Health Outcomes of Intimate Partner and Non-Partner Violence against Women in the Democratic Republic of the Congo: Prioritizing Resources in the Wake of Conflict

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Center for Disease Control and Prevention (CDC)
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Sexual Violence Research Initiative Forum
October 10-13, 2011 ∙ Cape Town, South Africa

This research was supported under a cooperative agreement from the CDC through ASPH. The contents of this article are solely the responsibility of the author and do not necessarily represent the official views of CDC or ASPH.
KEY MESSAGE

For GBV resources to have the greatest impact on development and stability in DRC, they must be allocated to include intimate partner violence on a national level.
Women’s health is positively correlated to development.

Impacts achievement on all MDGs:
- Individual health
- Children’s health
- Community health
- Economic prosperity and stability
Sexual & physical violence is inversely correlated to women’s health.

Violence → Adverse Women’s Health Outcomes

- Physical injury
- Mental health
- STIs and HIV
- Birth outcomes
- Access to health care
- Death
therefore...

↓ VIOLENCE =

↑ WOMEN’S HEALTH =

↑ DEVELOPMENT

“Investing in women’s health has a direct impact on decreasing poverty and achieving wider social and economic goals”

-Elizabeth Lule, World Bank Population & Reproductive Heath Advisor
There are many types of VIOLENCE that can affect women’s health.

Sexual & Physical

Intimate Partner & Non-partner

Conflict-related & “Everyday”
In the DRC, previous research has focused mainly on conflict-related sexual violence and is often limited to the eastern provinces.
Intimate partner violence in DRC is among the highest in the world, yet there is little research or programmatic attention on it.
Research Question

How do **health effects** of intimate partner violence compare to health effects of non-partner violence for women in the DRC?
Population & Data

Nationally representative 2007 DHS

2,859 Women

Ever married or lived with a man as if married
Emotional: 43%
Moderate Physical: 55%
Severe Physical: 20%
Any Physical: 57%
Sexual IPV: 35%
Physical and/or sexual: 64%
Any IPV (Emotional, Physical,...): 71%

Intimate partner violence is widespread and affects an alarmingly high number of women.
During the last 12 months,

• have you had a disease which you got through sexual contact?
• have you had a bad smelling abnormal genital discharge?
• have you had a genital sore or ulcer?
Women who experienced violence of any kind had **higher** rates of STIs.
Variables:

- Intimate Partner Sexual Violence
- Ever Sexual Violence

% women reporting STI in past 12 months, by type of sexual violence:

<table>
<thead>
<tr>
<th></th>
<th>No Reported Violence</th>
<th>Reported Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual IPV</td>
<td>5.1%</td>
<td>13.0%</td>
</tr>
<tr>
<td>Intimate Partner Violence</td>
<td>6.9%</td>
<td>13.9%</td>
</tr>
<tr>
<td>Sexual, Ever Other Violence</td>
<td>13.9%</td>
<td>13.9%</td>
</tr>
</tbody>
</table>
“Ever sexual violence” ≠ non-partner violence (necessarily)

Has anyone ever forced you to have sexual intercourse against your will? (Who?)
Has your husband/partner ever:

- physically forced you to have sexual intercourse with him even when you did not want to?
- forced you to perform any sexual acts that you did not want to do?

"Sexual IPV" = intimate partner sexual violence

This can clarify partner vs. non-partner violence
Partner vs. non-partner sexual violence

<table>
<thead>
<tr>
<th>Ever experienced sexual intimate partner violence</th>
<th>No</th>
<th>Yes</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>1443</td>
<td>133</td>
<td>1576</td>
</tr>
<tr>
<td>Yes</td>
<td>620</td>
<td>228</td>
<td>848</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2063</td>
<td>361</td>
<td>2424</td>
</tr>
</tbody>
</table>

- **No sexual violence**: n=1,443
- **Partner violence only**: n=620
- **Non-partner violence only**: n=133
- **Partner and non-partner violence (maybe)**: n=228
**Partner VIOLENCE = STIs**  
(Regardless of “ever sexual violence”)

<table>
<thead>
<tr>
<th></th>
<th>Ever experienced sexual intimate partner violence</th>
<th>Anyone ever forced respondent to perform sexual acts</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>5.1% (n=74/1443)</td>
<td>6.8% (n=9/133)</td>
<td>5.3%</td>
</tr>
<tr>
<td>Yes</td>
<td>10.8% (n=67/620)</td>
<td>18.3% (n=42/228)</td>
<td>12.9%</td>
</tr>
<tr>
<td>Total</td>
<td>6.8%</td>
<td>14.1%</td>
<td></td>
</tr>
</tbody>
</table>

*P value calculated with Chi-Squared test*
Non-partner VIOLENCE $\implies$ STIs

(but only for women who also report partner violence)

<table>
<thead>
<tr>
<th>Ever experienced sexual intimate partner violence</th>
<th>Anyone ever forced respondent to perform sexual acts</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>(n=74/1443)</td>
<td>(n=9/133)</td>
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<td>5.1%</td>
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<tr>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>(n=67/620)</td>
<td>(n=42/228)</td>
</tr>
<tr>
<td>10.8%</td>
<td>18.3%*</td>
</tr>
<tr>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>6.8%</td>
<td>14.1%</td>
</tr>
</tbody>
</table>

*P value calculated with Chi-Squared test*
For women who have not experienced sexual partner violence, rate of STI is statistically the SAME whether they report “ever sexual violence” or not.
Is “ever sexual violence” actually measuring partner violence?

→ No. It is still significantly correlated with STIs even when controlling for partner violence with **LOGISTIC REGRESSION**

<table>
<thead>
<tr>
<th></th>
<th>Sexual IPV only model</th>
<th>Ever SV only model</th>
<th>IPV plus Ever SV</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Odds Ratio (95% CI)</td>
<td>p</td>
<td>Odds Ratio (95% CI)</td>
</tr>
<tr>
<td>Intimate partner sexual</td>
<td>3.08 (2.26-4.21)</td>
<td>&lt;0.001*</td>
<td>..</td>
</tr>
<tr>
<td>sexual violence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ever been forced to have</td>
<td>..</td>
<td>..</td>
<td>2.20 (1.52-3.18)</td>
</tr>
<tr>
<td>to have sex</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*statistically significant

All logistic regression models are adjusted for respondent’s age, highest level of education, geographic province, urban/rural, household wealth quintile, total number of children and marital status.
However, when stratifying for partner violence, the correlation between “ever sexual violence” and STIs is only significant for women who also experienced sexual intimate partner violence.

35%

<table>
<thead>
<tr>
<th></th>
<th>No partner violence</th>
<th>Experienced partner violence</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n=1576</td>
<td>n=848</td>
</tr>
<tr>
<td>Ever been forced to have sex</td>
<td>1.16 (0.53-2.50)</td>
<td>2.23 (1.36-3.64)</td>
</tr>
<tr>
<td>p</td>
<td>0.706</td>
<td>0.001*</td>
</tr>
</tbody>
</table>

*statistically significant

All logistic regression models are adjusted for respondent’s age, highest level of education, geographic province, urban/rural, household wealth quintile, total number of children and marital status.
If we had an intervention that could eliminate all non-partner violence in all of DRC...
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If we had an intervention that could eliminate all partner violence in all of DRC...
If we had an intervention that could eliminate all partner violence in all of DRC...
In fact, sexual intimate partner violence explains a lot (but not all) of the STI risk associated with other types of violence.
Intimate Partner Sexual Violence is more strongly correlated with Sexually Transmitted INFECTIONS than any other type of violence, partner or non-partner.
Limitations & Considerations

Data
“Has anyone besides your husband/partner…”

Non-partner Sexual Violence
Limited interpretation: could be anyone

Not conflict vs. non-conflict violence comparison
For GBV resources to have the greatest impact on development and stability in DRC, they must be allocated to include intimate partner violence on a national level.
“Where gender inequality persists, efforts to reduce poverty are undermined…

Promoting equality between women and men helps economies grow faster, accelerates poverty reduction, and enhances the dignity & well-being of men, women, and children.”

-James Wolfensohn, World Bank Group