

Consider this:

- In 2003, 2,308 cases of rape were reported to the authorities
- In Kenya, 25% of 12–24 year olds lost their virginity by force
- Four out of ten girls who have been raped suspect that they may have

HIV/AIDS

Over 60% did not report to anyone....

Project Name:

Breaking the cycle of Gender Violence

Advocates for Teen Mothers

Violence against Women

A growing number of studies indicate that violence based on gender is increasingly becoming a major health concern for governments worldwide. In most countries there is a high prevalence of non consensual sex among young women. Research

shows that 10 and 69% of women report being abused by a male partner at least once in their lives.

Health consequences

Violence against women and girls increases their risk of poor health. A rising number of studies exploring violence and health always report negative effects. The actual scenario is not in the public domain because of under-reportage of gender based violence.

Physical consequences

Homicide

Several studies report that most women who die of homicide are killed by their partner or ex-partner. In cultures where the giving of a dowry is practised, the custom can be fatal for the woman whose parents are unable to meet demands for gifts or money. Violence that begins with threats may end in forced “suicide”, death from injuries, or homicide¹.

Serious injuries

The injuries sustained by women because of physical and sexual abuse may be extremely serious. Many assault incidents result in injuries, ranging from bruises and fractures to chronic disabilities². A high percentage of these require medical treatment. For example, in Papua New Guinea, 18% of all urban married women had to seek hospital treatment following domestic violence.²Injuries during pregnancy³. Recent research has identified violence during pregnancy as a risk to the health of both mothers and their unborn fetus. Research in this area has shown increased levels of variety of conditions.

Injuries to children

¹ Violence and Abuse of Women and Girls in Kenya

² Intimate Partner Violence and HIV/AIDS Gender Series: Violence and Abuse of Women and Girls in Kenya

³ *Integrated Approaches to Eliminating Gender-based Violence*. United Kingdom: Commonwealth Secretariat, 2003

Children in violent families may also be victims of abuse. Frequently, children are injured while trying to defend their mothers.

Unwanted and early pregnancy

Violence against women may result in unwanted pregnancy, either through rape or by affecting a woman's ability to negotiate contraceptive use. For example, some women may be afraid to raise the issue of contraceptive use with their sexual partners for fear of being beaten or abandoned.⁴ Adolescents who are abused, or who have been abused as children, are much less likely to develop a sense of self-esteem and belonging than those who have not experienced abuse. They are more likely to neglect themselves and engage in risky behaviours such as early or unprotected sexual intercourse. A growing number of studies suggest that girls who are sexually abused during childhood are at much greater risk of unwanted pregnancy during adolescence.⁵

As with unwanted pregnancy, women are vulnerable to contracting sexually transmitted diseases (STDs) because they are unable to negotiate protection. Women with STDs have a higher risk of complications during pregnancy, including sepsis, spontaneous abortion and premature birth.⁶ Some STDs increase a woman's vulnerability to the HIV virus, as well. Violent sexual assault may also increase their risks because resulting tears to delicate vaginal tissue allow the virus easier entry into the bloodstream. With HIV/AIDS, the consequences are usually fatal for the woman, and possibly for her children as well.

Susceptibility to disease

Compared with non-abused women, women who have suffered any kind of violence are more likely to experience a number of serious health problems. It has been

⁴ An integrated approach to combating violence against women

⁵ Intimate Partner Violence and HIV/AIDS Gender Series: Violence and Abuse of Women and Girls in Kenya

⁶ The Role of men in the fight against HIV and AIDS

suggested that abused women's increased vulnerability to illness may be due partly to lowered immunity because of stress resulting from the abuse. In addition, self neglect and increased risk taking have also been implicated. It has been found, for instance, that abused women are more likely to smoke than women without history of violence.⁷

Psychological consequences

Suicide

For women who are beaten or sexually assaulted, the emotional and physical strain can lead to suicide. These deaths are dramatic testimony to the paucity of options for women to escape from violent relationships.⁸

Mental health problems

Research suggests that abused women endure enormous psychological suffering because of violence. Many are severely depressed or anxious, while others display symptoms of post-traumatic stress disorder. They may be chronically fatigued, but unable to sleep; they may have nightmares or eating disorders; turn to alcohol and drugs to numb their pain; or become isolated and withdrawn.⁹

Rape and childhood sexual abuse can cause similar psychological damage. One occurrence of sexual aggression may be sufficient to create long-lasting negative effects, especially if the child-victim does not subsequently receive appropriate support. Like violence against women in the family, child abuse often continues for many years and its disabling effects can carryover into adult life. For example, the reduced self-esteem of women who have been abused in childhood may result in their making little effort to avoid situations where their health or safety is in jeopardy.

Effects of witnessing violence on children

⁷ Kenya: Rape: The Invisible Crime, Amnesty International

⁸ National Guidelines Medical Management of Rape and Sexual Violence 2004

⁹ State Violence in Kenya

Research has shown that children who witness domestic violence often suffer many of the same symptoms as children who have been physically or sexually abused themselves. Girls who witness their father's or step-father violent treatment of their mother are also more likely to accept violence as a normal part of marriage than girls from non-violent homes. Boys who have witnessed the same violence, on the other hand, are more likely to be violent to their partners as adults.¹⁰

Impact on society

Added health care costs the costs to society of violence against women are tremendous, in terms of healthcare alone. A proportion of these costs are for treating serious physical injury. A substantial amount is also spent on psychological problems including managing anxieties and symptoms which happier, more confident, women may be able to tolerate, ignore or shrug off¹¹. Direct costs include those incurred by the police, courts and legal services to prosecute perpetrators of abuse; the costs of treatment programmes for men who batter, and other offenders; the medical care costs of treating the direct medical consequences of sexual and physical abuse; and social service costs, including child protection services.

Effects on productivity and employment

Women experiencing violence may have a reduced contribution to society as well as to their own potential self-realization. Women may be equally intimidated by their husband's violence, which prevents them from advancing at work.¹²

The economic impact of abuse may extend to losses in women's earning potential. This maybe partly because girls who are victims of violence are likely to be anxious or depressed, and unable to perform to the best of their ability at school. Because of their experience of having no control over their own bodies, the world may become a threatening place where they avoid challenges of any kind. In areas where sexual

¹⁰ FIDA Kenya, Annual Report, 1996

¹¹ Intimate Partner Violence and HIV/AIDS Gender Series: Violence and Abuse of Women and Girls in Kenya

¹² Experience of Sexual Coercion among Young People in Kenya

abuse of female students by male teachers is prevalent, girls may stay away from school to escape unwanted attention.

Elsewhere, parents, who fear that their daughters will be sexually assaulted, may keep them at home until they are “safely married”. In many countries, a girl who becomes pregnant is expelled from school, regardless of whether or not the pregnancy was the result of a rape. The consequence, in every case, is a curtailed education, a decreased chance of securing gainful employment, and a reduced contribution to the quality of life for her community.¹³

Although rape and sexual assault may be perpetrated by strangers, evidence from many sources indicates that a high percentage of rapists are acquaintances, “friends”, relatives, and those in positions of trust or power. Another consistent finding is the high percentage of young, and often very young, rape victim. Many sexual assaults are perpetrated by more than one attacker. “Gang rape”, where two or more men subdue and penetrate their victims, is not uncommon.

Women are also subject to what has been termed “non-contact” sexual abuse in which, for example, men expose their penises or make obscene telephone calls. Where noncontact abuse has been studied, it has been discovered that a high percentage of women have experienced this type of abuse; in some cases up to 50% of all women questioned.¹⁴

Many women keep the violence a secret

Women who are the victims of sexual violence are often reluctant to report the crime to police, family or others. In countries where a woman’s virginity is associated with family honour, unmarried women who report rape may be forced to marry their attacker. Some may be murdered by their shamed fathers or brothers, as a way of

¹³ The Sexual Abuse of Kenyan Women and Girls, (2002)

¹⁴ Intimate Partner Violence and HIV/AIDS Gender Series: Violence and Abuse of Women and Girls in Kenya

restoring family honour. In some countries, a woman who has been raped may be prosecuted and imprisoned for committing the “crime” of sex outside of marriage; if she cannot prove that the incident was in fact rape.¹⁵

Women who do disclose abuses are often advised to restrict their movements or adapt their clothing so as to avoid “tempting” men to attack them. This approach is inadequate because it wrongly assumes that men are unable to control their sexual impulses. It also ignores the fact that many rapes are committed in women’s own homes, frequently by men whom they know.

The nature of violence against women in families has prompted comparisons to torture. The assaults are intended to injure women’s psychological health as well as their bodies, and often involve humiliation as well as physical violence. Also like torture, the assaults are unpredictable and bear little relation to women’s own behaviour. Finally, the assaults may continue week after week, for many years.

Failures of detection

There has been a failure in most countries to identify and provide support to women suffering from domestic violence. This is due, in part, to the fact that if women do seek help it is from neighbours or family members, not the police or health services. A number of studies have shown that shame or fear of reprisal often prevents women from reporting an attack to authorities, or even speaking to friends about it.¹⁶ Some fear that if their injuries are reported, their children will be taken away by child protection services.

Those services which could provide support, such as the police or health care, often do not identify women suffering from violence, or they are unable to respond adequately. They may not be trained to deal with the problem or know where to refer women seeking help. They maybe afraid of confronting the problem, or be ill-

¹⁵ Violence Against Women in the Era of HIV and AIDS, UNAIDS

¹⁶ Kenya Police Crime Reports 1997-2003, 2004

equipped deal with the complex situation surrounding the woman who has suffered violence.

Physical abuse

In every country where reliable, large-scale studies have been conducted, results indicate that between 16% and 52% of women have been assaulted by an intimate partner.¹⁷ Although national data are scarce, there are a growing number of community based and small-scale studies which indicate widespread violence against women is an important cause of morbidity and mortality. It is likely that these studies, from both industrialized and developing countries, underestimate the problem for many reasons.

Some women may believe that they deserve the beatings because of some wrong action on their part. Other women refrain from speaking about the abuse because they fear that their partner will further harm them in reprisal for revealing “family secrets”, or they may be ashamed of their situation. Furthermore, in many countries there are no legal or social sanctions against violence by an intimate partner. Considering these factors, estimates of the prevalence of physical abuse by a partner are probably conservative.¹⁸ A study in Kenya shows that over 68% of women said it was alright for men to beat their partners.

Rape in intimate relationships

Physical attacks by a partner may include rape and sexual violence. Women in many societies, however, do not define forced sex as rape if they are married to, or living with, the attacker.¹⁹ Although some countries have now recognized marital rape as a criminal offence, others still argue that husbands have a legal right to unlimited

¹⁷ ICRW, “Men, Masculinity and Domestic Violence in India: Summary Report of Four Studies,” June 2002

¹⁸ WHO, “Gender Dimensions of HIV Status Disclosure to Sexual Partners: Rates, Barriers, Outcomes,” Geneva, 2003

¹⁹ Violence and Abuse of Women and Girls in Kenya

sexual access to their wives. Surveys in a number of countries show that from 10% to 15% of women report being forced to have sex by their intimate partner. Among women who are physically assaulted in their relationship, the figures are higher.

Psychological or mental violence

Psychological violence includes repeated verbal abuse, harassment, confinement, and deprivation of physical, financial and personal resources. For some women, the incessant insults and tyrannies which constitute emotional abuse may be more painful than the physical attacks because they effectively undermine women's security and self-confidence. Single occurrence of physical violence may greatly intensify the meaning and impact of emotional abuse. Women have been reported as saying that the worst aspect of battery was not the violence itself but the "mental torture" and "living in fear and terror".

Gender Violence in Kenya

The Shocking figures:

- 49% of Kenyan women reported experiencing violence in their lifetime; one in four had experienced violence in the previous 12 months.
- 83% of women and girls reported one or more episodes of physical abuse in childhood; 46% reported one or more episodes of sexual abuse in childhood.
- Over 60% of these women and children did not report the event to anyone. Only 12% who had been physically or sexually abused reported to someone in authority such as a village elder or the police.
- In Kenya, 25% of 12-24 year olds lost their virginity by force.
- Nairobi Women's Hospital receives an average of 18 cases of rape and incest each day.
- A majority of the victims of violence are girls; 60% of women who have experienced violence reported age at first abuse between 6-12 years: 24 percent between 13-19 years.
- National studies confirm that between 40 and 50% of Kenyan women and girls experience different forms of violence (physical, sexual, verbal, or emotional) from childhood to adulthood.²⁰

²⁰ Demographic and Health Surveys, "Profile: Gender in the Kenya 2003

Traditional, deep-rooted gender inequalities in many Kenyan cultures are often expressed by violence, coercion or physical or emotional intimidation, especially when the people of these cultures are under economic strain.

Women may also give in to male demands for unprotected sex, despite the danger, as they often have nowhere to go, limited financial options (a Kenyan woman's average earnings is less than half of that of man), limited land rights, and fear of losing their children. Customary laws and procedures, and issues such as succession, child custody, marriage and matrimonial property, are outdated in today's Kenya.

Women must often survive under medieval legal conditions, leaving them without alternatives but to stay in an abusive relationship or suffer worse consequences. Kenya's failure to eliminate discriminatory property inheritance practices, for example, exacerbates the already unimaginable havoc caused by HIV and AIDS. In one report, women living with AIDS, virtually all of whom were infected by husbands or regular male partners, were essentially condemned to an early death when a majority of their homes, land, and other property was taken when they became widows.²¹

Violence: the Pervasive yet Hidden Culprit

In Kenya, violence against women and girls—whether expressed by rape, coercion or physical or emotional intimidation—is the culprit, making all women and girls vulnerable to HIV infection. In Kenya's traditionally patriarchal society, violence against women is ignored, tolerated, and even condoned. This traditional acceptance of violence has devastating implications today: women and girls' AIDS rates are two to six times higher than those of men and boys. Beyond the already unacceptable neglect of women's basic human rights, violence against women in today's world of HIV and AIDS has fatal implications.

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²¹ "WHO Multi-Country Study on Women's Health and Domestic Violence Against Women. Summary report of the initial findings on prevalence, health outcomes and women's responses," World Health Organization, Geneva, 2005

the previous 12 months. A woman who is raped cannot negotiate safe sex. A young woman or a girl who is married or involved with an older man rarely has the sophistication and maturity to negotiate safer sex and, no matter how faithful, is exposed to her partner's previous sexual history. A woman who lives in fear of abuse is less likely to insist on condom use by her partner.

Rape

Though rape is an acknowledged widespread problem in Kenya, statistics are hard to come by. The culture of silence surrounding rape makes collection of data on this sensitive topic particularly challenging. The reporting of rape is difficult and intimidating and many women do not have the economic or educational capacity to negotiate the legal system. Despite the challenges of reporting rape, however, cases are increasingly being reported. The connection between rape and HIV is more complex than the risk of transmission during non-violent sex. Violent or forced sex is more likely to result in HIV transmission than non-violent sex. Forced vaginal penetration creates abrasions and cuts facilitating the entry of the virus—when it is present—through the vaginal mucosa.

Domestic Violence

Rape is often assumed to be a violent attack by strangers. In Kenya, two-thirds of women who are physically or sexually abused report their abusers to be husbands or other relatives. Among married, divorced or separated women, 26% had experienced emotional violence by their current or most recent husband; 40% experienced physical violence; and 16% experienced sexual violence. Yet there is only one shelter for women running away from domestic violence in Kenya.²²

In many Kenyan cultures, husbands are deemed justified in beating their wives and marriage is considered blanket consent to intercourse. These cultural conditions are so ingrained that two out of three women agree that a husband is justified in beating his wife. Tragically, no law exists on preventing domestic violence in Kenya and abused wives have no viable means of recourse. Wives also have no guarantee of protection from rape by their husbands, as there is no law prohibiting spousal rape.

²² Violence Against in the Era of HIV and AIDS, A Situational Analysis in Kenya, June 2006

What constitutes intimate partner violence?

- **Physical violence:** slaps, punches, kicks, assaults with a weapon, homicide.
- **Sexual violence:** rape, coercion and abuse, including use of physical force, verbal threats, and harassment to have sex, unwanted touching or physical advances, forced participation in pornography or other degrading acts that often persist over time and are accompanied by threats on part of the perpetrator.
- **Psychological violence:** belittling the woman, preventing her from seeing family and friends, intimidation, withholding resources, preventing her from working or confiscating her earnings.

In a nationwide study of women aged 12 to 24 years, 25% said they lost their virginity because of force. This was confirmed by a recent study, which found that among sexually experienced respondents, 21% of females had experienced sex under coercive conditions. As noted earlier, the risk of HIV transmission during sexual coercion or violence toward girls or young women is higher because girls' vaginal tracts are immature and tear easily during sexual intercourse.²³

Members of their immediate and extended families, 66% of whom are uncles, brothers and male cousins most often perpetrate sexual abuse against girls in Kenya. Abusers beyond the family tend to be peers, priests and other religious leaders and teachers, who comprise over half of all abusers.²⁴

Keeping girls in school and well educated is a top priority in the fight against AIDS and against gender violence. Schools, however, are not necessarily a safe environment for girls to thrive, as older boys and teachers (public as well as religious) make up the majority of those who violate a girl's rights.

Young women often marry men significantly older than themselves, and these men are more likely to have had previous sex partners and thus are more likely to have been

²³ Violence and Abuse of Women and Girls in Kenya

²⁴ Mainstreaming Gender in the Kenya National HIV/AIDS Strategic Plan

exposed to HIV. Relationships with older men are also more likely to be premised on unequal power relations, leaving girls vulnerable to abuse. And even when a young woman is faithful to her husband, she remains at risk of infection. Among sexually active girls aged 15-19 years in Kisumu, a multi-centre study reported that HIV-infection levels were 10% higher for married girls than for sexually active unmarried girls.

A total of 3,097 cases of child defilement had been reported nationwide between 2003 - 2004.²⁵

In Kenya, the 2003 Demographic and Health Survey (DHS) showed 68% of women agreed that a husband would be justified in beating his wife, including if she refused to have sex with him.²⁶

Numerous studies from around the globe show the growing links between violence against women and HIV. These studies demonstrate that HIV infected women are more likely to have experienced violence, and that women who have experienced violence are at higher risk for HIV.

What ATM is doing to address the situation

Educate and Involve Men

In many Kenyan cultures, men are encouraged to take risks and express their manhood, often in ways that can lead to violence and spread of AIDS, including having sex with multiple partners, use of alcohol and drugs, and display of dominant sometimes violent behaviour to women. But social change can allow men—and especially young men—to let go of these pressures.

²⁵ Kenya Police Crime Reports 1997-2003

²⁶ Kenya Demographic and Health Survey (2003)

Programmes that involve men without blaming them are crucial if violence against women is to end. And it's not just adolescents or husbands that can contribute: fathers can be encouraged to raise their sons and daughters with the self-respect to prevent violence in the next generation. To engage men more effectively, our project:

- Initiates and supports men-run initiatives that raise awareness, lobby and advocate;
- Implement such initiatives in areas where men frequent e.g. bars, churches, and the workplace;
- Empower young boys on responsible leadership while still at schools, during sporting practices and events, and through the media.

Community empowerment through training

The project seeks to provide skills, information and other resources to rural communities through various empowerment strategies, including:

- Supporting community-based training and information campaigns to change harmful norms and behaviours that perpetuate violence against women and reinforce its social acceptability. This includes working with men and communities to address violence, as well as engaging women's, faith-based, and other groups in preventing and coping with violence and its links to HIV.
- Promoting economic opportunities for women through microfinance and skills training to give women the tools and economic independence they need to avoid or escape violence, and reduce their risk for HIV.
- Ensure that HIV programs begin to address the realities of violence against women as a barrier to HIV services by providing training for HIV service providers to recognize the signs of violence, to offer basic counselling and social support, and appropriate referrals for additional assistance, including legal services, where available.
- Providing training to law enforcement officials and others who may encounter victims of violence about the risk of HIV and proper referrals to prevention information, medical treatment, and post-exposure prophylaxis (PEP), where appropriate, to reduce the immediate risk of HIV infection.
- Offer training for volunteers as paralegals to enable them assist abused victims who need to seek justice through the court system

Provide temporary shelter

The project also provides temporary shelter for abused women running away from their abusive partners. The safe-house enables them to access medical care, legal advice, counselling and psychosocial support from community-based support groups.

Non-violent conflict resolution training

Reaching to young boys and young, unmarried adults is a key pillar in changing entrenched social norms. A school-based curriculum that seeks to engage them in non-violent conflict resolution programs will help in shaping their attitudes towards girls, and in future, their wives.

Legal literacy program

Most peasant women in the community lack the basic knowledge about the human right angle to violence. We seek to empower young, educated girls just out of school with knowledge and skills to enable them understand the legal position of violence and in turn facilitate mass community training, providing free legal advice and linking with advocates willing to offer pro-bono services.

Training for health workers

Sensitivity training for health professionals and the police, and the implementation of new protocols for dealing with the victims of domestic violence has been instrumental in bridging the gap between policy-makers in addressing the issue.

We have trained our health workers to:

- ✓ Provide appropriate medical care and document in the client's medical records instances of abuse, including details of the perpetrator.
- ✓ Where feasible, routinely ask all clients about their experiences of abuse as part of normal history taking.
- ✓ Be attentive to possible symptoms and signs of mistreatment and follow up on them.
- ✓ Refer patients to available community resources

- ✓ Be understanding: Insensitive or victim-blaming attitudes can buttress seclusion and self-blame, undermine women's poise, and make it less likely that women will reach out for help.
- ✓ Maintain the privacy and confidentiality of client information and records.

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