.9% of respondents had seen scolding other women in public. Only 14.3% of respondents have witnessed sexual violence in real life. Most

Table 1: Socio-demographic Variable of Respondents.

Variables	Frequency	Percentage
Religion		
Hinduism	79	75.2
Buddhism	26	24.8
Education Level		
Lower Secondary	31	29.5
Secondary	32	30.5
Higher Secondary	26	24.8
University	16	15.2
Occupation		
Technical/Professional	24	22.9
Sales/Service	9	8.6
Labor	12	11.4
housewife	44	41.9
Student	16	15.2
Residence		
Urban	87	82.9
Rural	18	17.1
Marital Status		
Married	74	70.5
Unmarried	31	29.5
Economic Class		
Middle class	59	56.2
Lower middle class	24	22.9
Working class	22	21
Age		
16-20	26	24.8
21-25	31	29.5
26-30	18	17.1
31-35	7	6.7
36-40	8	7.6
Over 41	15	14.3

Table 2: Experience of Violence among respondents.

Variables	Frequency	Percentage
father scold mother	47	44.8
Father beat mother	21	20
Brother scold wife	31	29.5
Brother beat wife	12	11.4
Father beating sibling/ respondents	39	37.1
School teacher beat	28	26.7
Seen scolding other women	87	82.9
Seen beating other women	82	78.1
Watched real fighting	56	53.3
Personally engaged in fighting	2	1.9
Witnessed sexual violence	15	14.3

Table 3: Respondent's exposure to violence.

Variables	Frequency	Percentage
Exposed to violence	74	70.5
Type of violence n=74		
Physical	36	34.3
Sexual	2	1.9
psychological	66	62.85
Economic Violence	32	30.47

Table 4: Respondents awareness on cause of violence.

Variables	Frequency	Percentage
Patricharcial norms	67	63.8
Unemployment	54	51.4
Lack of awareness	77	73.3
Alcohol	76	72.4
Lack of policy	48	45.71

of respondents seen beating and scolding women in public. More than half of respondent's i.e. 53.3% had watched real fighting. Gender based violence is seen and experienced by respondents from father, teacher, brother and other women. This is due to male dominating nature and patriarchal pattern of our Society. Though respondents were residents of urban area i.e. Balaju of Kathmandu gender based violence is still experienced by them.

Table 3 depicts respondents' exposure to violence. About three fourth of i.e. 70.5 % of respondents had exposed to violence. Among them about one third i.e. 34.3% were exposed to physical violence whereas only 1.9% of respondents were exposed to sexual violence. About two third of respondents i.e. 62.85% were exposed to psychological violence and near to one third were exposed to economic violence.

Table 4 depicts respondents' awareness on cause of violence. About one third of respondents' i.e. 63.8 % considered patricharcial norms [18] about one third i.e. 73.3 % and 72.4% considered lack of awareness and alcohol as cause of violence to women respectively.

Table 5 depicts association of violence with selected socio-demographic variables. Religion, occupation, age and marital status are not significantly associated with exposure of gender based violence whereas residence of respondent is significantly associated with exposure of gender based violence [19]. Residence, occupation and marital status of respondent are significantly associated with physical violence. Occupation is not significantly associated with psychological violence [20].

Socio-demographic status of respondents

About three fourth of respondents i.e. 79% were Hindu by religion.

Table 5: Association of exposure of violence and selected socio demographic variables.

Category		Exposed violence		P
		No	Yes	
Religion	Hinduism	26	53	1.76
	Buddhism	5	21	
©Residence	Urban	31	56	0.001
	Rural	0	18	
Marital Status	Married	19	55	0.136
	Unmarried	12	19	
¥Occupation	Housewife	6	38	0.005
	others	25	36	
Age	15-25	21	36	0.057
	26-45	10	38	
Physical Violence				
Residence	Urban	63	24	0.002
	Rural	6	12	
©Marital Status	married	42	32	0.002
	unmarried	27	4	
¥Occupation	Housewife	19	25	0.001
	Others	50	11	
Psychological Violence				
¥Occupation	Housewife	10	34	0.005
	others	30	31	

n=105

©_ Fischer extract test

¥_ Continuity corrected, other chi square test

Only fifteen percentages of respondents had university level education where as 29.5% of respondents have lower secondary level of education [21]. Near to half percentage of respondents were housewife and only 8.6% were students. Majority of respondent's i.e. 82.9% reside in urban area where as only 17.1% reside in rural area. Near to three fourth of respondents were married i.e. 70.5% whereas only 29.5% were unmarried. More than half of respondent's i.e. 56.2% belongs to middle class and only 21% of respondents belong to working class.

Experience of violence

In current study only 1.9% of respondents were personally engaged in real fighting whereas 14.3% of respondents had witnessed sexual violence in real life [22-24]. More than three fourth of respondents i.e. 78.1% had seen beating whereas 82.9% of respondents had seen scolding other women in public. Only 14.3% of respondents have witnessed sexual violence in real life.

Similar finding was found on study "Nepali Masculinities Gender-Based Violence" by UNDP on May 2014. About three fourth i.e. 73% of respondents in the Kathmandu Valley said that they had witnessed bloodshed and fighting in real life [25-29]. In the Kathmandu valley 100% of respondents had witnessed men in their locality beating or scolding women; 83% respondents said that they had seen violence against a woman. Thus 63% of the respondents in the Kathmandu valley said that they and/ or their siblings were either beaten frequently (6%) or sometimes (57%) by their fathers. Similarly, 81% admitted that their schoolteachers used to beat them 86% respondents in the Kathmandu Valley had seen men in their locality beating and/or scolding women either frequently. Only 40% of women respondents' report that they have been victims of sexual violence. In Terai, 57% of women said they had been victims of sexual violence. In A lower proportion (52% in the Kathmandu valley and 57% in the Terai) had witnessed sexual violence [30-34].

Exposure to violence

In this study about three fourth of i.e. 70.5 % of respondents had exposed to violence. Among them about one third i.e. 34.3% were exposed to physical violence whereas only 1.9% of respondents were exposed to sexual violence [35-36]. About two third of respondents i.e. 62.85% were exposed to psychological violence and near to one third were exposed to economic violence.

The finding is consistent with similar study done among 475 women with disability aged 16 years and above in three districts in Nepal i.e. over the lifetime, 57.7% of women reported they had ever experienced violence, including emotional violence (55.2%); physical violence (34%); and sexual violence (21.5%).

The finding of physical violence is consistent with the similar study done in Nepal, i.e. More than half the women (51.9%) reported having experienced some form of violence in their lifetime [37]. One-fourth (25.3%) reported physical violence and nearly half (46.2%) reported sexual Violence.

The finding is consistent with cross-sectional survey of 900 women at the household level, randomly selected across six districts in Nepal, found that close to half of women (48%) reported experiencing violence in their lifetime [2].

Similar finding was obtained on study conducted by Asian foundation Nepal, close to half of women (48%) reported experiencing violence in their lifetime, and over a quarter had experienced violence in the past 12 months. Emotional violence (40.4%) was most commonly reported, followed by physical violence (26.8%), sexual violence (15.3%), and economic abuse/violence (8%). Women who had experienced violence reported that almost three-quarters of the perpetrators were intimate partners (including husbands) [35].

Over half (58%) of respondents had ever experienced violence while 42% had experienced violence in the past year. Of the three forms of violence, emotional violence was most commonly faced by disabled women (55%) compared to physical (34%) and sexual (22%) violence [38]. of the 208 women who had an intimate partner, 51% had faced violence from them during their lifetime while 29% had faced violence in the past one year preceding the survey.

Association of violence with selected socio demographic variables

In current study religion, occupation, age and marital status are not significantly associated with exposure of gender based violence whereas residence ($p=0.001$) of respondent is significantly associated with exposure of gender based violence. Residence ($p=0.002$), occupation ($p=0.001$) and marital status ($p=0.002$) at $CI=95\%$ of respondent are significantly associated with physical violence. Occupation is not significantly associated with psychological violence [39].

The finding is consistent with the similar study done on Nigeria i.e Married female respondents were more likely to experience physical violence than single respondents ($OR= 1.71$, $95\%CI: 1.15-2.53$ $p=0.008$) [26]. The finding is consistent with the similar study done in Nepal i.e. education is not significantly associated with the exposure to violence whereas residence is significantly associated with exposure to violence.

Conclusion

In this study about three fourth of i.e. 70.5 % of respondents had exposed to violence. Among them about one third i.e. 34.3%

were exposed to physical violence whereas only 1.9% of respondents were exposed to sexual violence. About two third of respondents i.e. 62.85% were exposed to psychological violence and near to one third were exposed to economic violence. In current study Religion, occupation, age and marital status are not significantly associated with exposure of gender based violence whereas residence ($p=0.001$) of respondent is significantly associated with exposure of gender based violence. Residence ($p=0.002$), occupation ($p=0.001$) and marital status ($p=0.002$) at $CI=95\%$ of respondent are significantly associated with physical violence. Occupation is not significantly associated with psychological violence. In current study only 1.9% of respondents were personally engaged in real fighting whereas 14.3 % of respondents had witnessed sexual violence in real life. More than three fourth of respondents i.e. 78.1% had seen beating whereas 82.9% of respondents had seen scolding other women in public. Only 14.3% of respondents have witnessed sexual violence in real life.

References

1. Shamble N, Nadler A (2008) A needs-based model of reconciliation: Satisfying the differential emotional needs of victim and perpetrator as a key to promoting reconciliation. *J Pers Soc Psychol* 94: 116-132.
2. Government of Nepal (2012) A Study on Gender-Based Violence in selected rural district of Nepal. Office of the Prime Minister and Council of Ministers: Kathmandu.
3. Decker MR, Latimore AD, Yasutake S, Haviland M, Ahmed S, et al.(2015) Gender-Based Violence against Adolescent and Young Adult Women in Low- and Middle-Income Countries. *J Adolesc Health* 56: 188-196.
4. Handa S, Petermanb A, Huang C, Halpern C, Audrey P, et al. (2015) Impact of the Kenya Cash Transfer for Orphans and Vulnerable Children on early pregnancy and marriage of adolescent girls. *Soc Sci Med* 141: 36-45.
5. Atreya A, Nepal S, Kanchan T (2016) Intentional burns – A form of gender based violence in Nepal. *BURNS* 42: 712.
6. Ali T, Gavino BI (2007) Prevalence of and reasons for domestic violence among women from low socioeconomic communities of Karachi. *EMHJ* 13: 1417-1426.
7. Babcock CJ, Waltz, Jennifer, Jacobson SN (1993) Power and violence: The relation between communication patterns, power discrepancies, and domestic violence. *J Consult Clin Psychol* 61: 40-50.
8. Bailey BA, Daugherty RA (2007) Intimate Partner Violence during Pregnancy: Incidence and Associated Health Behaviors in a Rural Population. *Matern Child Health J* 11: 495-503.
9. Baral DS, Uprety S, Lamichhane B (2016) Gender Based Violence. Health Research and Social Development Forum , Nepal.
10. Bornstein K (1994) Gender Outlaw. New York, US.
11. Breiding MJ, Smith SG, Basile KC, Walters ML, Chen J, et al. (2011) Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization-National Intimate Partner and Sexual Violence Survey, United States. *CDC* 63: 1-18.
12. Chigiji H, Fry D, Mwadiwa TE, Elizalde A (2015) Risk factors and health consequences of physical and emotional violence against children in Zimbabwe: a nationally representative survey. *BMJ* 3: e000533.
13. Colombini M, Susannah H, Hawkins B (2016) Agenda setting and framing of gender-based violence in Nepal: how it became a health issue. *Health Policy and Planning* 31: 493–503.
14. Dunkle KL, Jewkes R, Jewkes KR, Brown H, Yoshihama M, et al. (2004) Prevalence and Patterns of Gender-based Violence and Revictimization among Women Attending Antenatal Clinics in Soweto, South Africa. *American Journal of Epidemiology*, 160: 230–239.
15. Geary CD (1998) Male, female: The evolution of human sex differences. American Psychological Association, USA.
16. Gurung, Acharya J (2016) Gender-based Violence among Pregnant Women of Syangja District, Nepal. *Osong Public Health and Research Perspectives* 7:101-107.

17. Iliyasu ZZ, Abubakar I, Aliyu, M, Galadanci H (2011) Prevalence and correlates of gender-based violence among female university students in Northern Nigeria. *Afr J Reprod Health* 15: 111-119.
18. Kandel P, Kunwar R, Karki S, Kandel D (2017) Child maltreatment in Nepal: prevalence and associated factors. *Science Direct* 151: 106-113.
19. Krause ED, Kaltman S, Goodman L, Dutton MA (2008) Avoidant coping and PTSD symptoms related to domestic violence exposure: A longitudinal study. *J Trauma Stress* 21(1):83-90.
20. Krieger N, Waterman PD, Chen JT (2003) Monitoring Socioeconomic Inequalities in Sexually Transmitted Infections, Tuberculosis, and Violence: Geocoding and Choice of Area-Based Socioeconomic Measures-The Public Health Disparities Geocoding Project (US). *Public Health Rep* 118: 240-260.
21. Krug DE, Mercy J, Dahlberg L, Anthony Z (2002) The world report on violence and health. *Lancet* 360: 1083-1088.
22. Lamichhane P, Puri M, Tamang J, Dulal B (2011) Women's Status and Violence against Young Married Women in Rural Nepal. *BMC Women's Health* 11:19.
23. Lund R, Singh N, Swahnberg K, Infanti J, et al. (2018) Factors shaping political priorities for violence against women-mitigation policies in Sri Lanka *BMC* 25: 35-40.
24. McNulty JK, Wenner CA, Fisher TD (2016) Longitudinal Associations among Relationship Satisfaction, Sexual Satisfaction, and Frequency of Sex in Early Marriage. *Arch Sex Behav* 45:35-38.
25. Morel A, Shakil S, Rodriguez B (2018) Gender-Based Violence in Asia: Prevalence, Protection, and Perspectives from the Field. *Asian Foundation* 23: 15.
26. Oladepo O, Yusuf O, Arulogun O (2011) Factors influencing gender based violence among men and women in selected states in Nigeria. *Afr J Reprod Health* 15: 78-86.
27. Paudel GS (2007) Domestic Violence against Women in Nepal. *Gender Technology and Development* 11: 314.
28. Butterworth P (2004) Lone mothers' experience of physical and sexual violence: association with psychiatric disorders. *BJ Psych* 184: 1-27.
29. Rebecka L, Amin A (2015) Addressing Intimate Partner Violence and Sexual Violence among Adolescents: Emerging Evidence of Effectiveness. *J Adolesc Health* 56: 42-50.
30. Reed Enright GL (2006) The effects of forgiveness therapy on depression, anxiety, and posttraumatic stress for women after spousal emotional abuse. *J Consult Clin Psychol* 74: 920-929.
31. Rushkoff D (1999) *Coercion: Why We Listen to What "They" Say*. Riverhead Books.
32. Singh MM, Garg S, Dash R, Kumar R (2016) Study on awareness regarding gender based violence among group D workers in public hospitals of Delhi, India: a gender perspective. *IJCMPH* 3: 1510-1515.
33. Strebel A, Crawford M, Shefer T, Cloete A, Henda N, et al. (2006) Social constructions of gender roles, gender-based violence and HIV/AIDS in two communities of the Western Cape, South Africa. *SAHARA-J* 3: 516-528.
34. Tjaden P, Thoennes N (2000) Extent, nature, and consequences of intimate partner violence. *Public Health Publication*
35. UNFPA (2017) *Gender-based violence*.
36. West C, Zimmerman D (1987) Doing Gender. *Gender & Society* 1: 125-151.
37. Neggers Y, Goldenberg R, Cliver S, Hauth J (2004) Effects of domestic violence on preterm birth and low birth weight. *Acta Obstet Gynecol Scand* 83(5):455-460.
38. Yahner J, Dank M, Zweig JM, Lachman P, Yahner J (2014) The Co-Occurrence of Physical and Cyber Dating Violence and Bullying Among Teens. *J Interpers Violence* 30: 1079-1089.
39. INSEC (2013) *Violence against women/girls assessing the situation of Nepal in 2013*.