

Prevalence and socio-cultural determinants of domestic violence among married women in Thimphu, Bhutan

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ABSTRACT

Introduction: Domestic violence is a public health problem all over the world, yet its prevalence is under-reported in a pervasive “culture of silence”. Bhutan is not likely to be an exception; however, data on the prevalence, forms and determinants of domestic violence are scant. The purpose of this study is to measure the prevalence and characterize factors associated with domestic violence among women in Thimphu, Bhutan’s capital. **Methods:** A population-based, household cross-sectional survey was conducted in January-May, 2012. A multistage sampling method was used to obtain a representative sample of 300 married women. The chi-square test was used to identify factors associated with increased likelihood of experiencing the four forms of domestic violence. **Results:** The overall prevalence of any domestic violence was 44%. By type of violence, the most common was emotional (36%), followed by control (30%), physical (20%) and sexual (14%). Sexual violence was reported more often by young adolescent women. Women from urban areas reported more emotional violence compared to women from rural areas. Women agreed with many situations in which force might be used by their husbands and with many of the traditional roles of women in society. Nonetheless, many women objected to the use of force in many situations and rejected certain constraining roles of women. **Conclusions:** This study supports the importance of advocacy for education and programs to prevent and mitigate harm from domestic abuse experienced by women in Bhutan.

Keywords: Adolescent women; Advocacy; Bhutan; Domestic violence; Sexual violence.

INTRODUCTION

Domestic violence against women knows no borders and takes many different forms. Experiences of domestic violence vary based on the social, economic, cultural and political context. Nonetheless, violence against women is universal. Domestic violence is very common and occurs at some point in their lives of many women, presenting with different types of health issues. In pregnancy, higher rates of miscarriage, fetal damage and low birth weight are often consequences of domestic violence. Children witnessing domestic violence can develop more psychosocial problems¹. Women constitute more than half of world’s population. They are the largest social group deprived of basic human rights. Women are denied equality, liberty and dignity by society compared to men. Violence against women remains a serious concern all over world despite rights guaranteed in domestic laws and constitutions since the inception of the concept of human rights in the last century. Violence against women undermines development and peace in the society. Thus, it has become a global challenge in solving violence against women for the betterment of more than half of humanity. “Domestic violence and its consequences for the physical and psychological well-being of women and children have been recognized as an important public health problem”⁵. “Violence against women is widely recognized as an important public health problem, owing

to its substantial consequences for women’s physical, mental and reproductive health”⁸. “Domestic violence is both a direct and an indirect risk factor for physical and mental health problems that frequently are encountered in health care settings”⁵.

Though domestic violence by all evidence appears universal, without specific data it is hard to advocate for change in local societies and contexts. To my knowledge, which women and what forms of violence they experienced in Bhutan are unknown. I therefore conducted a household survey of married women in Thimphu, the capital of Bhutan, to gauge the prevalence and forms of domestic violence experienced by women in the country.

METHODS

Study design

The study was a population-based, household, cross-sectional survey that included a self-administered questionnaire on experiences of domestic violence coupled with in-depth face-to-face interviews for clarification and context of responses.

Place and duration of study

Six sub-districts of Thimphu were included: Semtokha, Changbandu, Kawajansa, Langjuphakha/ Jugshina, Taba and Dechencholing from January- May, 2012.

Ethical approval

The research proposal was reviewed and approved by Research Ethics Board for Bhutan of the Ministry of Health. Verbal

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informed consent was obtained from all women. To ensure privacy, the interview was conducted in the household by self-administration with in-depth questions in person administered in a non-judgmental manner. During the survey, a brief introduction about the interviewers was given followed by a comprehensive explanation on the subject matter of the study and request for consent to continue reiterated throughout the interview. Referrals for social services for crisis counseling (such as the specific programs, “RENEW” and “ONE-STOP CRISIS”) were available for women assessed in danger or requesting assistance.

Inclusion and exclusion criteria

All married women irrespective of age were included; unmarried women were not included.

Sampling size and sampling

The sample consist of all married women, including both working women and housewives. A total of 300 eligible women were randomly selected from these groups. The a priori sample size required was estimated by the following formula and assumptions:

$$n \text{ minimum} = \frac{4PQ}{L}$$

where $p=0.50$ (most conservative since the prevalence of the domestic violence has not been previously documented), $Q=0.50$, $L=0.08$ (that is, 6% absolute acceptable level of error from a 16% relative acceptable level of error). This obtains a minimum required sample size of $4 \times 0.5 \times 0.5 / 0.0036 = 278$. Assuming a non-response rate of 5%, the required sample size would require 14 additional recruits (292), or rounding up to 300. Therefore minimum of 300 respondents were required for this study. In the event, only 291 were included for the present analysis, rejecting 9, due to incomplete data(3%).

The sampling method was multi-stage, probability-based. The first stage was a random selection of sub-districts by simple random sampling from all sub-districts. The second stage was done by a selection of enumeration blocks by simple random sampling. The third stage was a systematic random selection of households from a listing of all households within the selected enumeration blocks. The systemic random sampling was done in which the first household was selected randomly and then every second household was interviewed thereafter. All the women approached agreed to the survey; although the 9 mentioned above did not provide complete data.

Statistical analysis

The data were coded and entered into a Microsoft Excel worksheet, then imported and analyzed in SPSS 17. Most analysis is descriptive, focusing on the proportion of women acknowledging different incidents of violence and their agreement or disagreement with the use of force in different scenarios. Differences in proportions were assessed by the chi-square test, with significance set at $p<0.05$.

RESULTS

Demographic characteristics

Women who agreed to participate were from the age 16 to 67 years old; 13% were under 25 (Table 1).

Most (91%) were Buddhist. Approximately one-quarter (26%) were married within the last 5 years and 18% were married under the age of 18 years old. One-third (34%) were uneducated (i.e., who could not read and write), although 13% had some graduate level education. Nearly two-thirds (65%) of women were housewives. Most women (72%) were born outside of Thimphu in rural areas. Most (72%) also had between 1-3 children.

Prevalence and correlates of domestic violence

The overall prevalence of experiencing any incident of domestic violence was 44% among women in Thimphu, Bhutan (Table 2).

By type of violence, the most common was emotional (36%), followed by control (30%), physical (20%) and sexual (14%). Typical types of violence are listed in Table 2. The single most common incident of domestic violence was being shouted or screamed at (25%) and abusive language used by their husband (20%); 18% were repeatedly queried about her actions; 15% experienced being slapped; more than one in ten (11%) were compelled to have sex although not willing. Many women experienced multiple forms of violence; for example, two types of domestic violence were reported by 11%, three types by 11% and all four types of domestic violence by 8%. During the interviews, some women mentioned that the reason for the domestic violence at home was alcohol.

Some demographic differences were noted in the experiences of some types of domestic violence (Table 3).

Sexual violence was more likely to be reported by younger adolescent women, 26% for women under 25 years compared to 11% for women 25 to 35 ($p=0.050$). Higher education was associated with increased likelihood of reporting emotional violence (45% among women with graduate education vs. 26% among women with primary education, $p=0.041$). Working women were also more likely to report emotional violence than housewives (45% vs. 31%, respectively, $p=0.019$) as well as sexual violence (20% vs. 10%, respectively, $p=0.015$). Women from the urban area were more likely to report emotional violence compared to women from rural areas (45% vs. 32%, $p=0.036$).

Attitudes towards use of force and women’s roles in Thimphu

When asked about their perspective of violence towards them, in some circumstances, the majority of women did agree that it is necessary to use force (Table 4).

These circumstances include such things as misuse of family resources (72% agree), not fulfilling responsibilities (67%), interfering with others roles (66%) or spaces (65%) or community institutions (59%), or denying sex (50%).

Table 1. Demographic characteristics of surveyed women, Thimphu, Bhutan, 2012 (n=291 respondents)

Characteristics	n (%)
Age group in years	
<25	38 (13.0)
25-35	153 (52.6)
>35	100 (34.4)
Religion	
Buddhist	264 (90.7)
Non Buddhist (Hindu, Christian)	27 (9.3)
Years of marriage	
<5	76 (26.1)
5-10	87 (29.9)
>10	128 (44.0)
Age at marriage in years	
<18	51 (17.5)
18-22	157 (54.0)
23-27	74 (25.4)
28-32	9 (3.1)
Education Status	
Uneducated	98 (33.7)
Primary school	43 (14.8)
High school	112 (38.5)
Graduate	38 (13.1)
Occupation of respondent	
House wives	188 (64.6)
Working	103 (35.4)
Occupation of the husband	
Employed	244 (83.8)
Unemployed	11 (3.8)
Others	36 (12.4)
Home town	
Urban	82 (28.2)
Rural	209 (71.8)
No of children	
0	28 (9.6)
1-3	208 (71.5)
>3	55 (18.9)

Table 2. Prevalence and types of domestic violence experienced by women, Thimphu Bhutan, 2012 (n=291 respondents)

Forms of Domestic violence (n=291)	n (%)
Emotional (any of the below)	104 (35.7)
Shouted or screamed at her	73 (25.1)
Used abusive language with her	59 (20.3)
Called her stupid, ugly, or useless	53 (18.2)
Ignored her or was indifferent to her	49 (16.8)
Destroyed or smashed things	47 (16.1)
Destroyed her belongings	46 (15.8)
Insulted or humiliated her	45 (15.4)
Partner instilled fear	38 (13.0)
Did or said something else that could hurt her emotionally	37 (12.7)
Threatened to hurt or take away family members	15 (5.2)
Threatened to kill or seriously hurt her	15 (5.2)
Threatened to disclose private information	11 (3.7)
Threatened to kill or seriously hurt someone she cared about	9 (3.1)
Control	87 (29.9)
Repeatedly asked questions about her actions	51 (17.5)
Expressed displeasure at her actions	47 (16.2)
Refused to let her out of the house	45 (15.4)
Closely watched what she did	43 (15.1)
Limited her interactions with others	35 (12.0)
Refused to let her talk with others	28 (9.6)
Took her money or belongings	25 (8.6)
Refused to let her meet relatives	25 (8.6)
Tied her up with something	12 (3.5)
Locked her in a room or in the house	5 (1.7)
Physical	59 (20.3)
Slapped her	44 (15.2)
Pushed or shoved her	39 (13.4)
Hit her	37 (12.7)
Beat her	33 (11.3)
Kicked her	28 (7.8)
Burned her	23 (8.0)
Pulled her hair or dragged her by the hair	22 (7.6)
Slammed her against a table or wall	17 (5.8)
Thrown something at her	11 (3.7)
Used a weapon against her	8 (2.7)
Did something else that could hurt her physically	6 (2.0)
Put a dangerous substance on her (such as acid or kerosene)	2 (0.6)
Sexual	40 (13.7)
Had sex when she is not willing	33 (11.3)
Did not use a condom or birth control method despite her request	24 (8.3)
Had sex when she did not want to, but compelled because she was afraid of what you would do if she refused	20 (6.8)
Physically forced her to do something she might have found degrading or humiliating	9 (3.1)
Used threats to make her have sex	9 (3.1)
Used physical force to have sex	6 (2.0)
Any form of violence	129 (44.3)
Of women experiencing any form of domestic violence (n=129):	
Women experienced only 1 type of domestic violence	43 (14.8)
Women experienced 2 types of domestic violence	33 (11.3)
Women experienced 3 types of domestic violence	31 (10.7)
Women experienced 4 types of domestic violence	22 (7.6)

Table 3. Prevalence of types of domestic violence experienced among women by socio-economic characteristics, Thimphu, Bhutan, 2012 (total n=291)

Characteristics	Total n	Emotional n (%)	Control n (%)	Physical n (%)	Sexual n (%)
Age in years					
<25	38	17 (44.7)	8 (21.1)	8 (21.1)	10 (26.3)
25-35	153	56 (36.6)	42 (27.5)	27 (17.6)	17 (11.1)
>35	100	31 (31.0)	30 (30.0)	24 (24.0)	13 (13.0)
p-value (chi-square test)		0.306	0.350	0.466	*0.050
Religion					
Buddhist	264	97 (36.7)	81 (30.7)	53 (20.1)	40 (15.2)
Non Buddhist	27	7 (25.9)	6 (22.2)	6 (22.2)	0 (0)
p-value		0.515	0.596	0.849	0.093
Years of marriage					
<5	76	29 (38.2)	28 (36.8)	12 (15.8)	11 (14.5)
5-10	87	38 (43.7)	26 (29.9)	18 (20.7)	13 (14.9)
>10	128	37 (28.9)	33 (25.8)	29 (22.7)	16 (12.5)
p-value		0.075	0.249	0.496	0.858
Age at marriage					
<18	51	18 (35.3)	15 (29.4)	18 (35.3)	7 (13.7)
18-22	157	52 (33.1)	42 (26.8)	52 (33.1)	19 (12.1)
23-27	74	31 (41.9)	27 (36.5)	31 (41.9)	12 (16.2)
28-32	9	3 (33.3)	3 (33.3)	3 (33.3)	2 (22.2)
p-value		0.634	0.507	0.839	0.733
Education					
Uneducated	98	28 (28.6)	24 (24.5)	23 (23.5)	10 (10.2)
Primary school	43	11 (25.6)	9 (20.9)	8 (18.6)	2 (4.7)
High school	112	47 (42.0)	41 (36.6)	21 (18.8)	20 (17.9)
Graduate	38	18 (47.4)	13 (34.2)	7 (18.4)	8 (21.1)
p-value		*0.041	0.124	0.817	0.062
Occupation of respondent					
House wives	188	58 (30.9)	51 (27.1)	34 (18.1)	19 (10.1)
Working	103	46 (44.7)	36 (35.0)	25 (24.3)	21 (20.4)
p-value		*0.019	0.163	0.209	*0.015
Occupation of husband					
Employed	244	84 (34.4)	72 (29.5)	49 (20.1)	32 (13.1)
Unemployed	11	3 (27.3)	3 (27.3)	2 (18.2)	2 (18.1)
Others	36	17 (27.2)	12 (33.3)	8 (22.2)	6 (16.7)
p-value		0.273	0.880	0.942	0.770
Home town					
Urban	82	37 (45.1)	25 (30.5)	15 (18.3)	1 (1.2)
Rural	209	67 (32.1)	62 (29.7)	44 (21.1)	26 (12.4)
p-value		*0.036	0.890	0.598	0.302
Children					
0	28	9 (32.1)	11 (39.3)	6 (21.4)	5 (17.9)
1-3	208	82 (39.4)	61 (29.3)	38 (18.3)	32 (15.4)
>3	55	13 (23.6)	15 (27.3)	15 (27.3)	3 (5.5)
p-value		0.087	0.499	0.332	0.131

Table 4. Women's attitudes/perspectives towards violence towards women, Thimphu, Bhutan, 2012 (n=291)

Do you personally agree or disagree with these as reasons for the use of force?	Agree	Disagree
	n (%)	n (%)
Resources (money, food, property) being misused	210 (72.2)	81 (27.8)
Does not fulfill his or her responsibilities	195 (67.0)	96 (33.0)
Interference by someone in roles	193 (66.3)	98 (33.7)
Interference by someone in spaces	190 (65.3)	101 (34.7)
Interference of the community or an institution in your life	172 (50.1)	119 (40.9)
Does not fulfill his or her sexual responsibilities (e.g., denies sex)	146 (50.2)	145 (49.8)
Maintaining discipline	102 (35.1)	189 (64.9)
Protecting yourself and what you consider yours	92 (31.6)	199 (68.4)
Says that you do not fulfill your responsibilities	90 (30.9)	201 (69.1)
Getting your share of resources	73 (25.1)	218 (74.9)
He is sexually unfaithful	72 (24.7)	219 (75.3)
Preventing someone from dominating you	64 (22.0)	227 (78.0)
He does not fulfill his responsibilities	57 (19.6)	234 (80.4)
He is disrespectful to you	51 (17.5)	240 (82.5)
He is disrespectful to elders in your family	51 (17.5)	240 (82.5)
He tries to control you	48 (16.5)	243 (83.5)
Controlling someone	45 (15.5)	246 (84.5)
He does not follow your instructions	45 (15.5)	246 (84.5)
Competing for a women's love	33 (11.3)	258 (88.7)
He does not provide sexual satisfaction	32 (11.0)	259 (89.0)
Adding to your resources	27 (9.3)	264 (90.7)
Making the person fearful of you	22 (7.6)	269 (92.4)
Dominating over someone	18 (6.2)	273 (93.8)
Achieving dominance in a group or society	20 (6.9)	271 (93.1)
Do you personally agree with the statement as the role of women	Agree	Disagree
	n (%)	n (%)
Should consult at least on important issues like birth control, safe sex practices	260 (89.3)	31 (10.7)
Can participate in community activities	259 (89.0)	32 (11.0)
Can talk to men outside the family	238 (81.8)	53 (18.2)
Can participate in politics	231 (79.4)	60 (20.6)
Should be free as me	220 (75.6)	71 (24.4)
Taking care of the children	195 (67.0)	96 (33.0)
Taking care of all your needs	188 (64.6)	103 (35.4)
Household chores (cooking, cleaning, etc.)	183 (62.9)	108 (37.1)
Controlling household expenses	181 (62.2)	110 (37.8)
Taking care of the elderly	175 (60.1)	116 (39.9)
Must get permission before doing anything	174 (59.8)	117 (40.2)
Can go out only to work	90 (30.9)	201 (69.1)
Providing for all your sexual needs	88 (30.2)	203 (69.8)
Must not go outside the home	53 (18.2)	238 (81.8)
Must be watched over if I go out	32 (11.0)	259 (89.0)

Strongest disagreement from women on circumstances that justified force from men were items that dealt with male dominance towards others, such as achieving dominance in a group or society (93% disagree) or over an individual (94%), or making someone fear you (92%). Disagreement on the use of force also were found when the woman was speaking of herself, such as when she does not follow his instructions (85%), when he is controlling her (84%), or disrespectful to her (83%).

With respect to the accepted roles of women, most agreed that it is their role to consult with men on important issues like birth control and safe sex practices (89%), to get permission to participate in community activities (89%) or politics (79%) and talk to men outside the family (82%). About two-thirds of women agreed that their roles include taking care of children (67%) or elderly (60%), household chores (63%) and controlling household expenses (62%). Fewer women felt it was their role to go out only to work (31%) or not to go outside the home (18%) or out unwatched (11%) or provide for sexual needs(30%).

DISCUSSION

This study documents that women across all ages and demographics experience a high level of domestic violence in Thimphu, Bhutan. The data corroborate an unfortunate worldwide pattern of abuse of women, particularly from their husbands⁸. The study also documents that Bhutanese women experience multiple forms of domestic violence. In other studies where women experience these levels of violence, they are also found more likely to suffer from poor physical and mental health, higher risk of negative mental and physical health outcomes⁶. In the setting of Bhutan, there are patterns in that younger women report more sexual violence, particularly in the adolescent age group, while educated, working, and urban women tend to report more emotional abuse. Our observations may stem from differences in educational status between women and their husbands that occur when urbanization is rapid or when income inequalities magnify gender inequalities². During the interviews, a common was the mention of their husbands' alcohol use as the main cause of violence. With alcohol use, women indicated, there is high possibility of extra-marital affairs, increased drug use, and high risk of sexually transmitted diseases². This finding echoes a US study confirming increasing violence at home associated with frequent alcohol use by the male partner⁷.

The pervasiveness and acceptance of women's less dominant role in the household and society is also a possible contributing factor. In the survey, women had supportive attitudes towards justified use of force in many circumstances of stepping outside their prescribed duties. They felt the need to confer with their husband before making independent decision or they considered that they might justifiably experience types of violence if they did not³.

Women who experience domestic violence may have high risk of long-term psychological effects such as depression, general anxiety, drug and alcohol dependency and increases

suicidal cases as well as suffering physical and reproductive health problems⁵. They can suffer from physical pain, sleeping difficulty from other forms of violence⁴.

The most challenging part of the study was ensuring that participants were forthcoming in their responses. Since domestic violence is considered a family matter in Bhutan, we suspect under-reporting in the context of an interview with a stranger. The response rate was initially low, requiring multiple visits to find persons at home. As mentioned above, 9 respondents did not provide complete enough data for analysis and were excluded.

CONCLUSIONS

The occurrence domestic violence among women in Thimphu, Bhutan is high given that many women had experienced at least one or multiple types of control, physical, emotional or sexual violence. The young adolescent women in our study were more at risk of sexual abuse, increasing the risk of sexual transmitted diseases, including HIV. More research is needed to assess the causes of abuse and ways to effectively intervene. Meanwhile, the data advocate strongly for programs to raise awareness, counseling and safe spaces for women.

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AUTHORS CONTRIBUTION

Following authors have made substantial contributions to the manuscript as under:

KW: Concept, design, literature search, data collection and analysis, manuscript writing and review.

Author agree to be accountable for all respects of the work in ensuring that questions related to the accuracy and integrity of any part of the work are appropriately investigated and resolved.

CONFLICT OF INTEREST

None

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