Violence against Women and Mental Health in Timor-Leste: Findings from the Nabilan Baseline Study

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The Asia Foundation Timor-Leste
Where?

Nationally-representative female survey conducted in 5 randomly-selected municipalities. Male survey representative of Dili and Manufahi.
<table>
<thead>
<tr>
<th>WHO Multi-Country Study on Women’s Health &amp; Domestic Violence against Women</th>
<th>UN Multi-Country Study on Men and Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,426 interviews</td>
<td>433 in Dili</td>
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<tr>
<td>Age 15-49</td>
<td>Age 18-49</td>
</tr>
<tr>
<td>WHO/PATH Ethical and Safety Guidelines on Researching VAW</td>
<td>SVRI guidelines for research on men’s perpetration</td>
</tr>
</tbody>
</table>

Ethics approval from the Ministry of Health
Methodology approved by National Directorate of Statistics
Women’s mental health

• Overall, more than half (53%) of all women had symptoms of depression.

• 10% of all women had ever thought about committing suicide.

• 3% of all women ever attempted suicide.
Multivariate associations with women’s depression

- Partner’s controlling behaviour
- Partner is unfaithful
- Disability
- Last pregnancy unintended
- Childhood physical or sexual abuse
- Poor or very poor health
Women’s experiences of intimate partner violence (IPV)

Overall, three out of five (59%) ever-partnered women have experienced physical and/or sexual intimate partner violence in their life.
Women’s experiences of non-partner rape

14% of all women were ever raped by a man who was not their partner, and 10% in the past year.
Women’s mental health and intimate partner violence

- Symptoms of depression: 62% ( Experienced IPV )
- Suicidal thoughts: 15% ( Experienced IPV ), 3% ( Never experienced IPV )
- Attempted suicide: 5% ( Experienced IPV ), 1% ( Never experienced IPV )
Women’s depression and lifetime experiences of violence

Intimate partner violence

- Physical IPV: 54% (Symptoms of depression), 41% (No depression)
- Sexual IPV: 48% (Symptoms of depression), 30% (No depression)
- Emotional IPV: 64% (Symptoms of depression), 44% (No depression)
- Economic IPV: 49% (Symptoms of depression), 34% (No depression)

Non-partner violence

- Non-partner rape: 18% (Symptoms of depression), 5% (No depression)
- Gang rape: 5% (Symptoms of depression), 2% (No depression)
Men’s mental health

- Overall, around one third (30% in Dili and 34% in Manufahi) of all men had symptoms of depression.

- 5% in Dili and 4% in Manufahi of men had ever thought about committing suicide.

- Around 1% of men in both sites ever attempted suicide.

- 11% of men in both sites had symptoms of Post-Traumatic Stress Disorder (PTSD).
Bivariate associations with men's depression

**Anti-social behaviour:**
- Drugs
- Gang

**Socio-economic factors:**
- Primary or no education
- Food insecurity

**Sexual practices:**
- Sex with a sex worker
- Transactional sex

**Violence:**
- Experienced violence in conflicts
- Experienced violence outside home
- Sexual victimization
- Perpetrated IPV and NP SV against women

**Health:**
- Disability
Men’s mental health and intimate partner violence perpetration

- Symptoms of depression: 39% (perpetrated IPV) vs. 28% (never perpetrated IPV)
- Suicidal thoughts: 7% (perpetrated IPV) vs. 3% (never perpetrated IPV)
- Symptoms of PTSD: 17% (perpetrated IPV) vs. 8% (never perpetrated IPV)
Men’s depression and lifetime violence perpetration

- Symptoms of depression
- No depression

<table>
<thead>
<tr>
<th>Type of Violence</th>
<th>Intimate partner violence</th>
<th>Non-partner violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical IPV</td>
<td>35%</td>
<td>15%</td>
</tr>
<tr>
<td>Emotional IPV</td>
<td>22%</td>
<td>8%</td>
</tr>
<tr>
<td>Economic IPV</td>
<td>37%</td>
<td>26%</td>
</tr>
<tr>
<td>Non-partner rape</td>
<td>22%</td>
<td>12%</td>
</tr>
<tr>
<td>Gang rape</td>
<td>8%</td>
<td></td>
</tr>
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</table>

Symptoms of depression

- Phys &/ sex IPV: 47%
- Physical IPV: 35%
- Emotional IPV: 22%
- Economic IPV: 37%
- Non-partner rape: 22%
- Gang rape: 8%
Men’s PTSD and lifetime violence perpetration

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<th>Type of Violence</th>
<th>Symptoms of PTSD</th>
<th>No PTSD</th>
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</thead>
<tbody>
<tr>
<td>Physical IPV</td>
<td>37%</td>
<td>26%</td>
</tr>
<tr>
<td>Sexual IPV</td>
<td>38%</td>
<td>19%</td>
</tr>
<tr>
<td>Emotional IPV</td>
<td>62%</td>
<td>19%</td>
</tr>
<tr>
<td>Economic IPV</td>
<td>41%</td>
<td>27%</td>
</tr>
<tr>
<td>Non-partner rape</td>
<td>25%</td>
<td>12%</td>
</tr>
<tr>
<td>Gang rape</td>
<td>17%</td>
<td>8%</td>
</tr>
<tr>
<td>Raped a man/boy</td>
<td>19%</td>
<td>5%</td>
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</table>

Intimate partner violence
Non-partner violence
Impact of child abuse

3 out of 4 women and men had experienced child abuse

- Depression symptoms
- Suicidal thoughts
- Intimate partner violence
- Drug-use
- Fights with weapons
- Gangs

- Associated with women and men’s experiences
- Associated with men’s experiences only
Conclusions

- Poor mental health, a significant problem in TL, particularly for women.
- Mental health issues associated with IPV and non-partner sexual violence.
- Experiences of childhood abuse linked to mental health concerns for both women and men.
- Poor mental health associated with disability.
- Men’s experiences of violence during conflict and engagement in violence outside home linked to mental health issues.
Recommendations

✓ Support development of mental health services, with communication campaigns to reduce stigma.

✓ Increase awareness of health workers, service providers, and policymakers, about violence and mental health.

✓ Advocate for psycho-social supports for children who experience or witness violence.

✓ Develop programs and campaigns on non-violent ways of being a man and reduce social acceptance of men’s use of violence.

✓ Government of TL should be funding services and taking more active role in violence prevention.
Nabilan’s work in this area

- Implementing certified social services training program to build service providers’ skills to identify and respond to violence.
- Providing grants and TA to local NGOs, including for psychosocial counselling.
- Training on gender equity and violence prevention.
- Advocating for inclusion of section on violence in national mental health strategy.
- Messaging on respectful relationships and non-violent masculinities.
- Supporting local feminist movements on advocacy.
- Sharing our research findings widely.
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