

National Women's Health Survey

for Suriname

FINAL REPORT

Authors: Joel Joseph, Cécile Pemberton, and Ursan Phillip

Editor: Dana King



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Abstract

This report presents the first nationally representative estimates of the prevalence of intimate partner violence (IPV) and non-partner sexual violence against women in Suriname. The data comes from the 2018 Suriname Women’s Health Survey—a national, quantitative, cross-sectional survey of 1,527 women aged 15–64. The report finds that 32 percent of ever-partnered women reported at least one act of physical and/or sexual violence by an intimate partner in their lifetime and 6 percent reported at least one act in the 12 months prior to data collection. Approximately 17 percent of all respondents reported having been forced into sexual intercourse by a non-partner in their lifetime (2 percent in the past 12 months). Significant risk factors associated with IPV were identified, including cohabitation without marriage, non-consensual marriage, having been pregnant, having experienced or witnessed violence in childhood, substance abuse by the partner, and the partner being unemployed. The report documents the negative consequences of IPV for women and their children, as well as the most common responses and coping mechanisms. Approximately one in three women who experienced IPV never disclosed their experience and most survivors did not seek or receive assistance. Women most often sought help from their mothers rather than police, social services, or other entities adequately resourced to address IPV. Several factors precluded women from accessing help, including fear, shame, and the normalcy associated with violence.

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Keywords: citizen security, gender-based violence, health surveys, intimate partner violence, sexual violence, violence against women, women’s health

List of Abbreviations

ALCOA	Aluminum Company of America
CARICOM	Caribbean Community and Common Market
CARPHA	Caribbean Public Health Agency
CRC	Convention on the Rights of the Child
CSC	Consultative Sub-committee
CSW57	57 th Session of the Commission of the Status of Women
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women
EBS	<i>Energie Bedrijvan Suriname</i> , Suriname's energy company
ED	Enumeration district
EPSEM	Equal probability of selection method
GBS	General Bureau of Statistics of Suriname
GDP	Gross domestic product
GNP	Gross national product
IDB	Inter-American Development Bank
IPV	Intimate partner violence
KPS	Suriname Police Corps
MOH	Ministry of Health
MOHA	Ministry of Home Affairs
NDP	National Development Plan 2017-2021
NGO	Non-governmental organization
NPSV	Non-partner sexual violence
SNDVC	Suriname National Domestic Violence Committee
SURALCO	Surinam Aluminum Company
SSLC	Suriname Survey of Living Conditions

SSU	Secondary sampling unit
SWHS	Suriname Women's Health Study
UN	United Nations
UNICEF	United Nations Children's Fund
VAWG	Violence against women and girls
WHO	World Health Organization

Glossary

Child sexual abuse: The use of a child (defined as any person under the legal age of consent) by an adult for sexual purposes, whether or not consent is alleged to have been given. Includes acts of exposure; sexual touching; oral, anal, or vaginal penetration; and exposing a child to, or involving a child in, pornography or prostitution. Any form of direct or indirect sexual contact between a child and an adult is abusive since it is motivated purely by adult needs and involves a child who, by virtue of their age and position in life, is unable to give consent. Sexual activity between children constitutes sexual abuse when it is clear, by difference in developmental levels, coercion, and/or lack of mutuality, that one child is taking advantage of another.

Current prevalence: The proportion of ever-partnered women reporting at least one act of violence during the 12 months preceding the survey interview.

Domestic violence: Any form of physical, sexual, psychological, or financial violence that is committed by a person against a partner, child, parent, member of the family, or dependent, irrespective of where the violence takes place. It is defined by the relationship that exists between the perpetrator and the victim. In this study, the focus is on violence against women and girl children.

Economic violence or abuse: Behavior designed to take control or limit access to shared or individual assets or limit the current or future earning potential of someone as a strategy of power and control. In this study, it includes being prohibited from employment, having earnings or savings forcibly taken, and being denied money by a partner for household expenses, regardless of the availability of money for other things.

Emotional violence (sometimes referred to as psychological abuse): Any act or omission that damages the self-esteem, identity, or development of the individual. It includes, but is not limited to, humiliation or insults, belittlement, threatening to harm the individual or someone they care about, and inducing fear through intimidation.

Ever-partnered: For this study, this term describes all women between the ages of 15 and 64 years who have ever had a male intimate partner through marriage, cohabitating, or dating.

Forced sexual intercourse: Where one person has used force, coercion, or psychological intimidation to force another to engage in a sex act against their will.

Gender-based violence: For this study, gender-based violence is limited to only those aspects related to violence against women and girls.

Intimate partner: Refers to current and former spouses, cohabitating male partners, and non-cohabitating dating male partners.

Intimate partner violence: Any act or omission by a current or former intimate partner that negatively affects the well-being, physical or psychological integrity, freedom, or right to full development of a woman.

Lifetime prevalence: The proportion of ever-partnered women who reported that they had experienced one or more acts of violence by a current or former partner at least once in their lifetime.¹

Non-consensual marriage: For this study, a non-consensual marriage is one where the respondent did not participate in choosing her spouse.

Non-partner sexual violence: Any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion, by any person (other than a current or former intimate partner of the victim) in any setting. It includes rape, defined as the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object.

Perpetrator: A person who commits an act of physical, sexual, emotional, or economic violence.

Physical violence: The intentional use of physical force with the potential for causing death, injury, or harm. Physical violence includes, but is not limited to, pushing, shoving, throwing, grabbing, biting, choking, punching, hitting, burning, using restraints or one's body size or strength against another person, and using or threatening to use a weapon.

Prevalence: In this study, prevalence refers to the number of women who have experienced violence divided by the number of at-risk women in the study population. For some kinds of violence, such as sexual violence, all girls and women may be considered at risk,

¹ The survey questionnaire did not allow us to distinguish whether the respondent experienced the reported intimate partner violence prior to the age of legal consent.

but in other cases, such as intimate partner violence, only women who have ever had an intimate partner would be considered at risk.

Severe physical violence: Physical violence that is likely to lead to external or internal injuries, specifically involving being burned, choked, kicked, dragged, or threatened or attacked with a weapon.

Sexual harassment: For this study, sexual harassment is specifically defined as being asked to perform unwanted sexual acts to retain or secure employment, a job promotion, pass an exam, or obtain good grades at school; being groped, sexually touched, or rubbed in any public space, including public transportation; or receiving electronic messages with hurtful or discomfiting sexual content.

Sexual violence: Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to sexually traffic a person using coercion by any other person, regardless of their relationship to the victim, in any setting, including but not limited to home and work.

Survivor: For this study, a survivor is a woman who has experienced at least one dimension of intimate or non-intimate partner violence.

Violence against women and girls: Any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women and girls, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or private life. It encompasses, but is not limited to, physical, sexual, and psychological violence occurring in the family, the general community, or perpetrated or condoned by the state.

Executive Summary

○ Survey Background

The 2018 Suriname Women's Health Survey (SWHS) was a national, quantitative, cross-sectional survey designed to diagnose violence against women and girls (VAWG) in Suriname, with a specific focus on intimate partner violence (IPV) and non-partner sexual violence (NPSV). The survey measured the national prevalence of IPV and NPSV, determined risk and protective factors associated with IPV, and documented the health consequences and coping strategies for female survivors of IPV. The 2018 SWHS falls under a regional initiative of the Caribbean Community and Common Market (CARICOM), the Inter-American Development Bank (IDB), and UN Women, who collectively created a CARICOM Model for National Prevalence Surveys of Gender-Based Violence.² The SWHS fills an important gap in comprehensively understanding and addressing VAWG that is objective and reliable, with purpose-built data.

The 2018 SWHS was funded by the IDB and guided by the Government of Suriname, as represented by the Ministry of Justice and Police and the Suriname National Domestic Violence Committee (SNDVC), which comprised government and civil society representatives. The SNDVC provided oversight of the project, including reviewing and validating the survey methods, instrument, and final report. The private firm QURE Limited was commissioned to plan, manage, and execute the survey and its analysis, guided by the technical expertise of the Global Women's Institute of George Washington University.

○ Survey Methods

The survey methods were directly taken from the boilerplate CARICOM methodology, adapted for local relevance as guided by the collaborative and thorough efforts of SNDVC. The survey instrument was a structured questionnaire, pre-programmed on tablets for administration in face-to-face interviews conducted by trained interviewers. The

² The CARICOM Model was developed from the globally recognized and tested World Health Organization Model, based on its landmark Multi-country Study on Women's Health and Domestic Violence (García-Moreno, Jansen, Ellsberg, et al., 2005) and subsequent country studies on IPV.

nationally representative sample comprised 2,094 households,³ of which a single member—a randomly selected woman or girl 15 to 64 years old—was eligible for participation. Of the 1,813 women eligible for interviews, 1,527 were available and opted to participate in the survey. Data collection took place from mid-June to mid-September 2018. Due to the nature of the research, several limitations were inevitable, including but not limited to survey non-participation, likely underreporting of violence, generalization, and limited (bivariate) analysis. Nonetheless, the survey employed ethical practices designed to protect the confidentiality, safety, and well-being of all participants and field staff during both fieldwork and data handling throughout the project life.

The descriptive and inferential statistics calculated from the survey data are presented in tabular and graphical format. The prevalence of VAWG was calculated based on the proportion of women who experienced at least one act of the respective kind of violence at some point in their lives (lifetime prevalence) or at least one violent act in the 12 months prior to the survey (current prevalence). Further, the term “ever-partnered” references any woman who had a current or previous male intimate partner, whether married, cohabitating, or dating. Of the 1,527 respondents, 1,377 were ever-partnered. Further, cross tabulations of IPV prevalence were presented to explore various associations with demographic and other factors, and chi-square tests were used to ascertain which of these associations were statistically significant.

○ Survey Results

Violence Against Women and Girls by Their Male Partners

- Of ever-partnered women, 32 percent experienced physical and/or sexual IPV in their lifetime and 6 percent experienced it in the 12 months prior to data collection.
- Emotional violence was most common (lifetime, 35 percent; current, 9.2 percent).
- Almost one in three women experienced physical IPV in their lifetime (lifetime, 27 percent; current, 4 percent), of which most experienced a severe act⁴ at least once (61 percent).
- Of ever-pregnant women, 6 percent experienced physical IPV during a pregnancy, of which 36 percent experienced worse violence during pregnancy than otherwise.
- A little over one in 10 women experienced sexual partner violence in their lifetime (lifetime, 13 percent; current, 3 percent).
- More than one in three women experienced emotional IPV in their lifetime (lifetime, 35 percent; current, 9 percent).
- About 16 percent of women experienced economic IPV in their lifetime.

³ Different sampling strategies were implemented in Suriname Survey of Living Condition (SSLC) domains and the Interior. *SSLC domain*: Two-stage sampling: (1) In the connection areas for Suriname’s energy company, streets were used as primary sampling units and a sample of streets was selected. (2) A systematic random sample of 12 households per unit was selected. *Interior*: Two-stage sampling: (1) Villages were used as sampling units and a sample of villages were selected. (2) A systematic random sample of 12 households per unit was selected.

⁴ An act of physical violence likely to cause injury or serious harm.

- Experiencing IPV is rarely one-off; most female survivors of IPV, whether current or lifetime, experienced violence many times.

Put differently, in the 15 to 64 age bracket, over 50,000 women in Suriname are estimated to have experienced one or more acts of physical and/or sexual violence perpetrated by male partners. Significantly, approximately 9,000 are likely to still be in abusive relationships. These findings resonate with World Health Organization global estimates that almost one in three women are either physically or sexually abused at some point in their lives, not by strangers but by their own male romantic partners. Prevalence rates for most types of IPV and NPSV were similar (except sexual and economic IPV, for which Suriname had more elevated rates) to those found in Trinidad & Tobago and Jamaica, Caribbean countries that also recently conducted Women's Health Surveys (WHO, n.d.; Watson Williams, 2018; Pemberton and Joseph, 2018). Such estimates signify the widespread vulnerability of women to IPV.

Intimate Partner Violence: Associated Factors and Triggers

We analyzed associations between physical, sexual, and physical and/or sexual IPV and factors relating to the respondent and her partner. For some analyses, it is useful to consider physical and sexual violence in combination; therefore, the prevalence of physical and/or sexual violence is presented alongside each separately in some cases. We found the following respondent characteristics to be statistically significant:

- Lower educational attainment is associated with higher prevalence of current physical IPV.
- Unmarried women with partners showed higher rates of both physical and sexual violence over their lifetime than currently married women.
- Lifetime physical and sexual IPV experienced by ever-pregnant women was higher than that experienced by those who were never pregnant.
- Women between the ages of 25 and 29 were more likely than women from any other age group to be currently experiencing physical IPV (9 percent).
- Women who were married or lived with a partner at a young age had higher lifetime physical and/or sexual IPV prevalence than those whose first union was at 19 years or older.
- Lifetime physical IPV was higher among women who identified their ethnicity as African (34 percent).
- Lifetime sexual IPV was higher among those who were financially independent, which is counter-intuitive.
- Women in non-consensual marriages were more likely to have experienced physical (43 percent) and sexual (38 percent) IPV than those who choose their own partners (21 percent and 24 percent, respectively).
- Women who identified as Roman Catholic experienced the highest prevalence of lifetime physical IPV (34 percent).
- Women who were never married experienced a higher prevalence of physical IPV (32 percent) than women who were married at least once before (22 percent).

We found the following associations between physical and sexual IPV and partner characteristics:

- Women whose partners' ages ranged from 35 to 44, were unemployed, engaged in some form of substance abuse, or had prior relationships experienced higher levels of physical and sexual IPV.
- The more common triggers a partner's violent behavior (from the women's perspectives) were him being jealous of her (33 percent), him wanting to show her who is boss (16 percent), and no particular reason (13 percent). Notably, over 40 percent of women identified some other trigger for their partner's behavior.

Intimate Partner Violence, Gender Dynamics, and Associated Factors

Associations between IPV and women's attitudes toward gender and gender-based violence were determined using standard scales for the respondent's perception of gender roles, norms, and the normalization and justification of violence. Women agreed with sentiments that afforded them increased agency in their own lives and within their families. For example, a majority agreed that women and men should share authority in the family (96 percent) and that a woman should be able to spend her own money (77 percent). However, some women held traditional patriarchal notions. For example, 65 percent of women agreed that a woman's role is to take care of her home. In general, these attitudes and perceptions were not found to be significantly associated with any type of partner violence against women. There was a significant relationship between a male partner's controlling behaviors and a woman's experience of emotional, physical, or sexual IPV.

Impact of Intimate Partner Violence on Women

Almost a third of survivors (29 percent) reported having suffered injuries as a result of the violence inflicted on them and one-fifth (21 percent) stated that IPV affected their well-being a lot. Furthermore, the ramifications of enduring IPV move beyond the more obvious direct repercussions of violence to general physical and mental health problems. During their lifetimes, survivors are more likely to experience (sometimes even after the violence has ended) greater pain, more difficulty with normal functioning, greater risk of unwanted pregnancy and sexually transmitted infections, worse mental health, and compromised income-earning potential as a result of being unwell or due to their partner's behavior. Also noteworthy is the apparent traumatic impact of IPV on survivors' children, as they more commonly present troubling traits and perform poorly at school.

Women's Responses to Intimate Partner Violence

Women's most common coping mechanisms were to communicate with their mother or to stay quiet. Women were also likely to speak about IPV with a member of their own or their husband's family. The women who sought help did so through their personal contacts (mostly their mothers) rather than social services or other entities adequately resourced to address IPV. Several factors precluded women from accessing help, including the normalcy of violence, fear, and no knowledge of their options.

The reasons for survivors' reluctance to leave violent partners were difficult for them to pinpoint, though some attributed it to love for their partner, the normalcy of violence, or concern for their children. Women most commonly sought help or left their abusive situation when they felt they could not endure any more violence. Alternatively, some did, in the moment of a physical attack, fight back. Most often, at the time of an attack, the woman fighting back against her partner either stopped, lessened, or at least did not worsen the violence experienced. However, it was not clear how a partner's overall pattern of violent behavior was affected when victims fought back.

Sexual Violence Against Women by Non-Partners

We estimated NPSV based on the experiences of all women interviewed, not simply ever-partnered women.

- Roughly one in four respondents (26 percent) had experienced sexual violence as an adult or as a minor, either from a partner and/or a non-partner. The prevalence of NPSV (14 percent) is almost double that of sexual IPV (7 percent).
- Of all respondents, 4 percent (lifetime) reported having been forced into sexual intercourse by a non-partner (current, < 1 percent).
- Of the respondents, 13 percent reported being touched sexually or made to sexually touch another when they did not want to at least once in their lifetime (current, 2 percent).
- Of the women surveyed, 4 percent indicated they were victims of attempted intercourse at least once by a non-partner.
- The majority of women reported one perpetrator, in many instances a family member or friend. The majority of such experiences (85 percent) were left unreported to police.
- Sexual harassment (at work, on the job, on public transport, and in virtual spaces) was experienced by 25 percent of women, with the highest prevalence being in the form of electronic messages with sexual content (19 percent) and being groped in a public space (9 percent).
- Of the respondents, 1 percent indicated that they had experienced childhood (before age 18) sexual abuse.

○ Conclusion and Recommendations

The 2018 SWHS produced rich and robust data. The statistical findings provided critical insights on the existing needs of women experiencing IPV and identified several areas for interventions. These findings are valuable for informing and shaping not only current government policy, which positions gender as a cross-cutting issue, but also the policies of civil society non-governmental organizations, which address women's issues and IPV-related issues. Recommendations for government and civil society agencies include:

- Ensuring programs to support survivors include counseling and support services for survivors' children as a preventive measure against future abuse.

- Targeting public awareness campaigns and programs aimed at reducing IPV at both survivors and the broader community to which they are likely to turn for support.
- Developing programming and policies aimed at changing patriarchal attitudes and norms that provide fertile ground for violence and abusive behaviors.
- Ensuring ongoing and regular data collection about gender-based violence, including periodic implementation of the SWHS and strengthening and systematizing existing administrative data collection.
- Training police and health workers to identify and respond to IPV.
- Continuing outreach to religious leaders to sensitize them to VAWG, provide training on how to prevent VAWG, and identify and support survivors among their congregants.
- Expanding coverage of support services to women outside Paramaribo.

Introduction

○ Survey Background

Violence against women and girls (VAWG) has been recognized as a human rights violation of pandemic proportions. It knows no social, economic, or national boundaries. Article 1 of the United Nations Declaration on the Elimination of Violence Against Women defines the term violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or private life” (UN Women, 2016).

In 2014, the Inter-American Development Bank (IDB) approved a regional grant⁵ to support the design and implementation of the Women’s Health Survey in Jamaica, Trinidad & Tobago, and Suriname. The objective of the grant was to collect national data on the prevalence of intimate partner violence (IPV) in each country. The 2018 Suriname Women’s Health Survey (SWHS), the first national survey of its kind, falls under a regional initiative of the Caribbean Community and Common Market (CARICOM), the IDB, and UN Women, who collectively created a CARICOM Model for National Prevalence Surveys on Gender-Based Violence. The CARICOM Model is based on the original World Health Organization (WHO) Multi-country Study on Women’s Health and Domestic Violence conducted in the early 2000s (García-Moreno et al., 2005). This WHO study was the first to provide comparable data using face-to-face interviews with women from culturally diverse countries on the prevalence and frequency of different forms of VAWG, specifically, violence by intimate partners and its effects on women’s lives and health. The CARICOM Model was initially piloted in Jamaica in 2015–16, with the support of UN Women and the IDB. Following the pilot, the survey was conducted with IDB financing in Trinidad & Tobago and Suriname; in Grenada with the support of the Caribbean

⁵ Additional information on the grant project, including the project proposal, may be found at <https://www.iadb.org/en/project/RG-T2450>.

Development Bank, the Government of Grenada, and UN Women; and in Guyana with support from the IDB and UN Women among other donors.

The 2018 SWHS is a direct result of this collaborative process. A national, quantitative, cross-sectional survey designed to diagnose VAWG in Suriname, it fills an important gap in comprehensively understanding and addressing VAWG through objective, reliable, purpose-built data.

○ **Violence Against Women and Girls: Regional and International Agendas**

VAWG remains a significant human rights issue internationally. Rashida Manjoo, a United Nations rapporteur on violence against women, emphasized that VAWG is “the most generalized human rights violation that we confront today” (Abbott Galvão, 2015). In addition, Article 1 of the Convention of Belém do Pará defines violence against women as “any act or conduct, based on gender, which causes death or physical, sexual, or psychological harm or suffering to women, whether in the public or the private sphere” (OAS, 1994). This Inter-American Human Rights treaty has served as the basis for adopting laws and policies on preventing, eradicating, and punishing violence against women in its state parties, as well as formulating national plans, organizing campaigns, and implementing care protocols and services, among other initiatives.

The Copenhagen Consensus Center of Oxford University estimates that, in one year, approximately 300 million women aged 15 to 64 are assaulted by an intimate partner (i.e., every ninth woman in the world, every year) (Hoeffler and Fearon, 2014). Globally, the prevalence of physical and/or sexual IPV among all ever-partnered women was 30 percent (WHO, 2013). The prevalence was highest in the African, Eastern Mediterranean, and South-East Asian regions, where approximately 37 percent of ever-partnered women reported having experienced physical and/or sexual IPV at some point in their lives. In the Americas, approximately 30 percent of ever-partnered women reported having experienced IPV at some point in their lifetime, while prevalence rates were lower in the high-income Americas (23 percent) and in the European and Western Pacific regions (25 percent) (WHO, 2013).

A 12-country analysis from Latin American and Caribbean countries found that IPV—the most common form of VAWG—remains widespread, ranging between 14 and 59 percent (Bott, Guedes, Ruiz-Celis, et al., 2019). The WHO has also highlighted violence against women as a leading public health issue in many countries (WHO, 2013). Given such statistics worldwide, the collection of comprehensive, systematic, nationally owned data remains critical in responding to and preventing VAWG.

The United Nations recently adopted the 2030 Agenda for Sustainable Development. For the first time, such an agenda included the elimination of VAWG as a global target under Goal #5 on gender equality and empowerment of all women and girls (UN, 2018). The WHO emphasizes a need for better reporting and more attention to prevention, as well as the urgent need for better care for women who have experienced violence. These women often seek healthcare, without necessarily disclosing the cause of their injuries or

TABLE 1 ○ Summary of Global Cost Estimates of Violence

Type of Violence	Cost in US\$ billions	Cost in % of World GDP
Collective violence	167.19	0.019
Interpersonal violence	1245.27	1.44
Homicides – total	700.5	0.82
Men	557.5	0.65
Women	105.3	0.123
Female homicides, IP	40.1	0.047
Children	37.7	0.044
Child abuse	3594	4.21
Reported child sexual violence	36.8	0.043
Intimate partner violence	4423	5.18
Reported sexual violence against women	66.7	0.078
Total	9,533	11.16

Source: Hoeffler and Fearon (2014).

Note: Collective violence includes deaths from external and internal conflicts and terrorism. Interpersonal violence includes homicides and violent crime (serious physical attacks but excludes sexual assault). We break down homicides by victim (men, women, and children) and provide an estimate for women killed by their intimate partner (IP).

ill-health. This report's findings indicate that violence greatly increases women's vulnerability to a range of short- and long-term health problems and highlights the need for the health sector to take violence against women more seriously (WHO, 2013).

The total cost from conflict (deaths from wars and terrorism, refugee-related costs, and economic damage) is estimated at about 0.2 percent of global gross domestic product (GDP) each year (Hoeffler and Fearon, 2014). IPV costs the world about 25 times more than this at around 5.2 percent of global GDP or US\$4,423 billion per year. The annual death toll of women killed by their intimate partners adds another US\$40.1 billion to the global cost of VAWG.

In Latin America, several studies have found a negative impact of IPV on women's earning capacity. A 1999 IDB study found that in Santiago, Chile, women who were physically abused earned US\$150 a month on average compared to women who were not mistreated, who earned an average of US\$385. These costs also translate into a substantial economic loss for society as a whole. In Chile, violence against women in the home caused a loss of income of US\$1.5 trillion, more than 2 percent of gross national product. For Nicaragua, the loss was US\$29.5 million, or around 1.6 percent of gross national product. (Morrison and Bielh, 1999)

At the high-level discussion on the Economic Cost of Violence against Women in 2016, UN Assistant Secretary-General and Deputy Executive Director of UN Women Lakshmi Puri emphasized that the annual costs of IPV were calculated to be US\$5.8 billion in the United States and US\$1.16 billion in Canada. In Australia, VAWG costs an estimated US\$11.38 billion per year. Domestic violence alone costs approximately US\$32.9 billion in England and Wales. (Puri, 2016)

One of the most important requirements to reduce or end VAWG is the availability of systematic, standardized, reliable, sex-disaggregated, inter-connected, and analyzable data on this complex phenomenon. The 57th Session of the United Nations Commission on the Status of Women (CSW57) urged national governments to undertake multidisciplinary research on and analysis of VAWG, not only to understand the phenomenon, but also to inform legislation and responsive strategies.

As stated in the National Sexual and Reproductive Health and Rights Policy for 2013–2017, the Government of Suriname has recognized the lack of adequate and basic data as one of the most important constraints to developing a proper understanding of VAWG nationally. Indeed, the National Development Plan 2017–2021 identifies the lack of data as a barrier to developing policy to achieve gender equality, and the Minister of Home Affairs stressed the importance of collecting reliable data. Recently, efforts have been made to improve data collection, including the development of a standardized registration form for domestic violence by the Ministry of Justice and Police. The form is now being piloted by the Suriname Police Corps (KPS) and non-governmental organizations offering services to victims of domestic violence in coastal districts and the interior (Bakboord, 2014).

The Ministry of Home Affairs (MOHA), which is responsible for gender policy, collects some gender-related data. However, the KPS is the primary institution responsible for collecting statistical data on sexual and domestic violence offenses. The KPS is currently developing an initiative for data collection with the Central Information Collection Service to collect, process, and analyze data from police reports, and with the Department for Women’s and Children’s Policy Development to collect statistical and administrative data from government and non-governmental organizations that provide services to victims and perpetrators. The goal is to develop policies and programs to improve legal protection of victims and combat and prevent violence.

When implemented, this KPS initiative should provide a means to (i) identify the gaps in public service responses to women who have experienced violence and (ii) monitor trends over time. Ideally, such administrative data would assist in contextualizing the nature of the violence experienced by women who report and identify the perpetrators of such crimes. However, it is important to note that administrative data on VAWG is usually not comprehensive, as can be seen in the disparity between the number of incidents of violence reported through formal channels and those collected via prevalence surveys. Administrative data also may not capture specific information that would aid in understanding the factors associated with violence. Finally, administrative data may not be made public or shared in a manner that allows for robust and multi-stakeholder analysis, thus limiting its overall usefulness.

Geographic, Socio-Historic, and Economic Context

Suriname lies on the north-eastern part of South America, between 2- and 6-degrees north latitude and 54- and 58-degrees west longitude. It is bordered by the Atlantic Ocean to the north, Guyana to the west, French Guiana to the east, and Brazil to the south. Suriname is divided into 10 administrative districts and its capital city is Paramaribo.

FIGURE 1  Map of Suriname



Source: Centre of Agricultural Research in Suriname.

The country, which is largely covered by tropical rainforest, has a surface area of about 163,820 square kilometers. About 90 percent of the population lives in the coastal area, and 72 percent lives in a 30-kilometer radius around the capital of Paramaribo.

As a result of colonial historic developments, Suriname consists of various ethnic groups that continue to speak their own languages and enjoy the culture of their native countries and are permitted to do so freely. According to the General Population and Housing Census (GBS, 2012), the population of approximately 530,000 persons

TABLE 2 ○ Population of Suriname by Sex, 2016

Male	Female	Total
267,842	264,191	532,033
50.3%	49.7%	100.0%

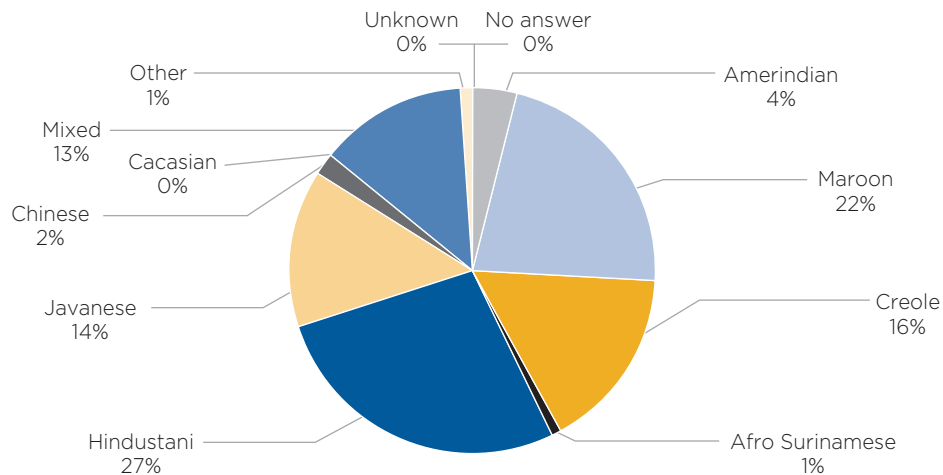
Source: Demographic Data Suriname, 2016, Central Office for Civil Affairs, MOHA.

consists of Hindustani, 148,443 (27 percent); Maroons, 117,567 (22 percent); Creoles, 84,933 (16 percent); Javanese, 73,975 (14 percent); mixed race, 72,340 (13 percent); Indigenous peoples, 20,344 (4 percent); Chinese, 7,885 (2 percent); Afro-Surinamese, 3,923 (1 percent); Caucasians, 1,667 (<1 percent); and others, 10,561 (2 percent). Over the past few decades, a large number of migrants have come to Suriname from Brazil and Guyana.

Most Surinamese are either bilingual or multilingual. Though Dutch is the official language and Sranan Tongo is the common language, at least 15 other languages are also spoken in the country, including six Indigenous languages (Akurio, Carib, Trio, Wayana, Warao, and Arowak), three Creole languages (Auka, Samaaka, and Sranan Tongo), five Asian languages (Sarnami Hindi, Urdu, Surinamese Javanese, Hakka, and Chinese), and Arabic, which is spoken primarily by the Lebanese and Muslim communities.

The economy of Suriname and its society have been shaped to a high degree by external forces. From the 1940s onward, the mining sector became the engine of economic growth, with bauxite and bauxite-related products dominating exports and the overall growth performance of the economy (Bakboord and Schmeitz, 2011). Currently, the economy is dominated by the mining industry, with oil and gold accounting for approximately 85 percent of exports and 27 percent of government revenues. The worldwide drop in international commodity prices and the cessation of alumina mining in Suriname significantly reduced government revenue and national income during the past few

FIGURE 2 ○ Population of Suriname by Ethnicity, 2012



Source: Demographic Data Suriname, 2016, Central Office for Civil Affairs, MOHA.

years. After 99 years of operations, SURALCO LLC, a subsidiary of ALCOA (Suriname's major U.S. aluminum company), recently discontinued its activities in Suriname. Public sector revenues fell, together with exports, international reserves, employment, and private sector investment. Economic growth declined annually from just under 5 percent in 2012 to -10 percent in 2016. In 2015, the Surinamese Central Bank abandoned its fixed exchange rate, causing a devaluation in the currency by 21 percent. Over the years, the currency has steadily weakened, with the current exchange rate at SR\$7.46 to US\$1 in 2019. (ECLAC, 2016)

Status of Women in Suriname

Of the 145 countries that are ranked in the 2017 Global Gender Gap Report, Suriname occupies 86th place. The figures on healthy life expectancy⁶ show that, on average, Surinamese women have 64.9 years of healthy life, while men have 61.4 (WEF, 2017, p. 304). Educational indicators also show women performing well. Student data for the Anton de Kom University of Suriname, the country's sole tertiary education institution, show that of 4,001 students enrolled, 2,738 (68 percent) are female (CEDAW, 2018). However, men make up almost twice the share of highly skilled workers in the labor force (5 percent)⁷ as women (3 percent) (WEF, 2017, p. 304).

Although Article 8 of the Constitution states that, “[n]o one shall be discriminated against on the grounds of birth, sex, race, language, religious origin, education, political beliefs, economic position or any other status (Republic of Suriname, 1992),” rankings for Suriname with respect to participation of women in political and decision-making positions are very low. Data from the GBS indicate that the proportion of women holding ministerial positions between 1987 and 2015 was on average 12 percent. While the participation of women in the national parliament is higher compared to the Council of Ministers, it has fluctuated significantly in the past 20 years. In 1996, when a woman was elected as Speaker of Parliament for the first time in Surinamese history, 16 percent of parliament consisted of women. The percentage of women parliamentarians increased to 18 percent in 2000 and then 22 percent following the 2005 elections. Following a drastic decline to 10 percent after the 2010 elections, a national campaign, “More Female Leadership,” was organized leading up the 2015 elections. In collaboration with the MOHA, parliament used the campaign to promote more women in decision-making positions in both public and private spheres. The campaign likely contributed to women winning 27 percent of the seats in parliament. While political parties were encouraged to nominate more women candidates for the 2015 elections, without any explicit legal quota system, political parties were not obliged to nominate female candidates.

⁶ Healthy life expectancy is the average number of years that a person can expect to live in full health, calculated by taking into account the years lost to violence, disease, malnutrition, and other relevant factors.

⁷ Proportion of a country's working age population with a tertiary degree who are actively engaged in the labor market.

TABLE 3 ○ Female Employees (15–64) by Age and Occupational Groups (in Paramaribo and Wanica)

Age Group	Occupational Groups ^a										Total
	1	2	3	4	5	6	7	8	9	10	
15–24	149	583	364	938	1928	88	38	5	525	597	5,216
25–34	981	3,045	1,750	3,850	4,507	66	298	19	1,103	966	16,604
35–44	609	2,245	1,527	2,424	3,697	96	630	177	2,474	230	14,108
45–54	625	1,808	1,176	1,492	2,278	4	506	27	3,600	216	11,732
55–64	637	424	438	698	1,377	—	10	53	1,056	3	4,698
Total	3,001	8,105	5,254	9,401	13,787	273	1,428	282	8,759	2,013	52,358

Source: Household Surveys, 2014–2016, General Bureau of Statistics of Suriname (2017).

^a1: Legislators, Senior Officers, and Managers; 2: Professionals (Scientific Personnel); 3: Technicians, Associates, Professionals, and Armed Forces; 4: Clerks; 5: Service Workers, and Shop and Market Sales Workers; 6: Skilled Agricultural and Fishery Workers; 7: Crafts and Related Trade Workers; 8: Plant and Machine Operators and Assemblers; 9: Elementary Occupations; 10: Unknown.

○ Technical Reviews and Strategic Plans: Crime and Violence in Suriname

National Policy Plan Structural Approach – Domestic Violence 2014–2017

The National Policy Plan Structural Approach – Domestic Violence is a sector plan that was created in close collaboration with all relevant stakeholders and approved by the minister of that specific department. The Domestic Violence Steering Committee was responsible for compiling the plan, which is intended to bring about an integrated approach to preventing domestic violence. The plan includes structures (organizational structures to implement and monitor the policy plan), legislation, awareness and training, research and data collection, assistance (counseling), check-in points for domestic violence, and monitoring and evaluation. The plan was recently updated and presented to the Minister of Justice and Police in July 2018. The plan is currently being evaluated by the Suriname National Domestic Violence Committee, which was established in 2017.

Suriname Country Profile International Security Sector Advisory Team

Based on the data from the profile by the International Security Sector Advisory Team (ISSAT), Suriname saw a decrease in homicides from 2001 to 2010, with a murder rate in 2010 of 4.2 per 100,000 inhabitants (ISSAT, 2015). More recent data on homicides in Suriname shows 6 murders per 100,000 inhabitants in 2017 (EIU, 2018), a slight increase from 2010. While the ISSAT profile does not specifically discuss gender-based violence or VAWG, it notes Suriname was given a Tier 2 Watch List⁸ rating in 2012 by the U.S. Department of State because it “is a source, transit, and destination country for sex trafficking and forced labor” of women and girls; many of whom are forced into prostitution

⁸ Tier 1 is the top rating followed by Tier 2, Tier 2 Watch List, and Tier 3.

in the country. The profile recommends that Suriname improve the effectiveness of its legal system and strengthen its police force.

CariSECURE Data-Driven Crime Prevention

Suriname participates in the USAID CariSECURE program, which was implemented with the technical assistance of the United Nations Development Programme (UNDP). The goal of CariSECURE is to improve policy-making and programming related to youth crime and violence across the Caribbean using quality, comparable, and reliable national citizen security information. The National Task Force will play a key role in ensuring that policymakers are equipped with the information they need to target crime from where it starts. (UNDP, 2018)

○ Statistics on Violence Against Women and Girls in Suriname

As discussed above, there is scarce data available on VAWG in Suriname. Further, collected data is often not classified across agencies in a manner that allows for easy comparison or analysis. Table 4 presents recent data on violence against women in Suriname. Table 5 presents data regarding domestic violence (not only IPV) reported to the KPS by female victims.

A 2010 qualitative study of heterosexual, female survivors of IPV found that women’s acquired sexual and reproductive roles and responsibilities in Suriname were characterized by subordination to their male partner and physical, emotional, sexual, mental,

TABLE 4 ○ Women’s Deaths Due to Violence in Suriname, 2012–2015

Year	Criminal Offense		Total
	Homicide	Murder	
2012	16	22	38
2013	16	17	33
2014	10	15	25
2015	19	19	38
Total	61	73	134

Source: Suriname Progress Report on the implementation of the Montevideo Consensus 2013–2018.

Note: The differentiation between murder and homicide is that murder is premeditated.

TABLE 5 ○ Domestic Violence Reported to Police by Female Victims in Suriname, 2013–2016

Year	Number of reported victims
2013	1220
2014	No Data Available
2015	1496
2016	1299

Source: Suriname Progress Report on the implementation of the Montevideo Consensus 2013–2018.

and financial abuse. Survivors reported living in a constant cycle of fear and violence that reinforced unequal and inequitable gender power relations, including insufficient or no control over their sexuality, sexual and reproductive health, and access to health care. Male partners effectively controlled their female partner's sexual and reproductive choices (Bakboord, 2010).

A further study in 2015 on the causes and nature of IPV conducted among male perpetrators produced findings in line with the above. Respondents reported being taught as children to control their future partners and children. As a consequence, in their current intimate relationships, when their spouse or partner undermined their control, they would become angry, aggressive, and physically violent. Respondents identified alcohol and drugs as both a cause of IPV as well as a justification for their behavior (Bakboord, 2015).

○ Human Rights Monitoring and Reporting

Suriname's existing legal and policy frameworks provide general recognition of each person's right to be safe from physical harm. The Constitution of the Republic of Suriname guarantees any person within the national territory an equal claim to protection of their person and goods (Republic of Suriname, 1992). In turn, the National Development Plan 2017–2021 states that, "Laws and regulations and policy principles of private and public organizations guarantee the right to personal safety and freedom of men and women such that the chances of realizing their ideals and talents are not adversely affected by gender stereotypes." Over the past decade, Suriname has adopted laws that provide specific protections against VAWG, including the 2009 *Domestic Violence Act* and the 2012 *Law against Stalking*. Additionally, following the revision of the Penal Code in 2009, rape within marriage is now defined as a criminal offense. However, implementation of these laws has been stymied by lack of training and tools at the operational level to ensure proper recording and tracking of cases, lack of social services to support survivors, and inefficient and ineffective criminal justice systems to hold perpetrators accountable.

The country has also committed to a number of regional and international treaties related to the human rights of women and girls, including the following:

1. **The Convention on the Rights of the Child (CRC):** Signed in 1990 and ratified in 1993. A combined 3rd and 4th report were submitted in 2014. The UN Committee on the Rights of the Child reviewed the report and issued comments in 2016. Suriname ratified the **Optional Protocol to the CRC on the involvement of children in armed conflict** in 2002⁹ and the **Optional Protocol to the CRC on the sale of children, child prostitution, and child pornography** in 2012.¹⁰
2. **The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW).** Ratified in 1993. The combined 4th through 6th National Reports were

⁹ See <https://www.ohchr.org/EN/ProfessionalInterest/Pages/OPACCRC.aspx> for the text of this optional protocol.

¹⁰ See <https://www.ohchr.org/EN/ProfessionalInterest/Pages/OPSCCRC.aspx> for the text of this optional protocol.

- presented in 2016.¹¹ The CEDAW Report indicated significant improvements in achieving gender equality in updated legislation, healthcare, and access to education and noted continuing gender disparities with respect to political representation as well as persistent social norms around gender subordination.
3. **The Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women (Convention of Belém do Pará).** Ratified in 2002. The Government of Suriname presented a country report in 2016 as part of the third round of evaluation of the Convention's implementation. The report noted progress in implementing legislation to address VAWG but also a decrease in budgetary allocation and failure to implement the recommendation of the second-round evaluation to fully incorporate the concept of gender-based violence into national legislation.
 4. **Universal Periodic Review.** A unique State-driven process of reviewing the human rights records of UN Member States that is sponsored by the Human Rights Council. Each State declares what actions they have taken to improve the human rights situations in their countries and to fulfil their human rights obligations. The Government of Suriname submitted its most recent Review in 2016, assessing both achievements and challenges in promoting and protecting human rights.¹² The report noted significant advances in the areas of women's rights and gender equality. For example, an amendment to the Civil Code introduced maternity leave for women in the private sector and prohibited dismissal during pregnancy. Also, the report noted the need to formally adopt measures to combat gender-based violence and abuse against women such as the Domestic Violence Plan 2014–2017.
 5. **Sustainable Development Goals (SDGs).**¹³ Having taken effect in 2016, the SDGs replaced the Millennium Development Goals and take on new challenges in human development, including Goal #5 on gender equality.

Government Agencies, Policies, and Initiatives Related to Violence Against Women and Girls

Government Agencies

National Gender Affairs Bureau. Established in 1997 as a department of MOHA, this bureau is tasked with promoting and monitoring gender equality in Suriname. Recent key initiatives include the following:

- From 2010 to 2013, in collaboration with MOHA's Bureau of Religious Affairs, the Bureau provided training to religious leaders on VAWG to enhance their support and counseling for survivors of domestic violence.

¹¹ See <https://www.refworld.org/country,,CEDAW,,SUR,,5863bf654,0.html> for initial reports. The 2016 report is not yet published.

¹² See <https://www.ohchr.org/EN/HRBodies/UPR/Pages/SRIndex.aspx> for details of Suriname's second cycle review.

¹³ See <https://sr.one.un.org/sustainable-development-goals/> for a list of the SDGs.

- The **2013 Gender Work Plan**, a cross-governmental plan developed by the bureau and led by MOHA, identifies five priority action areas ([i] education, [ii] poverty reduction, [iii] labor insertion, [iv] violence reduction, and [v] improved health and decision-making) to enhance gender equality in Suriname.

Suriname National Domestic Violence Committee. A national committee composed of representatives of the Ministries of Justice and Police, Social Affairs and Housing, Home Affairs, Health, Education, and Community and Regional Development, as well as civil society organizations. The committee's mandate extends beyond VAWG to cover all forms of violence occurring in the domestic sphere, including elder abuse. Its mission is to serve as a coordinating body for cross-governmental initiatives to reduce domestic violence.

As a result of the Republic of Suriname's ratification of the Convention on the Elimination of all Forms of Discrimination against Women and of the Convention of Belém do Pará, and its membership in CARICOM, Suriname committed to developing regulations to protect against domestic violence. Funded by the Canadian Gender Equality Program Fund, in 2002, the Women's Rights Center set up a committee that consisted of judicial, gender, and domestic violence experts from both government and non-governmental organizations (NGOs) to design a domestic violence act. After lobbying and presenting it to the Ministry of Justice and Police, and after approval from the National Assembly, the Council of State passed the *Domestic Violence Act* on June 20, 2009. With this act, the complainant can apply to the court to issue a protection order on the basis of the fact that the respondent (the person against whom the protection order was issued) has engaged in domestic violence or when there is reasonable suspicion that the respondent will engage in domestic violence. No lawyer is required.

Policies

National Development Plan 2017–2021 (Republic of Suriname, 2017). The strategic goal for the multidisciplinary policy area Gender Equality is that laws, regulations, and policy principles of private and public organizations guarantee the right to personal safety and freedom of men and women and that the chances to realize their ideals and talents are not negatively affected by gender stereotypes. Violence against women is not specifically discussed.

National Sexual and Reproductive Health and Rights Policy of Suriname 2013–2017. This national plan is guided by a human rights-based approach that integrates a gender perspective. Though VAWG is not specifically addressed, the policy reflects political will to eliminate all forms of discrimination based on sex and to protect individuals' rights, including sexual and reproductive rights.

Ministry of Health National Health Sector Plan 2011–2018. The National Health Sector Plan sets out a strategy to safeguard, maintain, and improve health indicators in Suriname and to promote healthy lifestyles to prevent diseases.

Initiatives

In Suriname, NGOs have played a leading role in defining and promoting gender equality, addressing VAWG in particular. As early as 1951, the Hindustani Sudhar Sabha (the Hindustani Social Reform Organization) was established to take action against violence against women, more than 30 years before any formal government initiative to address the issue. Today, NGOs such as the Women's Rights Center, Stop Violence against Women, and the Caribbean Association for Feminist Research, Suriname chapter, continue to work closely with the Government of Suriname to run awareness campaigns, provide training, and set the national agenda and strategy on gender equality and VAWG. These entities also play a crucial role in reflecting and navigating the range of understandings and perspectives on gender equality and, by extension, definitions and appropriate responses to VAWG that arise from Suriname's ethnic, religious, linguistic, and cultural diversity. The work of NGOs takes place mostly in Suriname's capital and the surrounding metropolitan districts. Due to the enormous expense of travel to the interior of Suriname, work outside the metropolitan area remains limited to radio and television awareness campaigns about VAWG conducted in the language of the local communities.

The SWHS Report

The prevalence of VAWG in Suriname remains a protracted challenge notwithstanding decades of inquiry, financial investment in programming, feminist activism, legislation, and public policy interventions. Despite official indications, such as reports of domestic violence to the police and informal investigation by services on the ground (e.g., support service agencies), there are no comprehensive national data on the prevalence of VAWG. This report is designed as a starting point in closing the information gap in an effort to enrich the dialog on VAWG, inform the policy agenda, and enhance governmental and civil society programming.

The remainder of the report presents and discusses the substantive survey results. In Chapter 2, we describe the study's organization and methodology. In Chapter 3, we provide sample characteristics and the study's response rates. In Chapter 4, we discuss the survey findings, including a thorough investigation of the different dimensions of current and lifetime IPV prevalence. To better understand the phenomenon, we also examine the respondent and partner characteristics associated with IPV and the association of gender roles, attitudes, and behavior with IPV. We also examine the consequences of IPV on women's lives, particularly their health, as well as the various mechanisms that survivors use to cope with and/or escape IPV. We conclude the chapter with an examination of sexual violence perpetrated by non-partners, including a discussion of perpetrators, the various forms of non-partner violence, and associated factors. In Chapter 5, we provide conclusions and recommendations.

Organization and Methodology

The Suriname Women's Health Study (SWHS) is a cross-sectional survey that takes account of the prevalence, frequency, severity, associated factors, circumstances, and consequences of intimate partner violence (IPV) and non-partner sexual violence. It also documents the reasons for and results of survivors seeking help for the violence they encounter from partners and non-partners.

The study objectives were:

- to document the national prevalence of different forms of violence against women (including the SDG indicators under target 5.2¹⁴),
- to document the health consequences of IPV against women,
- to identify and compare risk and protective factors for IPV against women, within and between various settings, and
- to explore and compare the coping strategies used by women experiencing IPV.

More generally, the study also aimed to:

- inform evidence-based policies to prevent violence against women and girls (VAWG) and protect and support survivors,
- take a baseline reading of VAWG in Suriname so that subsequent studies may be used for comparative and/or evaluation purposes,
- create robust and internationally comparable data for both local and international stakeholders, and

¹⁴ SDG 5.2 seeks the elimination of “all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.” The indicators for this goal are “proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual, or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age” and “proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence.” <https://sustainabledevelopment.un.org/sdg5>

- provide access to a rich and reliable dataset for researchers interested in analysis beyond the scope of the current report.

○ Study Organization

The SWHS was implemented in Suriname with financing from the IDB. The Government of Suriname, through the Ministry of Justice and Police, the Ministry of Health, and the General Bureau of Statistics (GBS) of Suriname, provided technical clearance, input, and advice throughout the survey's design and implementation, as well as in the analysis and dissemination of results. The Global Women's Institute of George Washington University also lent its technical expertise and global experience in researching VAWG to advise and guide the project at all stages. Finally, the private research firm Sistemas Integrales, in collaboration with its Surinamese statistical firm, DataFruit, was contracted to conduct the study using the standard CARICOM gender-based violence prevalence study model. The Suriname National Domestic Violence Committee, which includes governmental and non-governmental stakeholders, also acted as an advisory body for the study, charged with reviewing the final report and findings. This report was prepared by QURE Ltd., a private research firm.

○ Ethical Considerations

Independent ethical review of any study involving human subjects is essential to ensure that participants' rights and safety are recognized and protected. The SWHS ethical protocols were adapted from the guidelines developed by the WHO (2001) for conducting research on VAWG. On advice of the GBS, ethical review and clearance for the SWHS were sought and received from:

- The Advisory Board on Ethics of the International Statistical Institute
- The Ministry of Health Research Ethics Committee, which sought and received recommendations from the Caribbean Public Health Agency

The submissions to these bodies established that the main risks associated with participation in the SWHS were triggering distress in respondents by asking about sensitive personal experiences and, more consequentially, prompting violence in the home if the full nature of the survey was disclosed to non-respondents. Submissions also detailed the survey protocols that would be used to mitigate these risks, including ensuring participant confidentiality throughout the study (from field visits through all stages of data handling); training field interviewers to minimize, recognize, and respond to respondent distress; and providing support service information to all participants. Only one woman from each household was selected to participate in the study and participants were reminded that they could choose not to respond to any question or abandon the survey at any point. Additional protocols included having no publicity about the study prior to or during fieldwork and referencing the survey discretely as a women's health study to

keep its full purpose private from anyone other than eligible respondents. All reviewing bodies evaluated the protocols as sufficient to minimize the possibility of harm to participants, especially given their proven success in many countries around the globe, including CARICOM neighbors, Jamaica and Trinidad & Tobago.

○ Sample Design

The SWHS sample design was informed by the previous year's experience conducting the 2017 Suriname Survey on Living Conditions (SSLC), which was also financed by the IDB. Similar to the SSLC, the SWHS used data produced by the customer database of the Suriname's energy company (*Energie Bedrijvan Suriname* in Spanish, or EBS) to design a complete and up-to-date sampling frame at the household level in the EBS-supplied areas.¹⁵ EBS is the only electrical company in Suriname and its network supplies the largest part of the national territory (all districts, except for a part of Brokopondo and Sipaliwini) and has a full household coverage in those areas. EBS organizes its network into 27 connection areas that cover the largest part of eight districts (Paramaribo, Wanica, Nickerie, Coronie, Saramacca, Commewijne, Marowijne, and Pará), as well as the northern part of Brokopondo and a small portion of Sipaliwini.

Areas not covered by the EBS network (the southern half of Brokopondo, the largest part of Sipaliwini, and small portions of a few other districts) are supplied by the Ministry of Natural Resources, which provides the small villages located in these areas with electrical generators and fuel. The Ministry of Natural Resources does not keep records of the households served in these areas, so the only available sampling frame is the list of the villages located therein.

Given the SSLC analytical objectives and the data available, the Suriname population was classified into three geographic estimation domains:

1. **Great Paramaribo:** 13 EBS connection areas that cover the Paramaribo district and its peripheries. It includes Paramaribo's population plus part of the population in contiguous districts (Wanica, Saramacca, and Commewijne) who generally commute to Paramaribo on a daily basis. This domain has the largest population and the highest density by far. It can be broken into two estimation subdomains: *Paramaribo* and *Paramaribo Outskirts*.
2. **Rest of the Coastal Region:** The remaining 14 EBS connection areas on the coast (i.e., the coast excluding Great Paramaribo).
3. **Interior:** The territory not covered by EBS's electrical network and supplied by the Ministry of Natural Resources. Its population gathers in 137 small villages located in most of Sipaliwini, the southern half of Brokopondo, and small portions of other districts. Although it covers a much larger territory than the other two domains, it is the smallest domain in terms of population.

¹⁵ In most instances, population census data at the enumeration area level is used to design household sample designs to conduct women's health surveys.

The sampling strategy used in the Interior differed from that implemented in the SSLC domains Great Paramaribo and the Rest of the Coastal Region.

For the SWHS, the two SSLC domains Rest of the Coastal Region and Interior were merged into one estimation domain, Rest of Coast and Interior, due to constraints imposed by the sample size in each domain. The two other estimation domains were Paramaribo and Paramaribo Outskirts (see Annex 2).

In the first two SSLC **domains**, where EBS coverage is complete, the sampling frame was based on the up-to-date EBS customer database. The sample had a two-stage design stratified by EBS connection areas. In the first sampling, streets operated as primary sampling units and a sample of streets was selected in each of the 27 connection areas with probability proportional to size, using the number of households in each street as measure of size. Overall, 169 primary sampling units were selected in domain Great Paramaribo and 47 in domain Rest of the Coastal Region. In the second sampling, a systematic random sample of 12 households was drawn from the EBS customer database for each selected unit.

In line with the high concentration of Suriname's population in Paramaribo and its outskirts, the largest part of the SSLC sample was located in the Great Paramaribo domain.

In the Interior domain the scenario was different because the area is not covered by EBS's network and there is therefore no available sampling frame at the household level. The sample in this domain also had a two-stage design. In the first sampling, the villages operated as primary sampling units and a sample of 19 villages were selected with probability proportional to size out of a list of villages provided by the Ministry of Natural Resources. The total population of each village was used as a measure of size.¹⁶ The second sampling involved conducting a household listing operation in each selected village and then drawing a systematic random sample of 12 households from each.¹⁷

The target population for the SWHS was non-institutionalized women, aged 15 to 64, who were resident in Suriname, and had the capacity to understand the questionnaire as administered in person by a trained interviewer. The SSLC sample was thus used as a frame to select households from which at least 1,500 eligible women could be visited.

Survey Instrument

Under the auspices of the WHO, there have been decades of research on VAWG. Best practices such as the survey methods and instrument for measuring the national prevalence of IPV (Ellsberg and Heise, 2005) evolved from the WHO Multi-country Study on Domestic Violence against Women (García-Moreno et al., 2005), the seminal work that preceded this landmark study and much subsequent global research. The resulting tried and tested WHO instrument was used in both Jamaica and Trinidad & Tobago, after having been reviewed and edited to suit each country's needs and unique attributes. Having been piloted in these countries, the survey methods and instrument now constitute the

¹⁶ Since the total census population for each village is not publicly delivered by the General Bureau of Statistics of Suriname, these data were provided by the Ministry of Natural Resources.

¹⁷ Two clusters of 12 households each were selected in Gujaba due to its population size, which is significantly larger than the rest of the villages in the sample.

standard Caribbean Community and Common Market (CARICOM) framework for measuring IPV and non-partner sexual violence.

The survey instrument was designed to capture women's experiences of violence in order to calculate the main prevalence indicators, related factors and attitudes, and demographic and other data related to the women who were surveyed. The CARICOM instrument was initially translated and customized for use in Suriname by the survey consultants. The electronic version of the instrument was then pretested in Dutch with a small group of women and subsequently piloted with a larger group. Both the learnings from these exercises and the suggestions of technical advisors from the Global Women's Institute were integrated into the final version of the survey. The final survey was administered in Dutch and Sranan Tongo.

The instrument captures a great deal of information and has 11 substantive sections (listed below), as well as an individual consent form that explained to the selected respondent that potentially upsetting topics, including experiences of violence, might be discussed. Further, consent was embedded throughout the instrument. As potentially upsetting sections were approached, the participant was reminded of her right to omit questions or to terminate the interview at any time.

The instrument sections were as follows:

- Section 1: Respondent and her Community
- Section 2: General Health
- Section 3: Reproductive Health
- Section 4: Children
- Section 5: Current/Most Recent Husband/Partner
- Section 6: Attitudes
- Section 7: Respondent and Her Husband/Partner
- Section 8: Injuries
- Section 9: Impact and Coping
- Section 10: Other Experiences
- Section 11: Completion of Interview (Respondent's Survey Evaluation and Recommendations)

Field Planning and Execution

Staff Recruitment and Training

All field staff underwent an extensive three-week field-training exercise designed and facilitated by the Global Women's Institute and supported by the survey consultants. The training was designed to give interviewers and supervisors a grounding in the theoretical and practical aspects of the study and to ensure that they could remain neutral and composed when faced with difficult personal stories from respondents.

Training included background material on the difference between sex and gender and an overview of VAWG, including the causes and consequences of gender-based violence and the dynamics of abuse. Field staff were also introduced to the findings of the

WHO Multi-country Study (WHO, 2013) so that they could understand how the information they gathered would be used to generate statistics and reports. The practical aspects of training covered self-care, survey methods, interviewing techniques, using a tablet for survey administration, ethical considerations, safety protocols, how to ensure privacy and confidentiality, contingency planning for interrupted interviews or difficult household members, how to provide appropriate service provider referrals, how to handle respondent trauma, and an extensive review of the survey instrument in both the paper and electronic versions. Teaching methods included lectures, open discussions, and supervised role playing in pairs and groups. Staff were also provided with copies of the interviewer or supervisor manual and a question-by-question manual explaining the interpretation of each question and all responses on the questionnaire in detail.

Data Collection

Data collection took place over 14 weeks from mid-June to mid-September 2018. All household interviews were conducted face-to-face by trained interviewers and responses recorded electronically. Fieldwork was completed in six phases so that early quantification and characterization of non-response could be used to design adequate corrective actions and implement them in the final weeks of fieldwork. The majority of the sample was resident in Metropolitan Paramaribo. There, the fieldwork strategy was to place households in groups by ethnicity and, ideally, to assign an interviewer of the same ethnicity to conduct the interviews in each group. In the more remote areas, with a lower population density and challenging terrain, the field strategy was dictated by logistics and travel schedules.

Data Preparation and Final Dataset

All household interviews were conducted using computer-assisted personal interviewing survey software and subjected to built-in consistency checks. Using programming for survey administration allows for greater data control, which largely prevents common data entry errors, such as out of range values, and guides interviewers to specific questions by following skip patterns.

Further, a central team analyzed a set of data quality indicators every three days on an interviewer basis to determine deficiencies in work uploaded and what corrective actions were required. As a result, the uploaded data were, to a large extent, error free. Despite these precautionary measures, further checks were performed in SPSS (Statistical Package for the Social Sciences) when the data file was compiled. These included retaining only complete or partially complete questionnaires that included responses pertaining to experiences of emotional, physical, and sexual violence and cross-checking data values to ensure only valid responses were recorded.

The SWHS sample design allowed for estimates at the national level, for each of the geographic domains (i.e., Great Paramaribo, the Rest of the Coast and the Interior) and for the two subdomains within Great Paramaribo (i.e., Paramaribo and Paramaribo Outskirts). It does not provide precise estimates at the district level.

Base weights were computed to account for unequal inclusion probabilities of primary sampling units in accordance with the SSLC sample design and for fixed sample

size of one woman per household. The base weights were adjusted for both household non-response and individual women non-response to produce final weights included in the SWHS dataset.

Data Analysis

The main purpose of this report is to present reliable statistics on the prevalence of IPV in Suriname. Prevalence is calculated as the proportion of women who have experienced at least one act of the respective kind of violence either at some point in their lives (lifetime prevalence) or in the 12 months prior to the survey (current prevalence).

The frequency of violence was also measured by tabulations of acts of violence experienced, categorized as once, a few times, or many times. The severity of violence was measured for physical IPV only. Acts which were perceived as more likely to cause injury were categorized as severe, others as moderate.¹⁸ While most data were presented as descriptive statistics only, cross tabulations using Chi-square tests were run on prevalence statistics and factors such as demographic characteristics to determine if there were statistically significant associations.

Study Limitations

As with any study, there are limitations to the SWHS.

Underreporting: Even though study procedures are crafted to respect privacy and protect the safety of respondents, it is expected that some IPV survivors will choose not to participate in the survey and others might not report or remember some or all of the violence they have experienced. Thus, it is almost certain that the prevalence rates calculated based on this field study will understate the extent of IPV and the other types of sexual violence described in this report.

Generalization: The prevalence rates discussed in this report are mostly national aggregates. The analysis contained hereunder must be used with caution as Suriname comprises diverse regions. Thus, while the rates are indicative, there may be great disparity in prevalence rates and the related associations at the community level.

Limited analysis: Only bivariate analysis is presented, which does not allow for determining causal relationships between variables and these should not be inferred from the data presented. In other words, two phenomena can be seen to be associated with each other, but the analysis does not determine if one happens as a result of the other or if there are other confounding variables that have better explanatory power and that have not been measured or analyzed. It can also be difficult to interpret what significant associations mean for policy and programming purposes without further analysis and possibly also further research.

¹⁸ As per WHO guidelines, all of the pre-defined acts of sexual violence were considered severe and, as such, severity for sexual partner violence is not reported separately.

Survey Response Rates and Sample Characteristics

○ Household and Individual Response Rates

Of a total of 2,094 households in the Suriname Women's Health Survey (SWHS) sample, 1,813 were eligible because the building was intact, could be found, was occupied, and was used as a dwelling unit. Table 6 shows that, among the 1,813 eligible households, 3 percent refused to take part in the survey at all. Other households were inaccessible because no one was at home (4 percent), or the household postponed the interview on three consecutive occasions (<1 percent). The questionnaire was divided into two parts: (i) a household interview that could be answered by any capable, available adult and (ii) the substantive Women's Health questionnaire, which could only be administered to an eligible woman. Overall, 91 percent of all households visited completed the household questionnaire and, of those who completed this questionnaire, 92 percent were completed in a household where an eligible woman lived.¹⁹

TABLE 6 ○ Response Rates for Households Sampled and Households Visited

Result of Visit(s)	Number of Households	(%)
Completed household interview	1,658	91.5
Interview refused	53	2.9
Absent for extended period	74	1.2
No household member at home	23	4.2
Postponed	5	0.3
Total	1,813	100.0

Source: Authors' elaboration.

¹⁹ The survey instrument consisted of a brief household questionnaire that was administered to the first available adult in the home and included the Kish Grid to randomly select an eligible woman. The SWHS questionnaire was administered only to the selected woman.

TABLE 7 ○ Response Rates for All Eligible Women and Women Completing Interviews

Result of Visit(s)	Number of Households	(%)
Individual interview completed	1,520	91.7
Selected woman refused interview	39	2.4
Selected woman not at home	62	3.7
Selected woman couldn't be alone	6	0.4
Selected woman incapacitated or postponed interview	20	1.2
Selected woman did not complete interview (partial interview)	11	0.7
Total	1,658	100.0

Source: Authors' elaboration.

From the 1,658 households with an eligible woman, 1,520 women completed the individual interview. Of selected women, 2 percent refused to participate in the survey, less than 3.7 percent were not at home at the time of the visits, and less than 1 percent began but did not want to continue the interview (Table 7).

○ Respondents' Satisfaction with Interview

Overall, most respondents found participating in the survey to be a positive experience (Table 8). At the end of the interview, when respondents were asked if they felt better, the same, or worse, almost all women (98 percent) either said they felt better or the same. About 2 percent of all participants reported that they felt bad or worse after the interview.

○ Key Sample Characteristics

Table 9 and the rest of this section provide a demographic overview of the sample of study respondents, including the extent to which the sample compares to the national population of women.²⁰

TABLE 8 ○ Respondents' Feelings After Completing Interview

Post-interview Feelings	Number of Respondents	(%)
Good/better	1,070	70.1
Same/no difference	426	27.9
Bad/worse	27	1.8
No response	4	0.3
Total	1,527	100.0

Source: Authors' elaboration.

²⁰ Statistics obtained from the 2012 census data as provided by the General Bureau of Statistics Suriname for females ages 15-64.

A comparison of the age distribution of the sample data with the national data showed that the representation of participants who were between 25 and 44 years was similar to the national community; however, there was under-representation of younger women and over-representation of older women (Table 9).

TABLE 9 ○ Characteristics of Respondents

	Ever-Partnered		All Respondents	
	%	Number	%	Number
Respondent Age				
Total	100	1,376	100	1,527
15–19	6.3	87	12.7	194
20–24	9.9	136	10.1	155
25–29	11.8	162	11.1	170
30–34	11.6	160	10.8	165
35–39	12.6	174	11.6	178
40–44	9.5	131	8.6	131
45–49	12.1	166	11	168
50–54	9.8	135	8.9	136
55–59	9.3	127	8.5	130
60–64	7.1	98	6.5	99
Area				
Paramaribo	42.7	588	42.2	645
Paramaribo Outskirts	32.8	452	33.1	505
Rest of Coast and Interior	24.5	337	24.7	377
Religion				
None	5.7	79	5.5	83
Roman Catholic	20.6	284	19.3	295
Full Gospel (Christian)	16.3	224	16.9	258
Evangelic Brother Community (Christian)	10.0	138	9.5	144
Hindu	24.3	335	25.7	393
Islam	15.8	217	16.1	246
Ethnicity				
Creole/African	14.5	198	13.7	209
Hindustani	28.6	392	30.3	462
Maroon/Boslandcreool	17.8	244	17.4	264
Javanese	18.5	254	18.2	277
Mixed	17.0	233	16.8	256
Other	3.7	51	3.6	55
Educational Attainment				
No education/primary only	20.2	279	19.1	292
Secondary	64.4	887	66.1	1,009
Higher	15.3	211	14.8	226

(continued on next page)

TABLE 9 ○ Characteristics of Respondents (continued)

	Ever-Partnered		All Respondents	
	%	Number	%	Number
Current Partnership Status				
Never partnered			9.8	148
Currently married	38.6	529	34.9	529
Living with man, not married	23.1	316	20.8	316
Regular partner, living apart	16.2	222	14.6	222
Currently no partner	22.1	302	19.9	302
Ever-Pregnant				
No	18.4	252	26	396
Yes	81.6	1,122	74	1,129
District				
Commewijne	7	96	6.9	105
Coronie	0.5	8	0.5	8
Marowijne	1.8	24	1.6	24
Nickerie	6.5	90	7.1	109
Para	1.2	16	1.3	19
Paramaribo	43.9	604	43.5	664
Saramacca	6.3	87	6.7	103
Sipaliwinicluste	3.9	53	3.6	56
Wanica	28.9	397	28.8	439
Main Activities During Past Week				
Employed in a public or private corporation	50.2	691	46	703
Self-employed	3.6	49	3.4	52
Housework/work as unpaid family member	26	358	23.8	364
Unemployed	17.5	240	24.2	369
Out of the labor force	2.7	38	2.5	39
Main Source of Income				
Income from own work	27.2	374	25.1	383
Support from partner/husband	25	344	22.5	344
Equal share self and partner	20.5	282	18.5	282
Support from relatives/friends	13.2	182	17	260
No income, pension, social services, other	14.2	195	16.9	258
Ever-Married				
No	18.4	252	26	396
Yes	81.6	1,122	74	1,129

Source: Authors' elaboration.

Most respondents reported having a religious affiliation, with most falling under the umbrella of the Christian faith. Among all respondents, 19 percent identified as Roman Catholic, 17 percent as Full Gospel, 10 percent as Evangelical, 26 percent as Hindu, and 16 percent as Muslim. The remaining 6 percent of the sample reported having no religion. The distribution of religious affiliation in the corresponding segment of the general population was similar to the sample.

The following was the ethnic mix of study interviewees compared to the distribution of women in the general population (in parentheses): Hindustani, 29 percent (27 percent); Javanese, 19 percent, and mixed, 17 percent (Javanese and mixed combined, 13 percent); Maroon/Boslandcreool, 18 percent (23 percent); Creole/African, 15 percent (17 percent); and other backgrounds, 4 percent (7 percent).

The majority of women in the study (82 percent) reported having been married at some point, while the other 18 percent stated that they had never been married. This compares to Suriname's national statistics, which show that 30 percent of the female population are married, while 56 percent are not married.²¹ The national statistics also show that 7 percent of women are widows and 5 percent are separated; the remaining 4 percent are marked as unknown.

²¹ Women's current marital status was used as a proxy for "Ever-Married" because this information was not readily available.

Results

○ Violence Against Women and Girls by Their Male Partners

This section presents results of the study regarding the current and lifetime prevalence of physical and sexual violence against women by one or more of their male partners. Specifically, the results presented in this chapter correspond to ever-partnered women only, as only ever-partnered women²² were asked about intimate partner violence (IPV). It is important to note that *lifetime* IPV prevalence is defined as the proportion of ever-partnered women who reported that they had experienced one or more defined acts of violence by a current or former partner at least once in their lifetime. *Current* IPV prevalence is the proportion of ever-partnered women reporting at least one act of violence during the 12 months preceding the interview. By definition, current IPV prevalence is a subset of lifetime IPV prevalence. In this chapter, lifetime and current prevalence are reported for physical, sexual, emotional, and economic IPV. For some analyses, it is useful to consider physical and sexual violence in combination; therefore, the prevalence of physical and/or sexual violence is also presented.

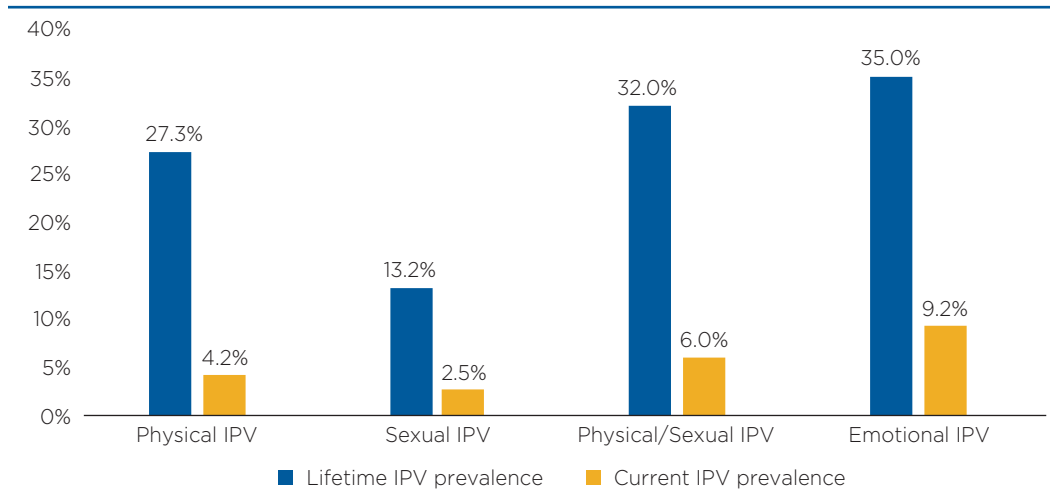
Intimate Partner Violence

Prevalence

Of ever-partnered women interviewed, 32 percent reported having experienced at least one act of physical and/or sexual IPV in their lifetime and 6 percent reported at least one act specifically during the 12 months prior to the survey (Figure 3). Among these women, physical IPV was more common than sexual (27 percent vs. 13 percent). Emotional violence, the use of language as a tool of abuse or aggression, was the most common dimension of IPV. It is important to note that, while these dimensions are presented separately in the analysis that

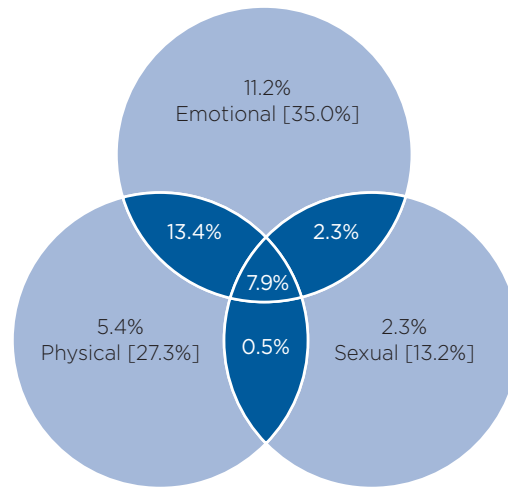
²² The study uses the term ever-partnered, rather than ever-married, because it includes women who are currently or were married, cohabiting with, or dating a male partner without being married.

FIGURE 3 ○ Lifetime and Current Prevalence of Physical, Sexual, Physical and/or Sexual, and Emotional IPV



Source: Authors' elaboration.

FIGURE 4 ○ Overlap Between Sexual, Physical, and Emotional IPV



Source: Authors' elaboration.

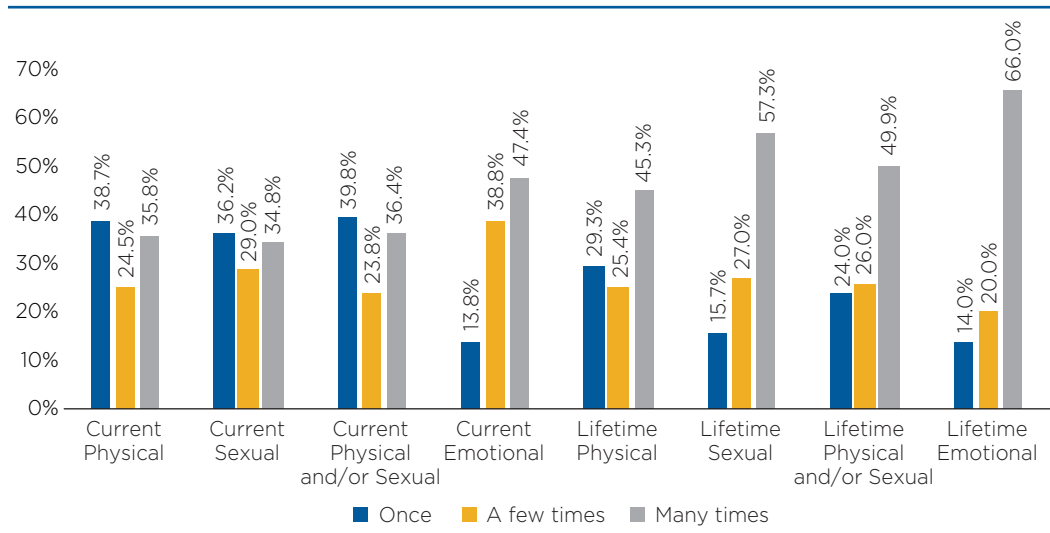
Note: Figures in brackets indicate the total percentage of ever-partnered women who have experienced a given type of violence, whether in conjunction with other types of violence or alone. Figures in red represent the percentage of women who have experienced only one specific type of violence. The figures presented in the overlapping circles represent the percentage of women who have experienced two or more types of violence.

follows, some women experience multiple forms of IPV. For example, Figure 4 shows that 8 percent of ever-partnered women have experienced all three forms of violence.

Frequency

Women who reported that they had experienced IPV were also asked to quantify how often the individual acts of violence had happened. To calculate the frequency of each

FIGURE 5 ○ Lifetime Frequency of Physical, Sexual, Physical and/or Sexual, and Emotional IPV



Source: Authors' elaboration.

type of IPV, a score was created for each respondent, summarizing whether she had experienced a particular act of violence once, a few times, or many times, both over the past 12 months and over her lifetime. The data suggest that for survivors, IPV is rarely a one-off event. Regardless of the type of IPV, most survivors reported experiencing IPV many times in their lifetime (at least 45 percent), as opposed to a few times or one time.

Physical Intimate Partner Violence

Prevalence

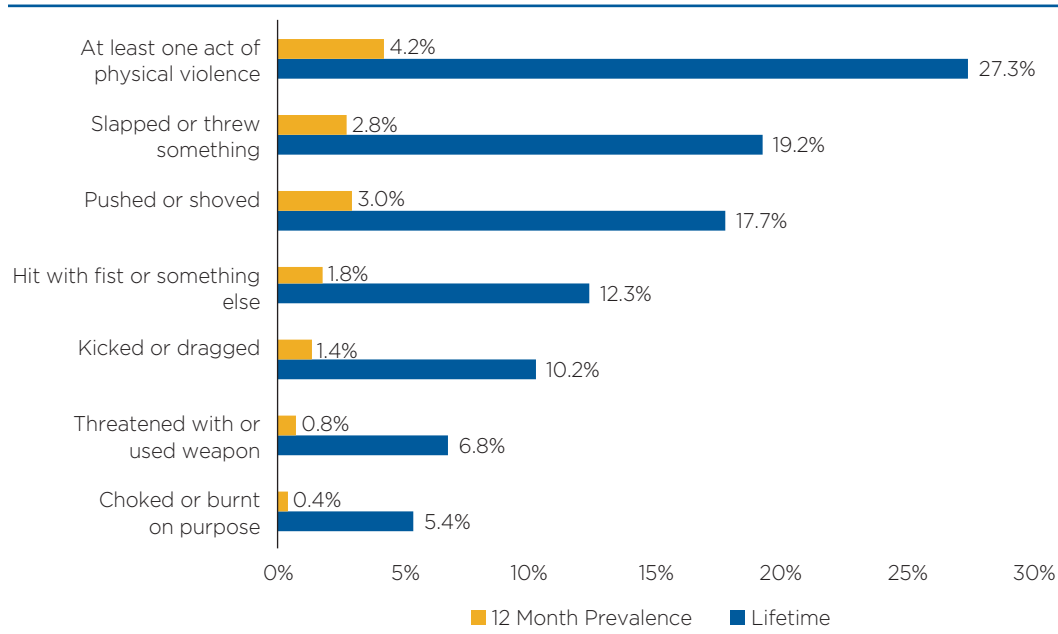
The lifetime prevalence of physical IPV was 27 percent (current, 4 percent). The most common acts of physical IPV that women reported, whether lifetime or current, were being slapped or having something thrown at them (19 percent) and being pushed or shoved (17 percent). The least common, though most severe, acts of violence were being threatened with a weapon or having a weapon used against them (7 percent) and being choked or burnt on purpose (5 percent). All acts of physical violence are presented in Figure 6.

Severity

The acts of lifetime physical IPV among ever-partnered women in Suriname were recorded and categorized for analysis according to severity: moderate only, moderate and severe, and severe only.²³ Overall, most women who reported lifetime physical IPV reported that it was severe at least once (61 percent) (Figure 7).

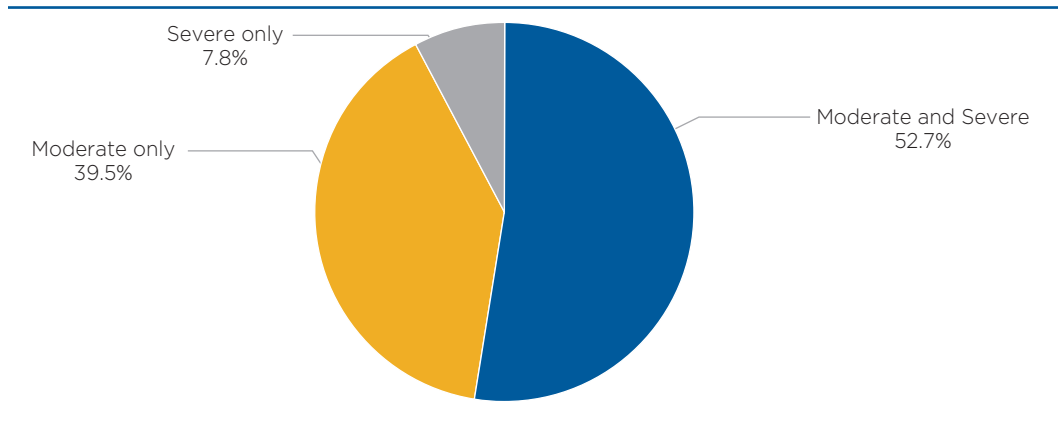
²³ Moderate physical violence includes slapping or throwing something that could hurt, and pushing or shoving. Severe physical violence includes being hit with a fist or something else, being kicked or beaten up, being choked or burned, and being threatened with a gun, knife, or other weapon.

FIGURE 6 ○ Lifetime and Current Prevalence of Acts of Physical IPV



Source: Authors' elaboration.

FIGURE 7 ○ Severity of Lifetime Physical IPV

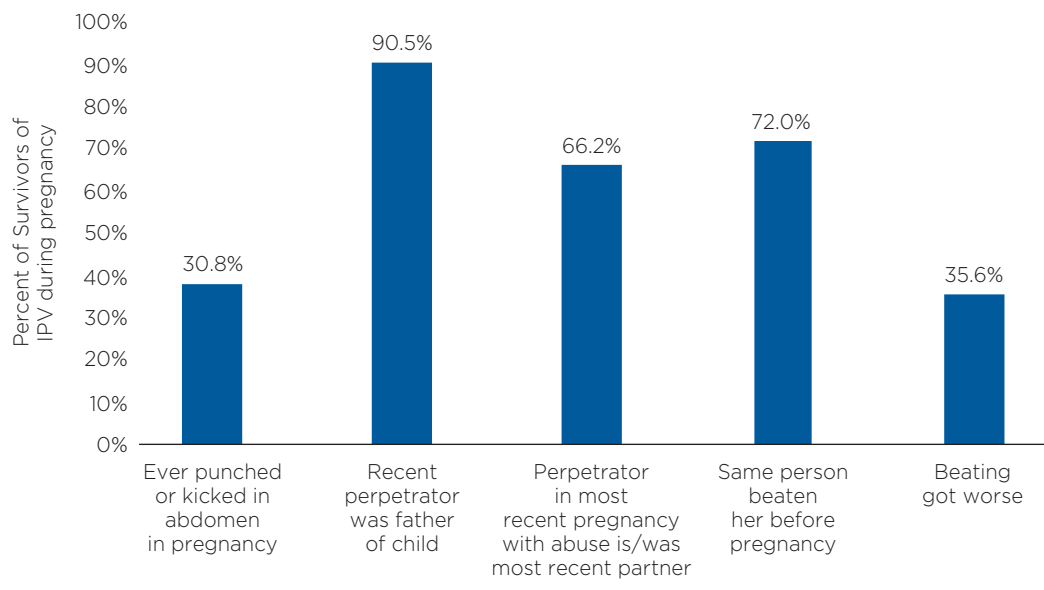


Source: Authors' elaboration.

Physical Violence in Pregnancy

Of women who had been pregnant at least once, 6 percent reported experiencing physical violence during at least one pregnancy. Of these women, 36 percent reported that the violence worsened during pregnancy and 38 percent reported having been punched or kicked in the abdomen while pregnant. Women were also asked specifically about their most recent incident of violence during pregnancy. In these instances, 91 percent of the perpetrators were the fathers of the unborn child, 72 percent had been violent with their partners before that pregnancy, and 66 percent were either the current or most recent partner of the woman reporting the violence (Figure 8).

FIGURE 8 ○ Characteristics of Physical IPV During Pregnancy

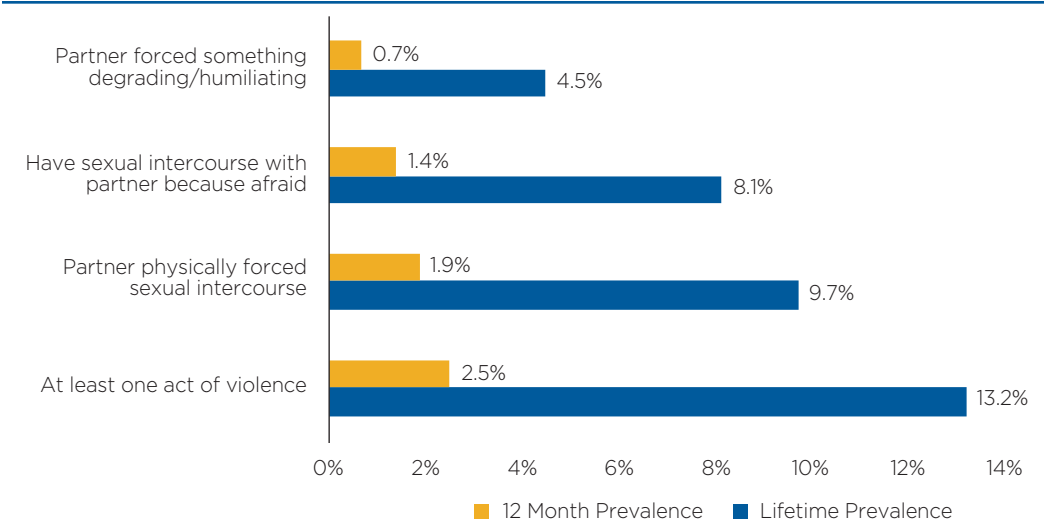


Source: Authors' elaboration.

Sexual Intimate Partner Violence

The prevalence of sexual IPV is the proportion of ever-partnered women who have experienced at least one pre-defined act of sexual violence perpetrated by their partner. Of the ever-partnered women interviewed, 13 percent had experienced lifetime sexual IPV and 3 percent reported current sexual IPV. Respondents most commonly reported being forced to do something sexual which was degrading or humiliating (lifetime, 10 percent; current, 2 percent). Less common acts of sexual IPV included having unwanted sexual

FIGURE 9 ○ Lifetime and Current Prevalence of Acts of Sexual IPV



Source: Authors' elaboration.

intercourse because of fear of what their partner might do if refused (lifetime, 8 percent; current, 1 percent) and being physically forced into sexual intercourse (lifetime, 4 percent; current, 1 percent) (Figure 9).

Physical and/or Sexual Intimate Partner Violence

Of ever-partnered women in Suriname, 32 percent experienced physical and/or sexual partner violence at least once in their lifetime and about 6 percent in the previous 12 months.

Emotional Intimate Partner Violence

The prevalence of lifetime emotional IPV was 35 percent, while the current prevalence was 9 percent. The most common acts of emotional IPV were being insulted by a partner or made to feel bad about herself (lifetime, 26 percent; current, 8 percent) and being scared or intimidated on purpose (lifetime, 18 percent; current, 5 percent) (Figure 10).

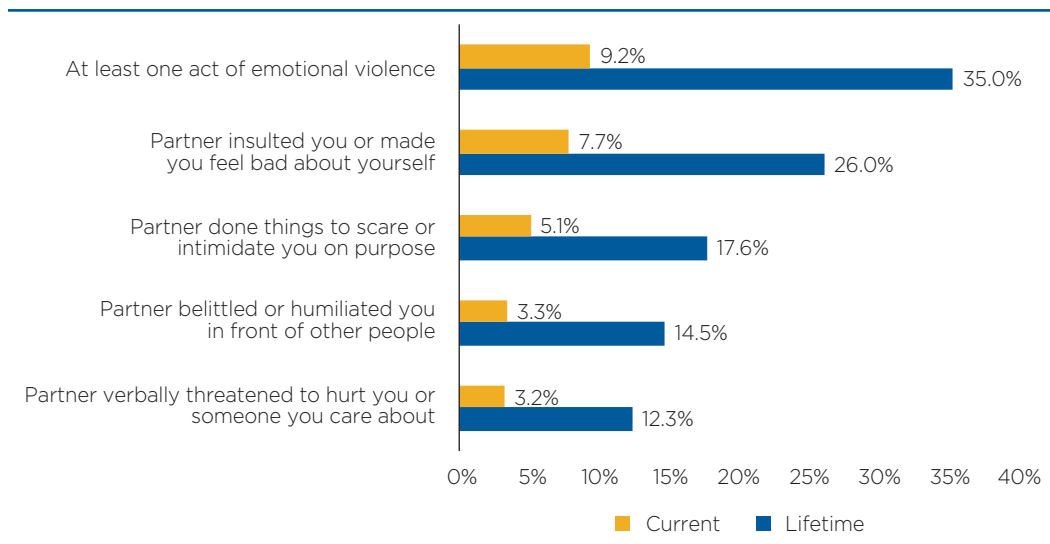
Economic Intimate Partner Violence

Overall, 16 percent of ever-partnered women indicated that they experienced economic abuse from partners in their lifetime. Economic IPV is defined as the experience of at least one of three pre-defined acts: partner prohibiting them from earning money (11 percent), partner refusing to give them money for household expenses regardless of money being available for other things (6 percent), and partners taking their earnings or savings against their will (3 percent).

Summary

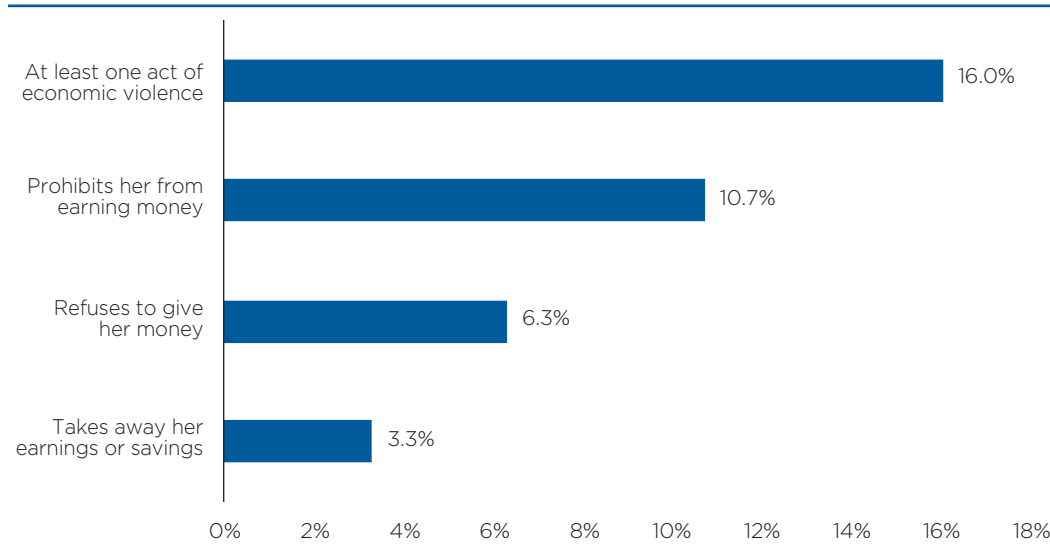
These results imply that in the 15–64 age bracket, approximately 50,000 women in Suriname are estimated to have experienced one act or more of physical and/or sexual violence perpetrated by their male partners. Of these women, over 9,000 women are

FIGURE 10 ○ Lifetime and Current Prevalence of Acts of Emotional IPV



Source: Authors' elaboration.

FIGURE 11 ○ Lifetime Prevalence of Acts of Economic IPV



Source: Authors' elaboration.

likely to still be in an abusive relationship.²⁴ These statistics paint a picture of violence similar to the global finding by the WHO that 30 percent of women who have been in a relationship report these forms of IPV (WHO, nd). In other words, nationally and worldwide, almost one in three women are either physically or sexually abused at some point in their lives, not by strangers, but by their own male intimate partners. Further, just over 7 percent of ever-partnered women have experienced severe physical IPV and most survivors report experiencing acts of violence many times. The direct impact of violence may be further compounded for women if they experience pregnancy. In such cases, IPV either remains just as prevalent or becomes worse than prior to pregnancy. Such violence may account for maternal mortality, although this association is often unrecognized by policymakers (WHO, 2012). Women are also exposed to emotional (also known as psychological) and economic abuse and control by their partners, emotional being the most common form of IPV. Further analysis of controlling behaviors is discussed below under *Gender Dynamics and Associated Factors*. Taken together, these results concretely demonstrate the widespread vulnerability of Surinamese women to IPV.

○ Associated Factors and Triggers

This section presents and discusses the prevalence of lifetime and current physical and/or sexual IPV and statistically significant associations with demographic factors such as age, religion, and education.²⁵ Triggers of violence, as perceived by survivors, are also presented. The interpretation of the associations between lifetime prevalence of IPV and the

²⁴ Estimates calculated based on 2011 census population statistics for women aged 15 to 64.

²⁵ Only significant ($p < 0.05$) associations are reported.

current sociodemographic characteristics of women and men has some challenges. Since we do not know when the violence occurred and whether those sociodemographic characteristics (some of them at least) were the same at the time those violent acts occurred, the interpretation of the associations is difficult and can be misleading.

Physical Violence

Lifetime

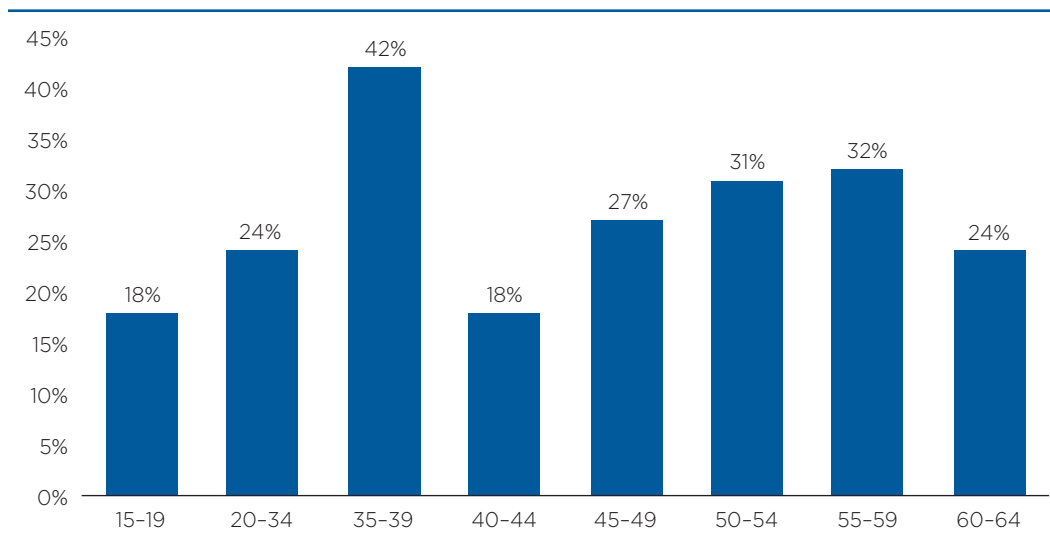
Age: The prevalence of lifetime physical IPV was highest among ever-partnered women 35–39 years old (42 percent) and lowest among ever-partnered women 15–19 (18 percent) and 40–44 (18 percent) (Figure 12).

Religion: Over one-third of women who identified as Roman Catholic reported lifetime physical IPV, 18 percent of women who stated they followed Islam (the lowest), and about one in four women of other religious faiths.

Ethnicity: Experience of lifetime physical IPV was higher among women who described themselves as Creole/African (34 percent) than women of any other ethnic group (mixed, 30 percent; Hindustani, 28 percent; Maroon/Boslandcreool, 26 percent; and Javanese, 20 percent). Over 20 percent of women who described themselves as “other” indicated that they experienced physical violence over their lifetime.

Relationship: The prevalence of physical IPV was higher among women who were living with their partner but not married (38 percent) than among women who were currently married (18 percent) or among women who were currently partnered but not living together (27 percent). Of women who currently did not have a partner, 34 percent

FIGURE 12 ○ Lifetime Prevalence of Physical IPV by Age



Source: Authors' elaboration.

reported having experienced physical IPV in their lifetime. Over 30 percent of women who were never married reported lifetime physical IPV compared to 22 percent of women who were married at least once before.

Among women who reported lifetime physical IPV, those who were married or lived with a partner at a young age (18 years or younger) had higher prevalence (32 percent) than those whose first union was at 19 years old or older (18 percent).

The prevalence of lifetime physical IPV was much higher among those women who were involved in non-consensual marriages (43 percent) than those in consensual marriages (21 percent). It should be noted, however, that marriage is not a deterrent of this type of violence.

Pregnancy: Experience of lifetime physical IPV among women who were ever pregnant (30 percent) was much higher than that of women who were never pregnant (20 percent).

Income: Women who stated that their main source of income was from their own work were much more likely to experience lifetime physical IPV (35 percent) than women who had no source of income (31 percent), whose main source of income was equally between partner and self (25 percent), was relatives and friends (23 percent), or was their partner/husband (22 percent).

Employment: Consistent with the above finding, women who were employed were more likely to have reported lifetime physical IPV (32 percent) than women who were unemployed (20 percent) and women out of the labor force (28 percent).

Current

Age: The prevalence of current physical IPV was higher among younger women in five-year age groups (20–24, 8 percent; 25–29, 9 percent) with prevalence declining for women aged 30 to 44 years (4–5 percent). For women 45 years or older, the prevalence of current physical IPV was estimated to be as low as 1 percent.

Relationship: As with lifetime physical IPV, among women who reported current physical IPV, those who lived with a partner but were not married had a higher prevalence (8 percent) than those who were currently married (3 percent) or had a regular partner but lived apart (4 percent).

Women who were never married experienced current physical IPV (6 percent) more than women who were married at least once (2 percent).

Sexual Violence

Lifetime

Lifetime sexual IPV was higher among women who indicated that their marriage was non-consensual (38 percent) than those whose marriage was consensual (10 percent).

The prevalence of lifetime sexual IPV was higher among women who were not currently partnered (17 percent) than women who were living with a man but not married

(16 percent) and women who had a regular partner but they were not living together (13 percent). Less than 10 percent of women who were currently married reported having experienced sexual violence over their lifetime. The caveat about comparing current partnership status to a lifetime prevalence rate also holds in this case. While the association is statistically significant, it is difficult to discern what the association may imply.

Current

When observed across age groups, the prevalence of current sexual IPV was higher among younger ever-partnered women in age groups between 15 years and 24 years (6–7 percent) than among women in age groups between 25 years and 59 years (1–3 percent). The prevalence of current sexual IPV among women aged 60 to 64 years was none.

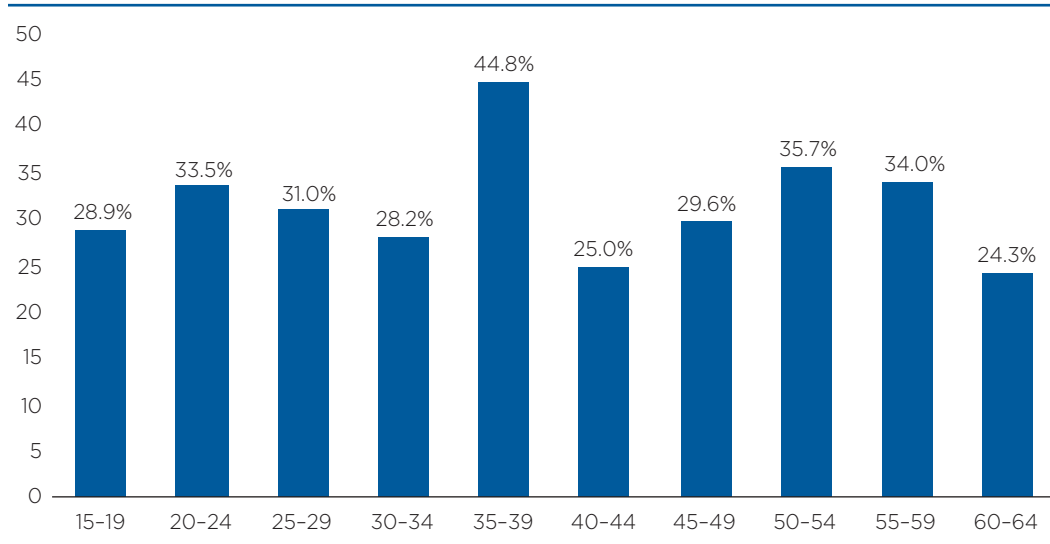
Women who had a secondary school (3 percent) or lower education (2 percent) experienced a higher prevalence of current sexual IPV than women who had a higher level of education (0 percent).

Physical and/or Sexual Violence

Age: When observed across age groups, the prevalence of lifetime physical and/or sexual IPV was highest among women 35 to 39 and lowest among women 60 to 64 years of age (Figure 13).

Ethnicity: The prevalence of lifetime physical and/or sexual IPV was higher among women who described themselves as Creole/African (40 percent) or Maroon/Boslandcreool (35 percent) than women who described themselves as mixed (33 percent) or as Hindustani (31 percent). Less than 30 percent of women who described themselves as either Javanese or other experienced physical and/or sexual IPV in their lifetime.

FIGURE 13 ○ Lifetime Prevalence of Physical and/or Sexual IPV by Age



Source: Authors' elaboration.

Relationship: Women who were partnered but not married had a higher prevalence (42 percent) of lifetime physical and/or sexual violence than women who were currently married (21 percent) or women who had a regular partner but were living apart (34 percent). Incidentally, lifetime physical and/or sexual IPV was found to be high among women who currently had no partner (41 percent).

Almost 38 percent of ever-partnered women who were never married reported that they had experienced physical and/or sexual IPV in their lifetime compared to 25 percent of those who had been married at least once.

Women who were married or lived with a partner at age 18 or younger had a higher prevalence of lifetime physical and/or sexual IPV (35 percent) than women who were married or lived with a partner at age 19 or older (22 percent). Given that women who are entered into arranged marriages are usually young, it is not surprising that there was a higher prevalence among younger women who were in non-consensual marriages (48 percent). Of women who consented to their marriage, 24 percent experienced lifetime physical and/or sexual IPV.

Pregnancy: The prevalence of lifetime physical and/or sexual IPV was found to be higher among women who were ever pregnant (33 percent) than women who had never been pregnant (27 percent).

Income: Among women who reported lifetime physical and/or sexual IPV, the prevalence was higher among women whose main source of income was their own work (40 percent) or had no income (37 percent).

Childhood Experience of Violence

For the purposes of this study, both violence witnessed and violence experienced as a child are considered the childhood experience of violence. Specifically, the experiences in question were:

- the respondent as a child witnessing her mother being hit by her mother's partner;
- the respondent as a child receiving beating(s) that left a mark or bruise;
- the respondent as a child being insulted or humiliated by a family member in front of others.

There is a statistically significant relationship between experiencing physical and/or sexual IPV and having a violent childhood. Among women who were survivors of both physical and/or sexual IPV, 39 percent had witnessed IPV against their mothers when they were children compared to just over 16 percent women who did not experience physical and/or sexual IPV. Further, survivors were much more likely to have been hit (34 percent) or publicly insulted (26 percent) in their childhood than women who had never experienced physical and/or sexual IPV (9 percent and 10 percent, respectively).

The severity of physical IPV that women experience is also significantly associated with childhood violence. The more severe the lifetime physical IPV experienced by a

TABLE 10 Summary of Factors Significantly Associated with Physical, Sexual, and Physical and/or Sexual IPV

Significant Factors	Physical IPV	Sexual IPV	Physical and/or Sexual IPV
Educational attainment	—	<i>Current</i> Primary only = 2.3% Secondary = 3.2% Higher = 0.0% p-value = 0.027	<i>Current</i> Primary only = 4.5% Secondary = 7.4% Higher = 2.1% p-value = 0.012
Current partnership	<i>Current</i> Married = 2.7% Living with man = 7.7% Regular partner = 4.4% No partner = 3.0% p-value = 0.004 <i>Lifetime</i> Married = 18.1% Living with man = 37.8% Regular partner = 26.5% No partner = 33.8% p-value = 0.000	<i>Lifetime</i> Married = 9.8% Living with man = 15.8% Regular partner = 13.2% No partner = 16.6% p-value = 0.018	<i>Current</i> Married = 3.6% Living with man = 9.8% Regular partner = 7.9% No partner = 5.1% p-value = 0.002 <i>Lifetime</i> Married = 20.9% Living with man = 41.6% Regular partner = 34.1% No partner = 40.7% p-value = 0.000
Age	<i>Current</i> 15–19 = 4.7% 20–24 = 8.0% 25–29 = 9.4% 30–34 = 4.4% 35–39 = 3.8% 40–44 = 4.6% 45–49 = 1.1% 50–54 = 1.1% 55–59 = 1.9% 60–64 = 1.8% p-value = 0.001 <i>Lifetime</i> 15–19 = 17.8% 20–24 = 24.8% 25–29 = 24.7% 30–34 = 24.4% 35–39 = 42.1% 40–44 = 17.9% 45–49 = 27.2% 50–54 = 31.3% 55–59 = 31.8% 60–64 = 24.3% p-value = 0.000	<i>Current</i> 15–19 = 6.4% 20–24 = 7.0% 25–29 = 2.8% 30–34 = 2.9% 35–39 = 0.6% 40–44 = 1.0% 45–49 = 2.1% 50–54 = 1.4% 55–59 = 2.1% 60–64 = 0.0% p-value = 0.06	<i>Current</i> 15–19 = 11.1% 20–24 = 13.8% 25–29 = 11.6% 30–34 = 7.0% 35–39 = 3.8% 40–44 = 5.1% 45–49 = 2.1% 50–54 = 1.4% 55–59 = 3.2% 60–64 = 1.8% p-value = 0.00 <i>Lifetime</i> 15–19 = 28.8% 20–24 = 33.5% 25–29 = 31.0% 30–34 = 28.2% 35–39 = 44.8% 40–44 = 25.0% 45–49 = 29.6% 50–54 = 35.7% 55–59 = 34.0% 60–64 = 24.3% p-value = 0.010
Ethnicity	<i>Lifetime</i> African = 34.0% Hindustani = 27.6% Maroon/Boslandcreool = 26.1% Javanese = 19.6% Mixed = 30.4% Other = 22.8% p-value = 0.020	—	<i>Lifetime</i> African = 39.9% Hindustani = 31.3% Maroon/Boslandcreool = 34.6% Javanese = 23.2% Mixed = 33.1% Other = 27.9% p-value = 0.007

(continued on next page)

TABLE 10 ○ Summary of Factors Significantly Associated with Physical, Sexual, and Physical and/or Sexual IPV (*continued*)

Significant Factors	Physical IPV	Sexual IPV	Physical and/or Sexual IPV
Pregnancy	<i>Lifetime</i> No = 16.6% Yes = 29.8% p-value = 0.000	—	<i>Lifetime</i> No = 26.7% Yes = 33.3% p-value = 0.038
Age at first union	<i>Lifetime</i> 19 or older = 18.1% 18 or younger = 32.3% p-value = 0.00	—	<i>Lifetime</i> 19 or older = 21.5% 18 or younger = 34.8% p-value = 0.001
Main source of income	<i>Lifetime</i> Own work = 35.2% Husband/partner = 21.7% Self/partner equal = 24.5% Relatives/friends = 22.5% None/pension/social services = 30.8% p-value = 0.000	—	<i>Current</i> Own work = 6.6% Husband/partner = 5.5% Self/partner equal = 3.3% Relatives/friends = 5.3% None/pension/social services = 10.5% p-value = 0.017 <i>Lifetime</i> Own work = 40.0% Husband/partner = 25.5% Self/partner equal = 26.8% Relatives/friends = 31.1% None/pension/social services = 36.8% p-value = 0.000
Non-consensual marriage	<i>Lifetime</i> No* = 20.6% Yes* = 42.7% p-value = 0.001	<i>Lifetime</i> No = 10.1% Yes = 38.2% p-value = 0.000	<i>Lifetime</i> No = 23.7% Yes = 48.2% p-value = 0.001
Religion	<i>Lifetime</i> None = 28.0% Roman Catholic = 34.4% Full Gospel = 25.0% Evangelic Brother Community = 27.3% Hindu = 28.9% Muslim = 18.2% Other = 27.0% p-value = 0.009	—	<i>Current</i> None = 2.7% Roman Catholic = 8.0% Full Gospel = 10.3% EBG = 3.0% Hindu = 5.5% Islam = 4.2% Other = 3.6% p-value = 0.016 <i>Lifetime</i> None = 31.5% Roman Catholic = 40.1% Full Gospel = 33.0% EBG = 30.7% Hindu = 32.8% Islam = 19.8% Other = 33.7% p-value = 0.001

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TABLE 10 Summary of Factors Significantly Associated with Physical, Sexual, and Physical and/or Sexual IPV (*continued*)

Significant Factors	Physical IPV	Sexual IPV	Physical and/or Sexual IPV
Ever-married	<i>Current</i> No = 5.8% Yes = 2.2% p-value = 0.001	—	<i>Current</i> No = 8.3% Yes = 3.4% p-value = 0.000
	<i>Lifetime</i> No = 31.9% Yes = 22.0% p-value = 0.000		<i>Lifetime</i> No = 37.9% Yes = 25.2% p-value = 0.000
Main activities in past week	<i>Lifetime</i> Employed in a public/private corporation = 31.9% Self-employed = 26.2% Housework/work as unpaid family member = 25.2% Unemployed = 17.7% Out of labor force = 27.7% p-value = 0.001	—	—

Source: Authors' elaboration.

Note: Using Pearson Chi-Square tests.

* No means the marriage was consensual; yes means the marriage was non-consensual.

woman, the greater the likelihood that she experienced violence at home as a child. Of the women whose mother was hit by her own partner, 17 percent reported that they did not experience any physical IPV, 29 percent experienced moderate IPV, and 33 percent reported severe IPV (Figure 14). This trend was similar for women who were hit as a child (none, 9 percent; moderate, 18 percent; severe, 27 percent) or humiliated (none, 11 percent; moderate, 17 percent; severe, 23 percent).

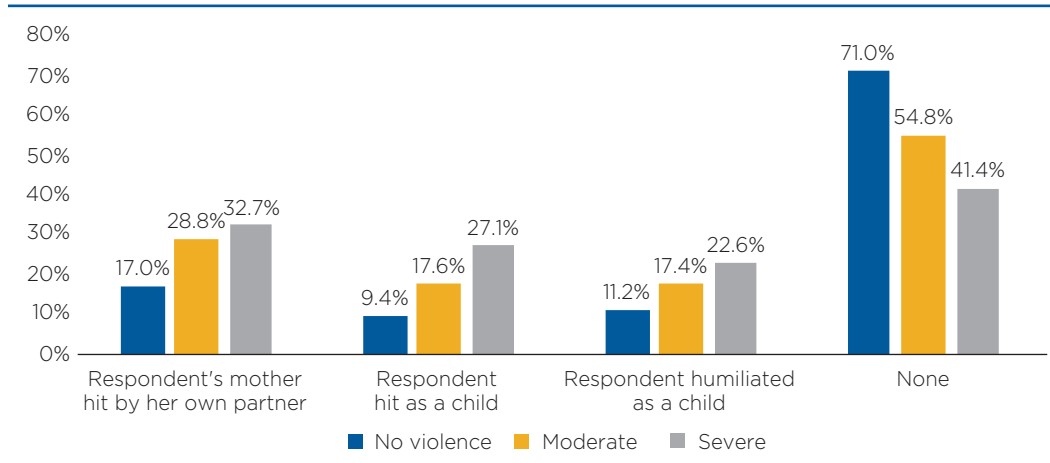
Partner Characteristics

In this study, women were asked to provide information about their partner's age, education, employment status, alcohol and drug use, relationship history, and whether their partner has had children with another woman. These partner characteristics were paired with IPV reports to ascertain whether there were significant associations.

Results indicated that women whose partner's age ranged between 35 and 44 years experienced a higher prevalence of lifetime physical and/or sexual IPV (35 percent) than all other age brackets. However, women whose partner fell within the 15–24 age group experienced a higher prevalence of current physical and/or sexual IPV (16 percent).

The prevalence of physical and/or sexual IPV was significantly higher among women whose partners were unemployed (lifetime, 46 percent; current, 28 percent). Of women whose partners were employed, 29 percent experienced lifetime and 6 percent experience current physical and/or sexual IPV. Significantly, the prevalence of lifetime physical and/or sexual IPV was higher for women who were older than their partner (42 percent).

FIGURE 14 ○ Severity of Physical IPV by Childhood Experience of Violence



Source: Authors' elaboration.

Women whose partners consumed alcohol at least once a week experienced lower prevalence of physical and/or sexual IPV (lifetime, 50 percent; current, 13 percent) than those whose partners used recreational drugs at least once a week (lifetime, 78 percent; current, 19 percent).

Women whose partners had had another relationship while in a relationship with her experienced a higher prevalence of physical and/or sexual IPV (lifetime, 51 percent; current, 12 percent) than women whose partners had never been in another relationship while in a relationship with her (lifetime, 26 percent; current, 4 percent). Conversely, the prevalence was higher for women who reported that their partner did not have children with another women (58 percent) compared to those whose partner did have a child with another woman (40 percent).

Perceived Triggers

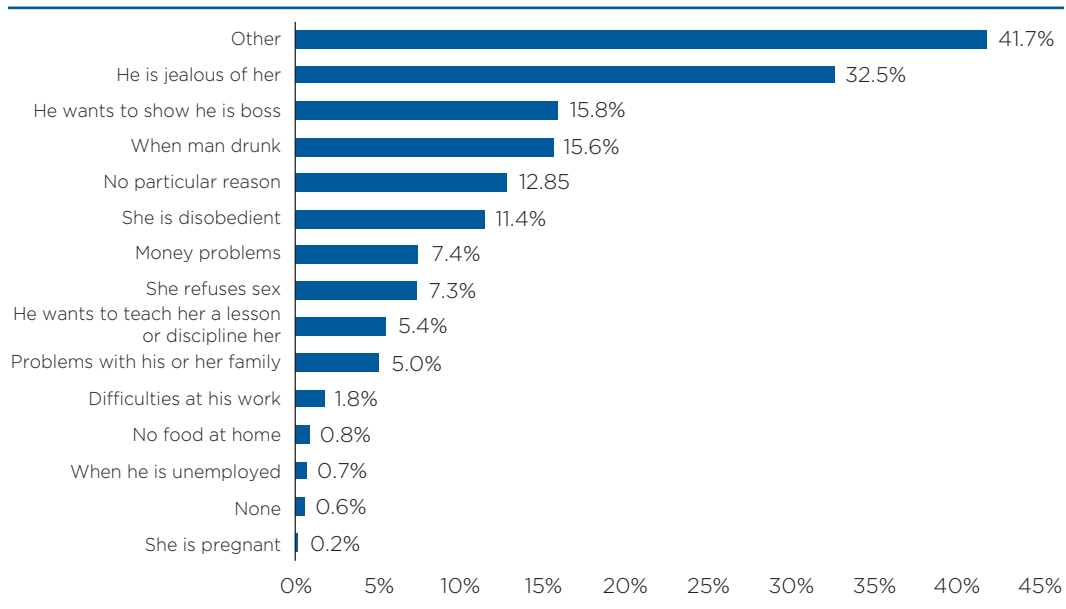
Women who reported experiencing physical IPV in their lifetime were asked to identify the cause of the incident(s). The majority of women stated that some factor other than those specified in the survey triggered her partner's violent behavior(s) (42 percent). Other common reasons included that he was jealous of her (33 percent), he wanted to show he was boss (16 percent), and when he was drunk (16 percent) (Figure 15).

Summary

Study results showed that there was a significant relationship between lifetime IPV and factors such as age, religion, marital status, source of income, and age at first union. Significantly, women who lived with a man but were not married and women who were never married both faced a higher prevalence of lifetime IPV. On the other hand, only factors such as age, current partnership status, and marital status were found to have a significant relationship with current IPV.

Survivors' responses indicated that perpetrators seemed to be more likely to commit IPV between the ages of 25 and 44 years. A significant number of women who reported

FIGURE 15 ○ Triggers of Physical IPV



Source: Authors' elaboration.

physical and/or sexual IPV stated that their partner was unemployed. It should also be noted that in many cases, the woman was older than her partner. Finally, many of the ascribed triggers paint a disturbing picture. From the view of their female partners, men who perpetrate violence are often fueled by the need to assert their power over their partners, by their inebriation, or by their despondency over personal money or household money problems. Some of the triggers may be related to men's perception of masculinity. However, it is worthy of further examination that most respondents reported that perpetrators were triggered to violence by "other" factors.

○ Gender Dynamics and Associated Factors

This section uses standard scales to determine respondents' perceptions of gender roles and norms and the associations, if any, with IPV. These include scales on gender roles, normalization of violence, and the justification for violence (presented to all women), as well as the controlling behaviors of partners (only applicable to ever-partnered women). Only results for statistically significant associations (i.e., $p < 0.05$) are presented.

Gender Attitudes

To examine women's perceptions of specific gender roles, all respondents were presented with statements regarding a woman's role as it related to her husband, family, home, and finances. Respondents were asked if they agreed with the following statements:

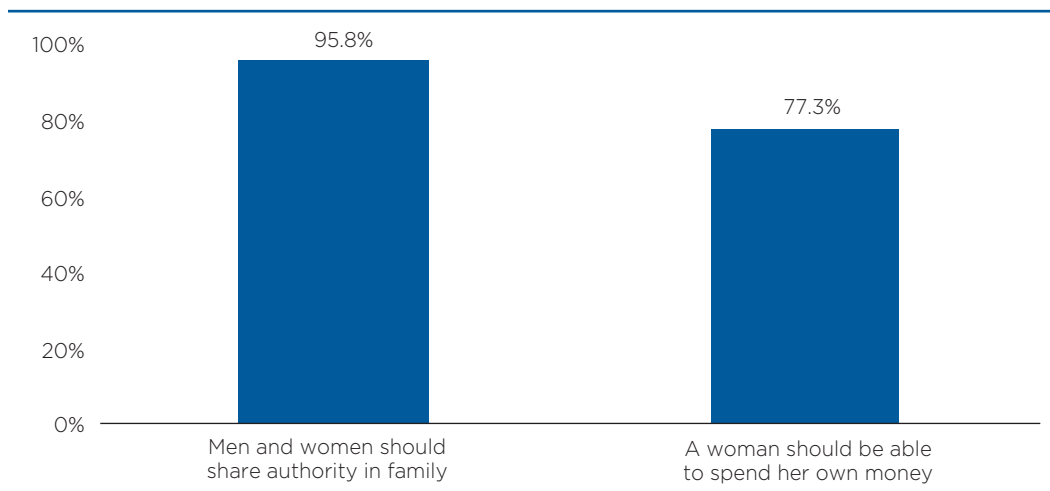
- Women and men should share authority in the family.
- A woman should be able to spend her own money according to her own will.

- It is natural that men should be the head of the family.
- A woman’s most important role is to take care of her home and cook for her family.
- A wife should obey her husband even if she disagrees.
- It is a wife’s obligation to have sex with her husband whenever he wants.
- Women and men should share authority in the family.
- A woman’s most important role is to take care of her home and cook for her family.
- It is natural that men should be the head of the family.
- A wife should obey her husband even if she disagrees.
- A woman should be able to spend her own money according to her own will.

Figure 16 shows the result for statements that reflect egalitarian gender attitudes. There was almost universal consensus that women and men should share authority in the family (96 percent) but less agreement that women should be able to spend their own money according to their own will (77 percent). Other statements reflect more patriarchal values that subjugate women’s agency to men’s (Figure 17). Despite the vast majority of respondents agreeing that women should at least share household authority with her male partner, 62 percent of women agreed that it is natural that men should be the head of the family and 65 percent agreed that a woman’s role is to take care of her home. However, fewer women were inclined to agree that women should always obey their husbands (31 percent) or that women are obligated to have sex with their husbands (22 percent).

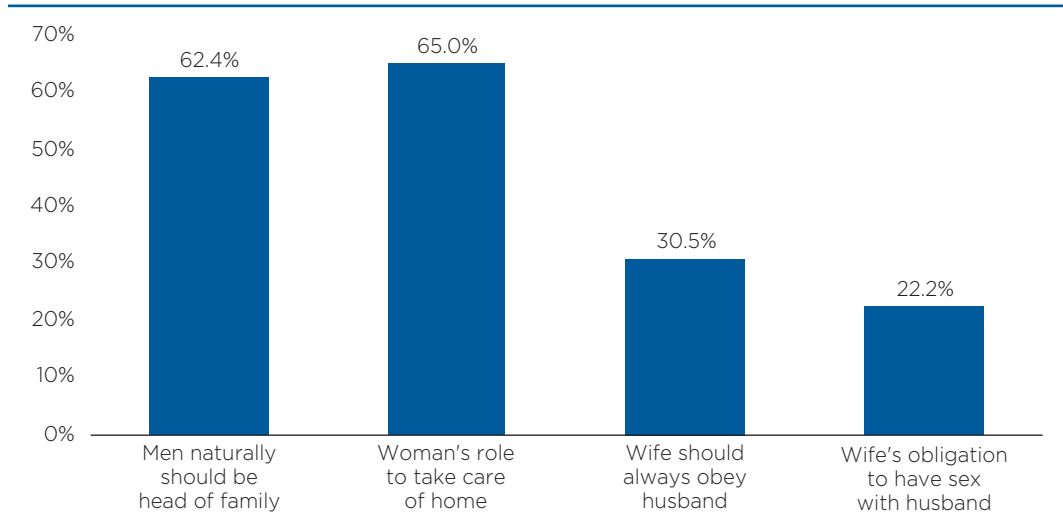
The types of IPV were also analyzed against each of the gender role statements to determine if there were statistically significant associations. The prevalence of lifetime physical, sexual, and physical and/or sexual IPV was higher among women who believed that it is natural that a man should be the head of the family. Lifetime physical and physical and/or sexual IPV were also higher for women who believed that a woman’s role is to take care of her home (Figure 18).

FIGURE 16 ○ Egalitarian Gender Attitudes: Percent Who Agree with Statements



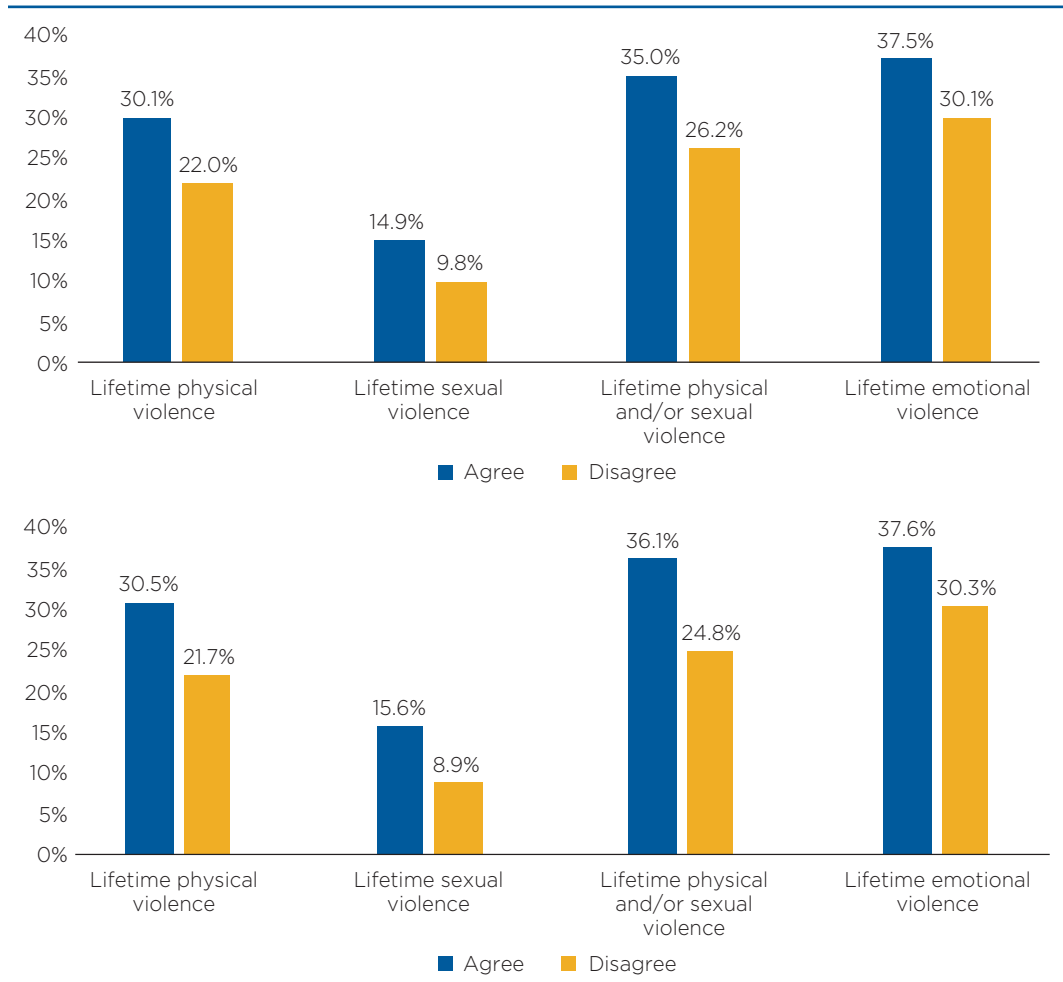
Source: Authors’ elaboration.

FIGURE 17 ○ Patriarchal Gender Attitudes: Percent Who Agree with Statements



Source: Authors' elaboration.

FIGURE 18 ○ Gender Attitudes and Physical and/or Sexual IPV



Source: Authors' elaboration.

Normalization of Violence

Respondents were asked about their perceptions of whether experiencing violence is normal for women. Respondents were asked if they agreed with the following statements:

- Violence between husband and wife is a private matter.
- It is not rape if a woman does not fight back.
- If a woman is raped, she has done something careless to put herself in that position.
- A woman should tolerate violence to keep her family together.

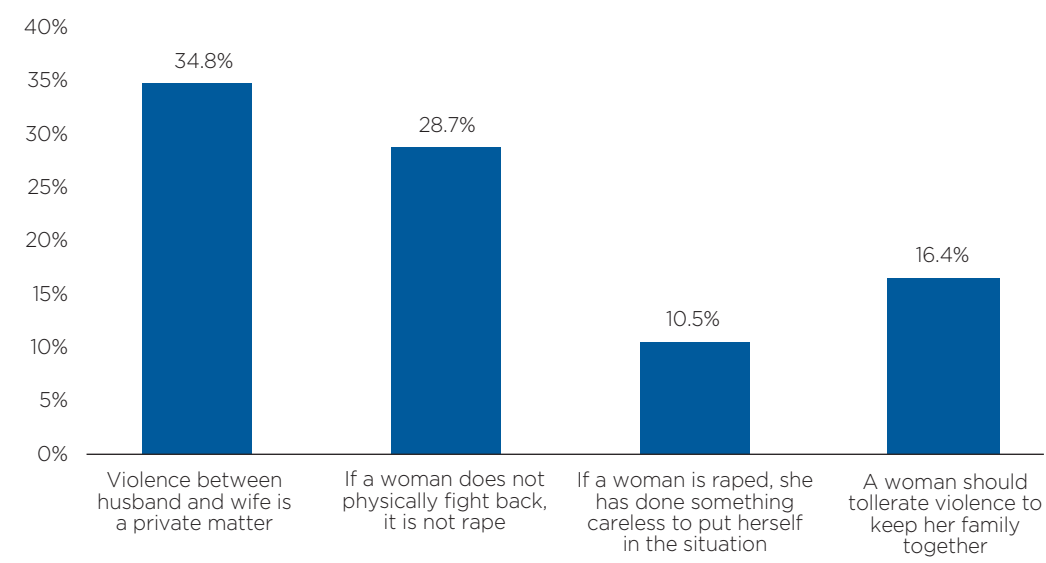
Relatively few women agreed that if a woman is raped, she had done something careless to put herself in the situation (11 percent) or that a woman should tolerate violence to keep her family together (16 percent), but 29 percent of women agreed that, if a woman does not fight back, it is not rape and 35 percent agreed that violence between a husband and wife is a private matter (Figure 19).

Justification of Violence

To determine women's perceptions on whether physical IPV against women is ever justified, respondents were presented with pretexts for IPV against a woman. Respondents were asked if they agreed that physical violence is justified in the following cases:

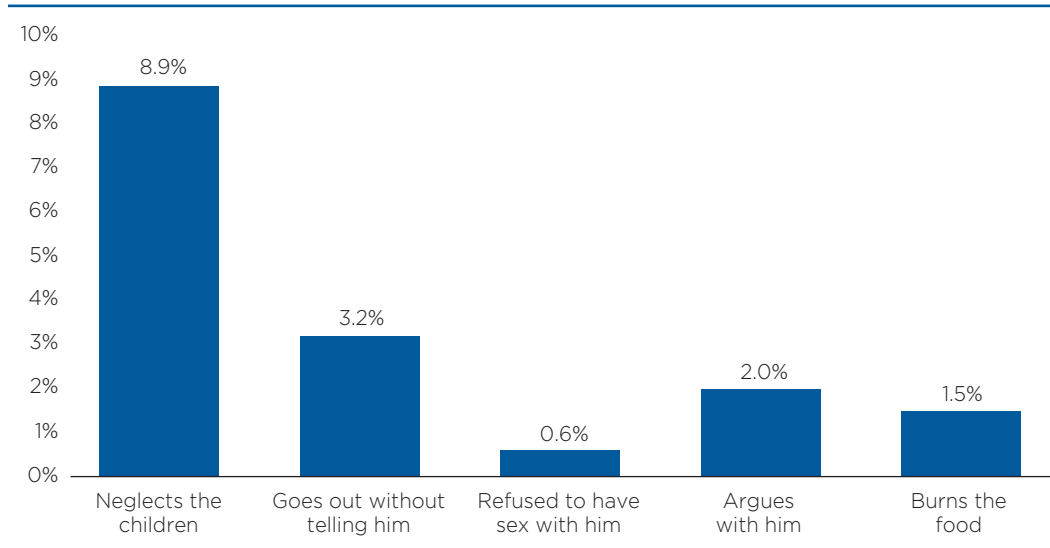
- If she neglects the children.
- If she goes out without telling her partner.
- If she refuses to have sex with her partner.
- If she argues with her partner.

FIGURE 19 ○ Normalization of Violence: Percent Who Agree with Statements



Source: Authors' elaboration.

FIGURE 20 ○ Justification of Violence: Percent Who Agree with Statements



Source: Authors' elaboration.

- If she burns the food.
- If he suspects she has an outside relationship.

Overall, an overwhelming majority of women did not agree with *any* of the statements that justified physical violence by a man against his female partner (85 percent). Very few women agreed that physical IPV is warranted when a woman goes out without telling her partner (3 percent), refuses to have sex with him (1 percent), argues with him (2 percent), or burns the food (2 percent). However, 9 percent of all women studied indicated that physical IPV was justified when a woman neglects the children or when her partner suspects she is having an outside relationship.

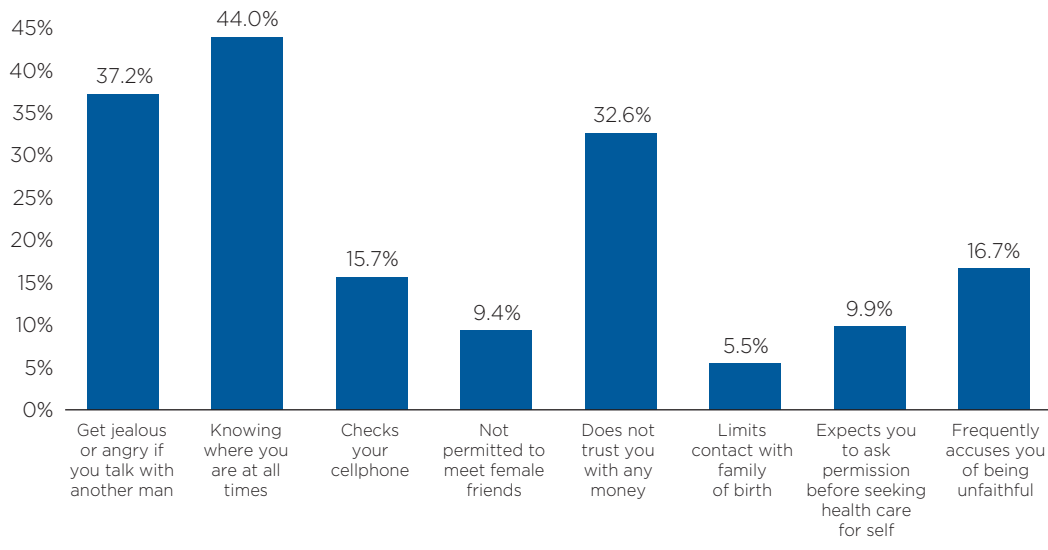
Controlling Behavior

This survey also included questions on controlling behavior by a partner. Ever-partnered women were asked about specific behaviors exhibited by their partner:

- He gets angry or jealous when she talks with another man.
- He insists on knowing where she is at all times.
- He does not permit her to meet with friends.
- He does not trust her with money.

Only ever-partnered women were asked these questions. Respondents stated that their partner wants to know where she is at all times (44 percent), gets jealous or angry if she talks to another man (37 percent), or does not trust her with any money (33 percent) (Figure 21). Relatively less common controlling behaviors included frequent accusations that she was unfaithful (17 percent), checking her cellphone (16 percent), expecting

FIGURE 21 ○ Percentage Whose Partners Exhibited Controlling Behaviors



Source: Authors' elaboration.

her to ask permission to seek health care for herself (10 percent), and disallowing her from seeing female friends (9 percent).

The data was further analyzed to understand whether the controlling behaviors of women's current/most recent husband/partner were associated with IPV. The eight behaviors were used to compute a new score that identified three levels of controlling behavior by a partner: none, one type, and more than one type. The incidence of current IPV was then tested against the degree of controlling partner behavior.

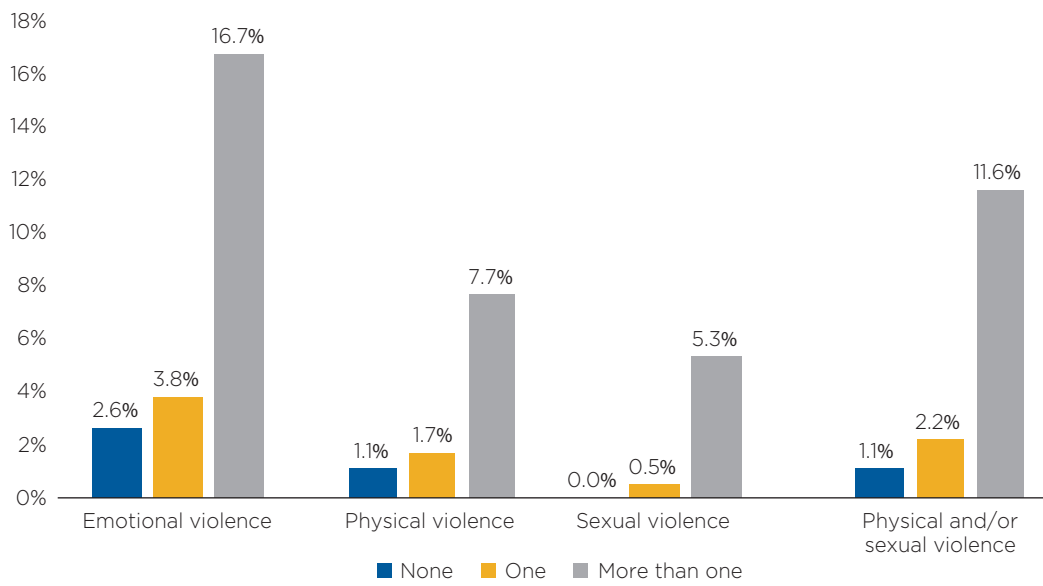
The current prevalence of IPV was noticeably higher among women whose partners exhibited more than one type of controlling behavior. For example, 12 percent of women whose partners had more than one controlling behavior experienced current physical and/or sexual IPV, versus 1 percent of women who had partners with no controlling behaviors. Figure 22 shows that the trend was similar across other types of IPV, as the prevalence of current emotional, physical, and sexual IPV was higher among women with more controlling partners.

Similarly, the prevalence of lifetime IPV among women who had partners exhibiting more than one controlling behavior was markedly higher than that of women whose partners exhibited one or no controlling behaviors. This was the case across all dimensions of IPV.

Summary

The women interviewed had a mix of beliefs about women's roles and the violence that women experience from their partners. The majority of women (96 percent) agreed that women should have at least some authority in their homes and that women do not deserve violent treatment from their partners; however, some traditional patriarchal beliefs were still pervasive. We note that few women agreed that her partner's controlling behavior

FIGURE 22 ○ Partner’s Controlling Behavior and Current IPV



Source: Authors' elaboration.

was justified (16 percent). There was a significant relationship between having a partner who exhibited multiple controlling behaviors and the prevalence of lifetime physical and/or sexual IPV (12 percent).

○ Impact on Women

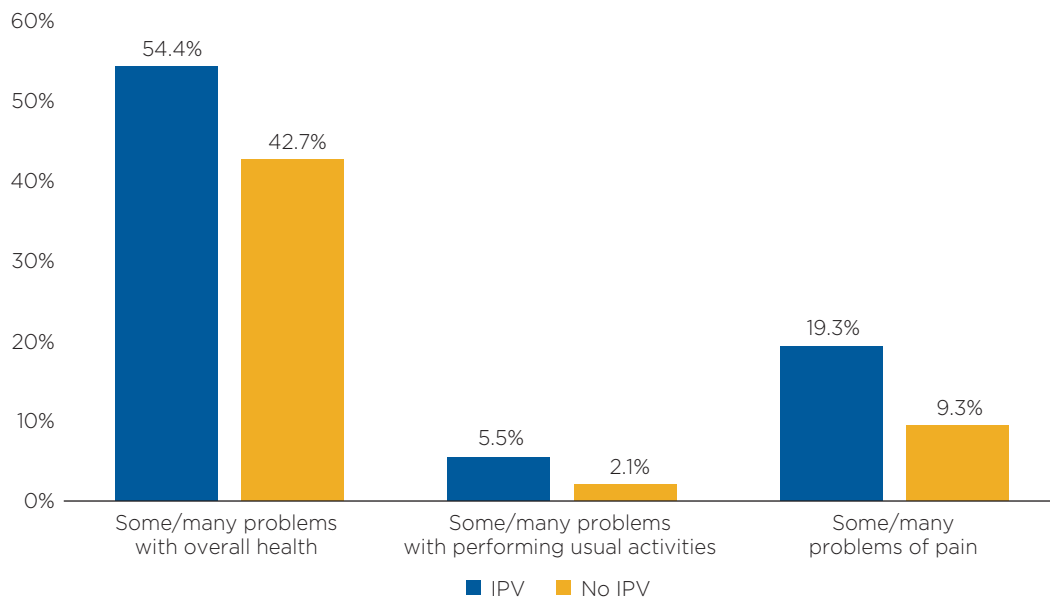
The effects of IPV are multidimensional. This section looks at some of the consequences of physical and sexual IPV on women, particularly as it relates to their health. Physical and sexual violence cause not only immediate pain and injury, but also lasting effects on physical, mental, and psychological health that compromise women's quality of life and productivity.

Physical Health

Physical and/or sexual IPV have direct impacts on women's bodies. Almost a third of the survivors interviewed (29 percent) reported having suffered injuries—including sprains, bone fractures, dislocations, burns, broken eardrums, eye injuries, broken teeth, and internal injuries—as a result of the violence inflicted on them. Survivors were also asked to subjectively assess how their experience of violence had affected their well-being. About 21 percent said the effect was a lot, while 18 percent said it was a little, and 61 percent felt there was no effect.

All ever-partnered women were also asked about the quality of their general, physical, and mental health. Figure 23 presents the differences in reported health problems between women who had experienced physical and/or sexual IPV versus those who had not. In all categories, survivors were more likely to have problems, whether it was poor

FIGURE 23 ○ Physical and/or Sexual IPV and Health Problems



Source: Authors' elaboration.

general health (54 percent vs. 43 percent), difficulty performing usual activities (6 percent vs. 2 percent), or having pain (19 percent vs. 9 percent).

Respondents also reported their use of medication in the past four weeks. Survivors were more likely to take medicine for pain (19 percent vs. 13 percent for women who never experienced IPV), to sleep (52 percent vs. 38 percent), or for depression (7 percent vs. 4 percent).

Mental Health

Other psychological problems that were reported by survivors included suicidal ideation or suicide attempts (32 percent vs. 14 percent for women who had not experienced physical and/or sexual IPV), alcohol use at least once a week (5 percent vs. 3 percent), or recreational drug use at least once a week (1 percent vs. <1 percent) (Figure 24).

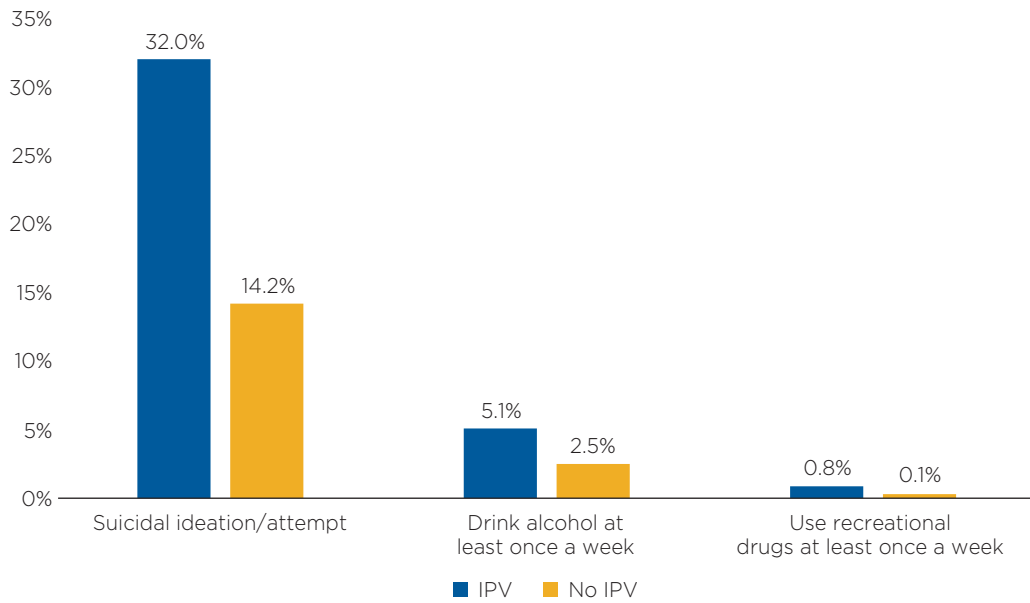
Sexual and Reproductive Health

Women who experienced physical IPV were at higher risk of negative outcomes with respect to their sexual and reproductive health. Figures 25 and 26 show that survivors have less agency with regard to their own or their partner's use of birth control and/or barrier protection to prevent contracting sexually transmitted infections. This implies that survivors are at higher risk for unwanted pregnancies and sexually transmitted infections, including HIV.

Income Generation

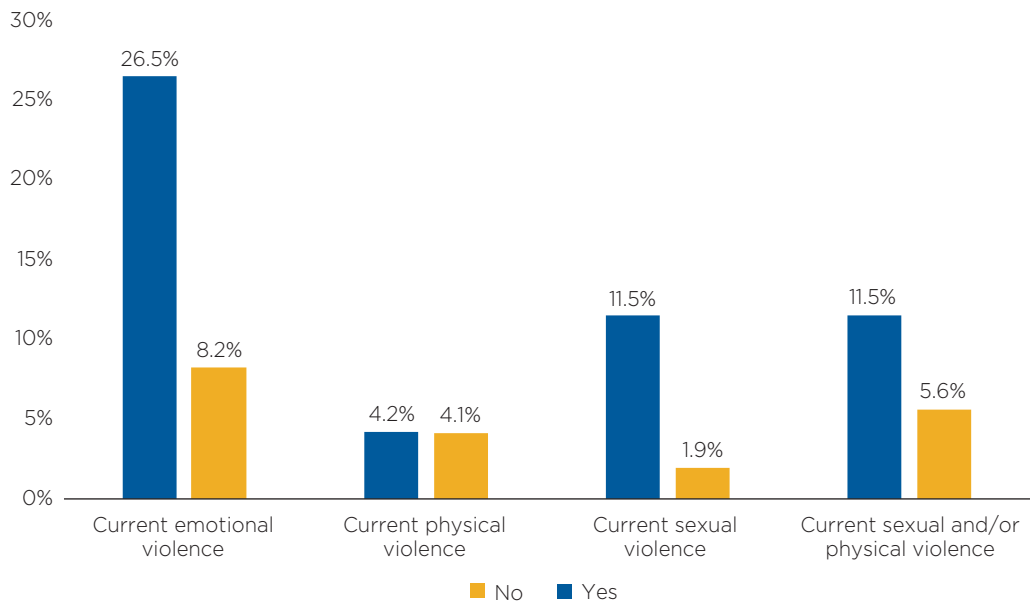
Survivors were asked about the impact of all IPV on their income-generating activities. Over 50 percent of survivors reported that their work was not disrupted. Others

FIGURE 24 ○ Physical and/or Sexual IPV and Psychological Problems



Source: Authors' elaboration.

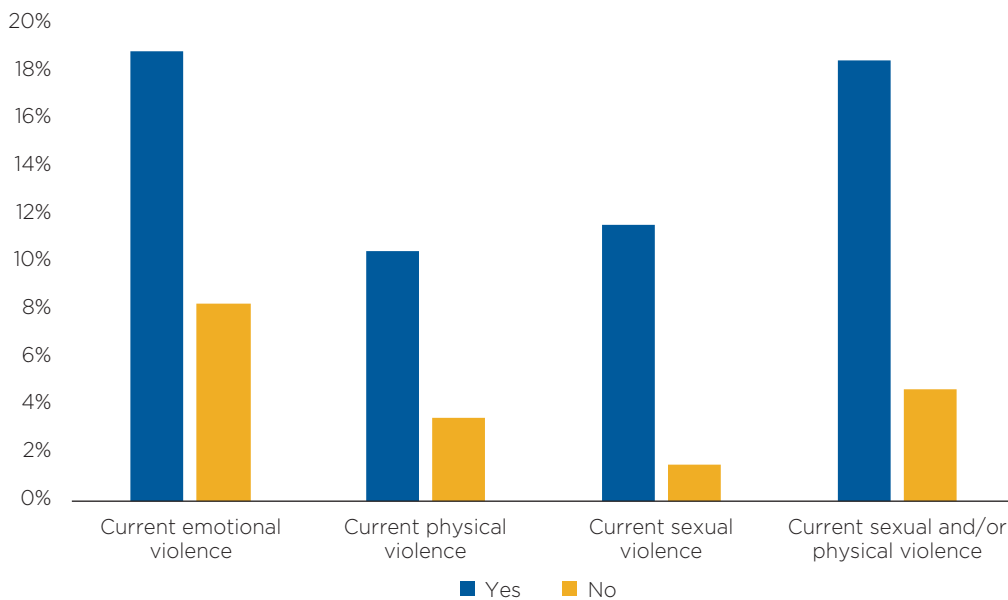
FIGURE 25 ○ Current/Most Recent Husband/Partner Refused to Use or Barred You from Using Birth Control and/or Barrier Protection



Source: Authors' elaboration.

described the violence as having the following impacts: loss of self-confidence (7 percent), husband/partner interrupting work (9 percent), needing sick leave (11 percent), or being unable to concentrate (19 percent).

FIGURE 26 ○ Current/Most Recent Husband/Partner Refused to Use Condom



Source: Authors' elaboration.

Impact on Children

Among survivors of physical IPV who had children, 41 percent reported that their children had witnessed violence against them once (11 percent), several times (9 percent), or many times (21 percent). Further, women with children aged 5 to 12 years reported the impact of their experience(s) on their children's well-being. Survivors reported a higher prevalence for all indicators of trauma for their children, including private behaviors such as bedwetting (25 percent vs. 13 percent for children 5-12 of women who had not experienced violence), social behaviors such as aggression (33 percent vs. 14 percent), and school performance (having to repeat school years; 24 percent vs. 20 percent). Figure 27 presents all the indicators resulting from reports made by mothers.

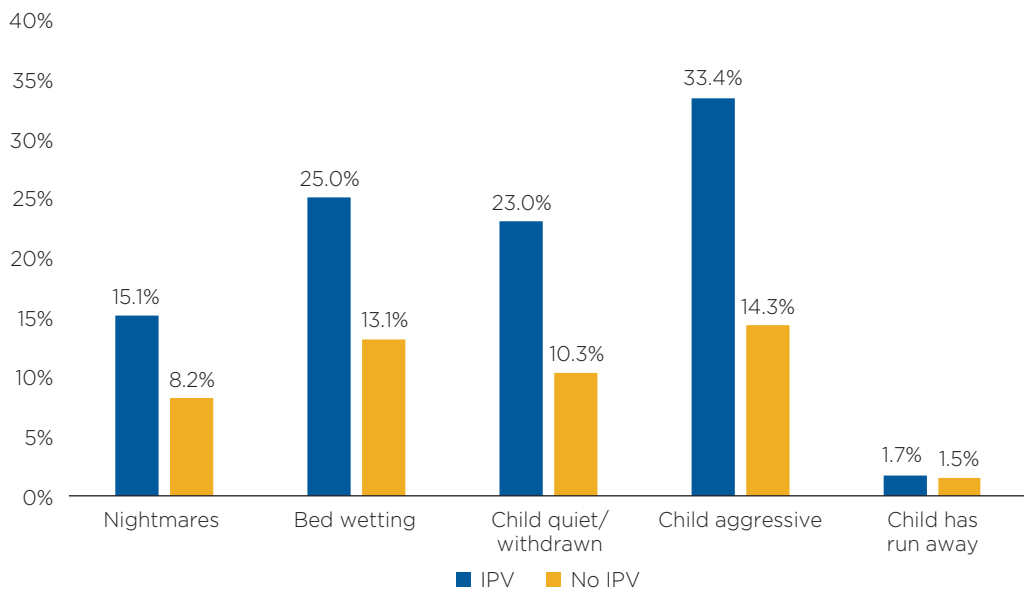
Summary

There are several impacts on women who have experienced physical and/or sexual IPV, including but not limited to physical injuries, which cause pain and hamper their activities; poor mental health; increased likelihood of unwanted pregnancy; and exposure to sexually transmitted infections. The majority of women also reported some form of interruption to their income generation. Additionally, children of survivors were more likely to display troubling behaviors and perform poorly at school.

○ **Women's Responses**

This section reports how women address physical and/or sexual IPV. It examines if and from whom survivors choose to obtain support, the kinds of support they opt for, and

FIGURE 27 ○ Children’s Well-Being as Reported by Women with Children 5–12



Source: Authors’ elaboration.

their reasons for seeking help (or not). The section also examines other options open to survivors, such as leaving the violent situation or physically retaliating against their perpetrators.

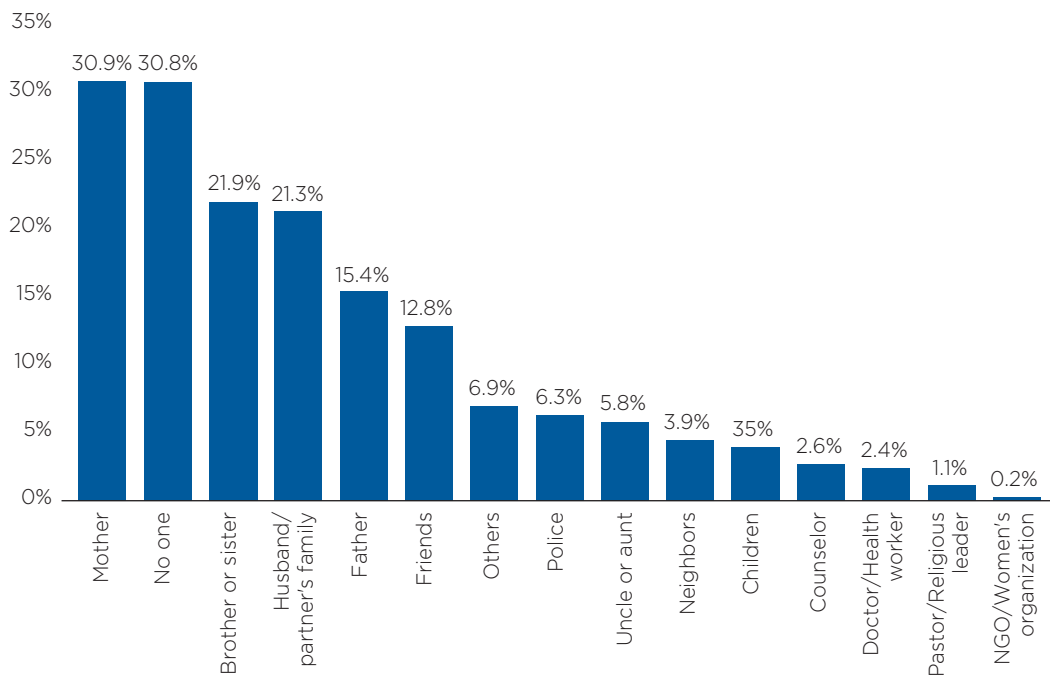
Disclosure

The results show that an equal number of women who have experienced physical and/or sexual IPV chose either to speak to their mother or to tell no one at all (31 percent). Siblings and their partner’s family were also popular confidantes, accounting for 22 percent and 21 percent, respectively. It is also worthy to note that 26 percent of women from Paramaribo (compared to 35 percent of women from the outskirts of Paramaribo and the rest of the coast combined) chose to tell no one. Also, women from Paramaribo were more likely to tell their partner’s family about the violence than their counterparts in other regions. Relatively few women chose to disclose IPV to professionals such as the police (6 percent), a counselor (3 percent), or health workers/doctors (2 percent). Significantly, less than 1 percent of women spoke to non-governmental or women’s organizations. Results are summarized in Figure 28.

Seeking and Receiving Help

The majority (67 percent) of women who experienced physical and/or sexual IPV did not seek help from any organization or support agency. Among those who sought help from an agency or person in authority, most went either to the police (27 percent) or a health center (10 percent), while social services (3 percent), the Bureau for Victim Care (2 percent), and the Bureau for Victim Assistance (less than 1 percent) were less popular choices.

FIGURE 28 Disclosure of Physical and/or Sexual IPV



Source: Authors' elaboration.

Most survivors did not receive help from any source (58 percent). Of those who received help, they were most likely to be helped by their parents (14 percent), the police (10 percent), their siblings (8 percent), or their husband's/partner's family (8 percent). Interestingly, 14 percent of women from Paramaribo received help from the police compared to 9 percent from the outskirts of Paramaribo and 6 percent from the rest of the coast. Women from Paramaribo were also more likely to receive help from parents (18 percent) and their husband's/partner's family (11 percent) than women in other areas of the country.

Survivors had various reasons to seek help. The most compelling reason was feeling like she could not endure any more violence (62 percent). Another 37 percent sought help for other reasons that were not specified. Women were also motivated to seek help when there was a threat or an attempt to kill them (23 percent), when they were badly injured (21 percent), or when they were afraid they would be killed (16 percent). About 8 percent of women who sought assistance did so when their partner threatened to hit their children.

Of the women who did not seek help, half claimed that it was for some other reason that was not specified. Of grave concern is that 30 percent of women stated that they did not seek help because they saw violence as normal or not serious. Fear of threats, consequences, and more violence deterred 8 percent of women from seeking help, while 7 percent stated they were not aware of their options. Women from the rest of the coast and the interior were more likely to forgo support from agencies (12 percent) due to fear of more violence or the consequences of such compared to their counterparts from the outskirts of Paramaribo (9 percent) and Paramaribo (6 percent).

Leaving the Violence

Almost half of all survivors (49 percent) responded that they had left the violent situation, which means just over half (51 percent) never left.

The most common reason to leave was not being able to endure any more violence (65 percent). Other reasons, such as threats (7 percent), fear of being murdered (7 percent), children suffering (6 percent), or being thrown out of their home (4 percent), influenced fewer survivors to leave their partner. Strikingly, the majority of women who left reported returning to their partners (57 percent) and some were motivated by more than one factor. Other reasons (27 percent) and he asked her to come back (26 percent) were the most selected options. Women were also inclined to return home because they thought that their partner would change (18 percent), they still loved him (15 percent), they did not want to leave the children (15 percent), or for the sake of the family (14 percent). Other reasons were related to the lack of support available to women who leave, such as being unable to support their children (9 percent) and being unable to stay at another place (7 percent).

The most common reason to stay was that they still loved their partner (30 percent). Other common reasons were that violence was seen as normal or not serious (29 percent), she did not want to leave the children (22 percent), she forgave him (16 percent), or she thought he would change (15 percent). Of those who stayed, 10 percent did so because of their views on the holiness of marriage and 9 percent because they did not want to bring shame to the family.

Fighting Back

While more than half of the women who had experienced physical IPV reported either defending themselves or physically fighting back, 44 percent never fought back or refused to answer.

The data indicated varied outcomes for women who retaliated to physical IPV: 40 percent indicated that the violence ended, a further 21 percent stated that the violence lessened, 15 percent reported that there was no change, and 24 percent said the violence got worse (Figure 29).²⁶

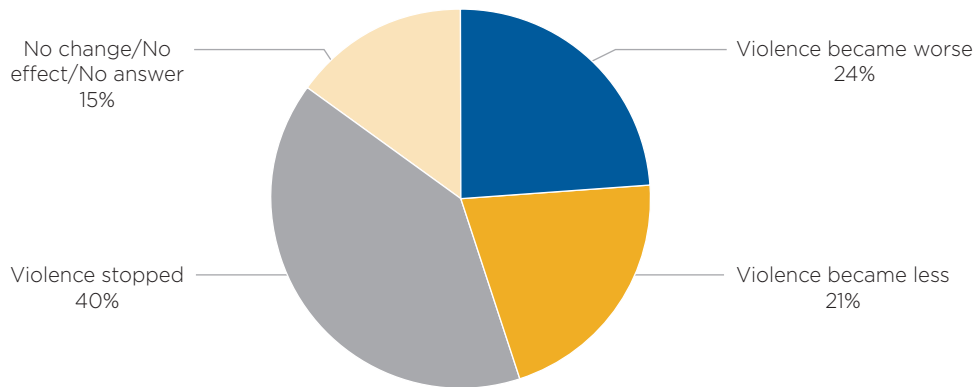
Summary

Survivors of physical and/or sexual IPV find various strategies to cope with violence in their lives. Though most survivors were able to talk to someone about their situation—usually their mothers—they did not seek or receive help for their situation. Women who received help, tended to do so more from their personal network of family and friends rather than from the authorities or civil society organizations that have dedicated resources to address IPV.

There was evidence that indicated survivors experienced some feelings of love, fear, shame, and normalcy of violence, and that these were all factors that discouraged them

²⁶ It is important to note that the researchers were unable to distinguish if the effect of retaliation against the violent partner (i.e., violence improving, worsening, or staying the same) related to a temporary outcome during a violent episode or whether the effects on the violence were lasting. It would be inappropriate to interpret the data to suggest that women fighting back stops IPV.

FIGURE 29 ○ Effect of Fighting Back Against Physical IPV



Source: Authors' elaboration.

from seeking help. Respondents most commonly sought help or left when they felt they could endure no more violence. As an alternative, some women decided to fight back against physical attacks, which brought mixed results. Rather than limiting women to the possibility of suffering worse consequences, the results also indicated that fighting back may stop, lessen, or cause no change in the violence in the moment of an attack for a relatively greater number of women. It is worth noting, however, that the data did not indicate how partners' overall behavior was affected when survivors fought back.

○ Sexual Violence Against Women by Non-partners

This section presents results on the prevalence and factors associated with various forms of non-partner sexual violence (NPSV) experienced by **ALL** women. The findings show that just under 26 percent of respondents experienced sexual violence, which includes forced sexual intercourse, attempted forced intercourse, and unwanted touching, at some point in their lives by a partner and/or non-partner.

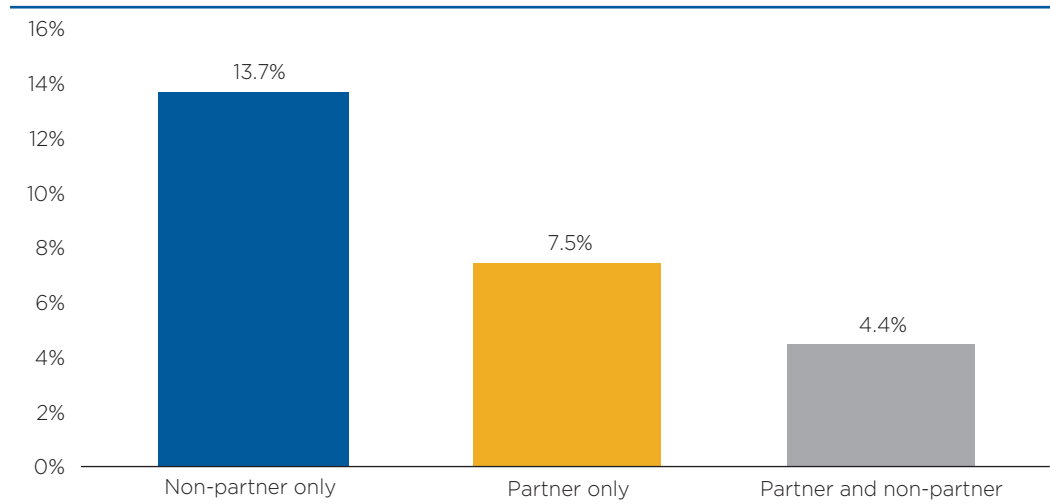
Interestingly, the prevalence of NPSV among all women (14 percent) is almost double that of sexual IPV (8 percent). The results presented in this section correspond to all women interviewed in the sample since all respondents were asked about NPSV. Throughout this section, only statistically significant associations ($p < 0.05$) are presented.

Sexual Abuse

NPSV is defined as acts that involve being forced into an unwanted sexual act by anyone other than an intimate partner. The acts respondents were asked about were:

- being forced into unwanted sexual intercourse (by physical force, threat, or being put in a situation where she could not say no);
- being forced to have sex while too intoxicated to refuse;
- someone attempting (but not succeeding) in forcing unwanted sexual intercourse;

FIGURE 30 ○ Lifetime and Current Prevalence of NPSV and IPV among All Women Interviewed



Source: Authors' elaboration.

- experiencing unwanted sexual touching or being forced to touch someone else sexually.

The prevalence of NPSV among the women interviewed was 17 percent over their lifetime and 2 percent in the 12 months preceding the interview (Figure 31).

Educational Attainment

The prevalence of lifetime NPSV was significantly higher for women whose highest level of education was higher than secondary school (31 percent) than for women who pursued education only up to the secondary level (18 percent). Notably, women with no education or whose education stopped at the primary level experienced lower prevalence (6 percent) of lifetime NPSV.

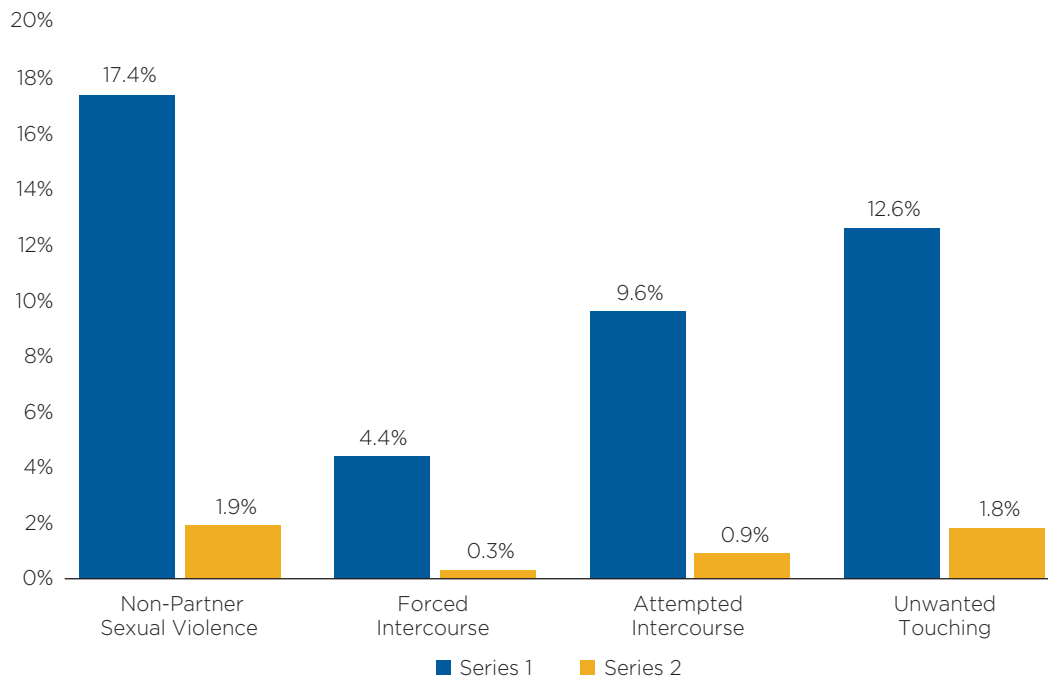
Current Partnership Status

Survey respondents were asked to specify their current partnership status and whether they had experienced NPSV. Results showed that the prevalence of NPSV was highest for women who had a regular partner but lived apart (23 percent) or who were currently living with a man but not married (22 percent). This was followed by women who were never partnered (19 percent), had no partner currently (18 percent), and were currently married (12 percent).

Ever-Married

The results indicated that women who had never been married experienced a higher prevalence of NPSV (lifetime, 21 percent; current, 3 percent) compared to women who had been married (lifetime, 12 percent; current, 1 percent).

FIGURE 31 ○ Prevalence of NPSV Among All Respondents



Source: Authors' elaboration.

Ever-Pregnant

Of the women that stated that they had been pregnant, 16 percent had experienced NPSV during their lifetime compared to 23 percent of women who had never been pregnant. Surprisingly, current NPSV was higher for women who were ever pregnant (3 percent) than for those women who were never pregnant (2 percent).

Main Activity During the Past Week

Women employed in a public or private organization experienced significantly higher prevalence of NPSV (lifetime, 23 percent; current, 1 percent) than their counterparts. Unemployed women experienced the second highest prevalence (lifetime, 17 percent; current, 5 percent) followed by women who were out of the labor force (lifetime, 15 percent; current, 0 percent), housewives and unpaid family members (lifetime, 8 percent; current, 0 percent), and self-employed women (lifetime, 6 percent; current, 0 percent).

Main Source of Income

Women who received income from their own work experienced a higher prevalence of NPSV (22 percent) over their lifetime than women who received an equal share from themselves and their partners (20 percent), those who received support from relatives and friends (20 percent), women with no income (15 percent), and those who received support from their partner or husband (10 percent).

Age at First Union²⁷

Interestingly, the prevalence of lifetime NPSV was significantly higher for women whose age at first union was after 19 years old (14 percent) compared to women whose age of first union was 18 or younger (8 percent).

Forced Sexual Intercourse

Of all respondents, 4 percent indicated that they were forced at least once to have intercourse with a non-partner. Approximately 1 percent of respondents experienced this type of violence while they were using substances such as alcohol or drugs. Of the women who reported experiencing NPSV, the incidents occurred five or more years prior (86 percent) as opposed to in the 12 months prior to the study (8 percent).

Most survivors stated that they had experienced NPSV one time by one perpetrator (lifetime, 96 percent; current, 100 percent). Often the perpetrator was a family member or friend (lifetime, 45 percent; current, 27 percent).

The majority of NPSV survivors (85 percent) never officially reported the incident to the police. Of the survivors who did report the incident, all stated that official investigations into the assault were opened by the police and 50 percent of the opened cases were reported as leading to a conviction.

On the other hand, the vast majority of NPSV survivors (91 percent) reported their assault to a health service provider. Surprisingly, less than 1 percent of the survivors who spoke with a health provider about their assault reported being offered medication or treatment for preventing pregnancy. Also, less than 1 percent were offered medication or treatment to prevent transmission of HIV and only 7 percent received formal counseling as it related to the incident.

Those women who didn't report the incident to the police or a health service provider were likely (almost two-thirds) to tell someone in their social network, such as a family member, a friend, or a neighbor. Women were most likely (44 percent) to share the incident with a female family member.

While two-thirds of women stated that the person to whom they disclosed this incident was supportive, 12 percent were told to keep quiet, 7 percent were blamed, and 7 percent received indifferent responses.²⁸ Significantly, only 2 percent of the women were advised to report the incident to the police.

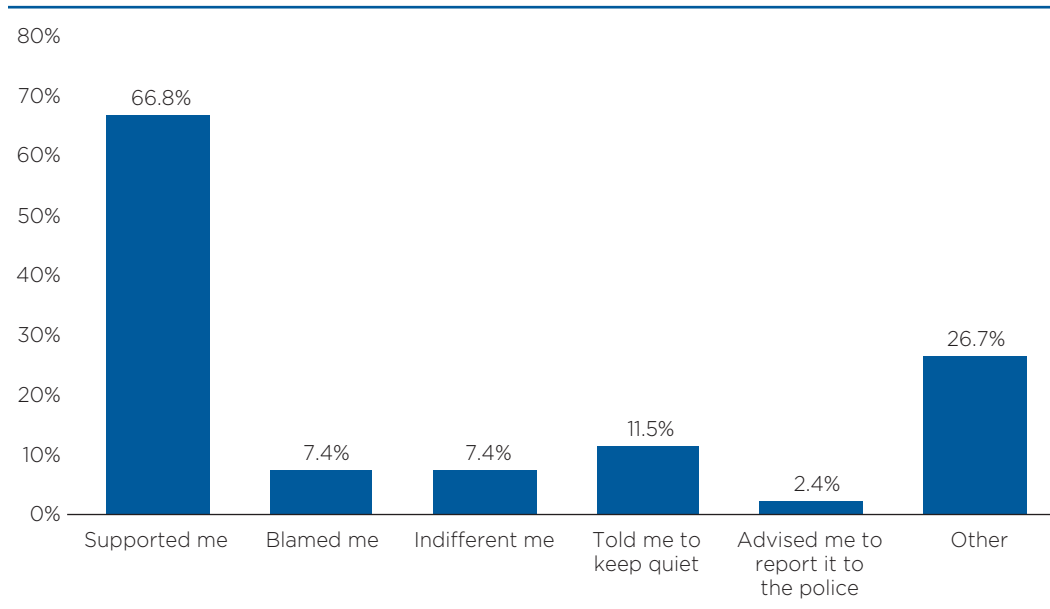
Attempted Forced Sexual Intercourse or Unwanted Touching

Women were asked about whether they had ever had any male person, excluding their husband or male partner, attempt to force them into sexual intercourse but not succeed. They were also asked if they had ever been touched sexually when they did not want to be touched or made to touch private parts against their will.

²⁷ First union refers to the first time living with or married to a partner.

²⁸ Of the survivors, 27 percent responded "other" to this question, making it unclear whether the person to whom they disclosed the incident was supportive or not.

FIGURE 32 ○ Responses of Confidantes to Women Who Disclosed Forced Sexual Intercourse



Source: Authors' elaboration.

Of all the women interviewed, 4 percent reported that they had experienced attempted forced sexual intercourse at least once in their lifetime, with less than 1 percent of those women stating that it had happened in the previous 12 months. A slightly higher percentage of women reported unwanted sexual touching or being made to touch sexually when they did not want to (lifetime, 13 percent; current, 2 percent).

Sexual Harassment

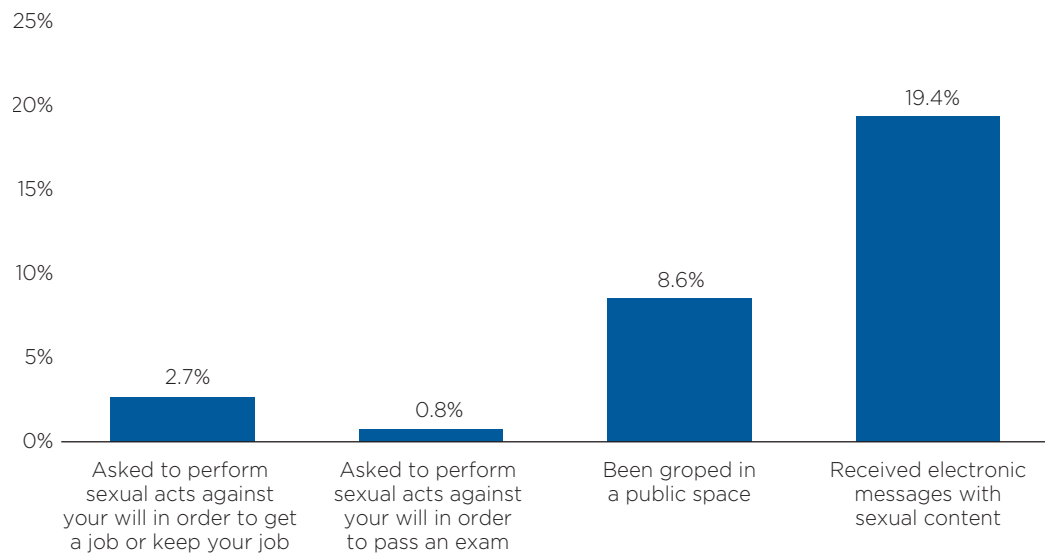
Women were presented with four specific spaces—at work, at school, public transport, and virtual spaces—to assess their exposure to sexual harassment in their lifetime. Sexual harassment included:

- being asked to perform unwanted sexual acts to retain or secure employment, acquire a job promotion, pass an exam, or obtain good grades at school;
- being groped, sexually touched, or rubbed in any public space, including public transportation; or
- receiving electronic messages with hurtful or discomfiting sexual content.

The overall prevalence was 25 percent, with the highest rate being in the form of electronic messages with sexual content (19 percent), followed by being groped in a public space (9 percent) at least once in their lifetime.

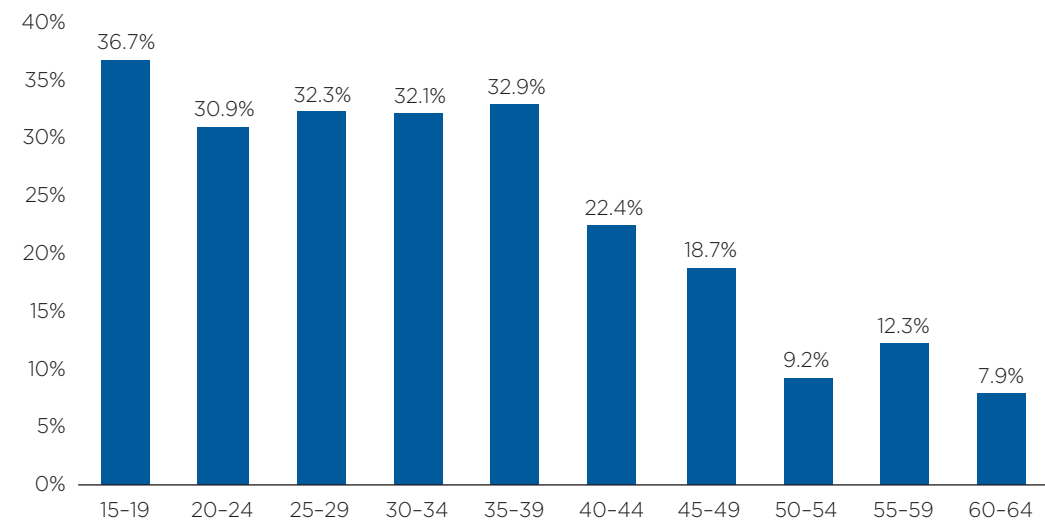
Younger women were more likely to have experienced non-partner sexual harassment, with women between 15 and 19 years old having experienced the highest prevalence (37 percent). The rate of sexual harassment was similar for women between the

FIGURE 33 ○ Prevalence of Sexual Harassment Among All Respondents



Source: Authors' elaboration.

FIGURE 34 ○ Sexual Harassment by Respondent Age



Source: Authors' elaboration.

ages of 20 and 39, ranging from 31 percent to 33 percent. Lower prevalence rates were observed among women 60 years and over (8 percent) and 50 to 54 years old (9 percent).

Educational Attainment

Approximately 42 percent of women who attained education higher than secondary level said they had experienced sexual harassment compared to 26 percent among women who attained education up to the secondary level and women who only attained primary

school or lower education (<8 percent). It is noteworthy that, having attained education higher than the secondary level, women are more likely to be employed (32 percent) and aspire to positions that are traditionally male-dominated within organizations.

Current Partner Status

Women who had a regular partner but lived apart were significantly more likely to experience non-partner sexual harassment (44 percent) than women who currently did not have a partner (28 percent), women who were never partnered (26 percent), women living with a man but not married (24 percent), and women who were currently married (16 percent).

Ever-Married

Almost 31 percent of never-married women reported experiencing non-partner sexual harassment at least once in their life compared to 17 percent of women who were married.

Ever-Pregnant

The prevalence of non-partner sexual harassment was lower for women who had been pregnant at least once (21 percent) compared to women who had never been pregnant (35 percent).

Main Source of Income

Prevalence of non-partner sexual harassment was highest among women employed in a public or private organization (33 percent), followed by women who received support from relatives (29 percent) and women who received equal support from their partners (26 percent). Women with no income and those who were supported by their husbands had the lowest prevalence rates (20 and 16 percent, respectively).

Main Activity During the Past Week

The prevalence of non-partner sexual harassment was found to be higher for women who worked in the public or private sector (32 percent) followed by women who were unemployed (30 percent), self-employed or out of the labor force (12 percent), and housewives (11 percent).

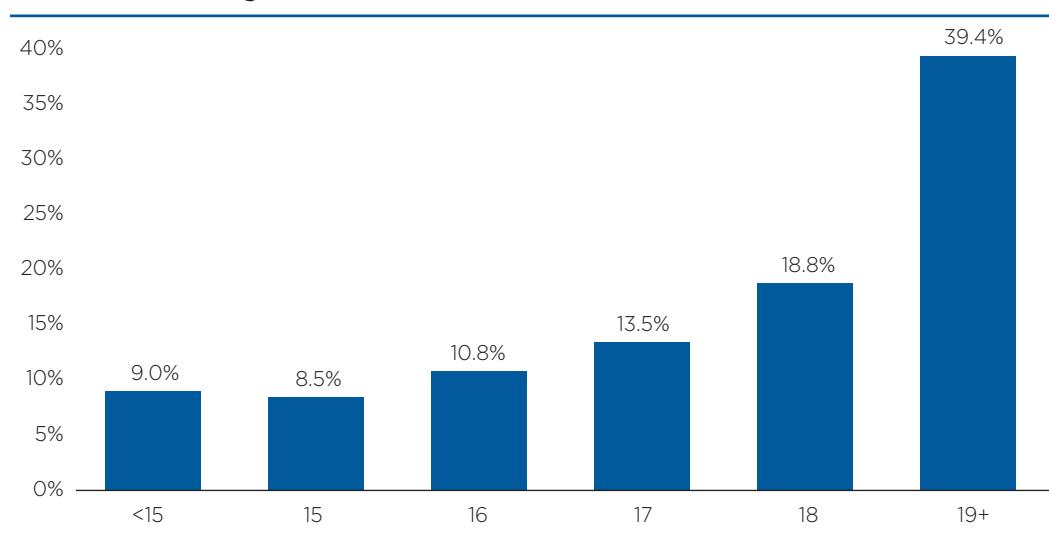
Age at First Union

Similar to the prevalence of NPSV, women whose first union occurred at age 19 or older experienced higher non-partner sexual harassment (18 percent) than women whose first union was at 18 years or younger (12 percent).

Child Sexual Abuse

The study examined sexual violence in childhood by asking women whether they had experienced unwanted sexual touching or been forced to perform a sexual act before

FIGURE 35 ○ Age at First Sexual Intercourse



Source: Authors' elaboration.

the age of 18. In accordance with survey protocols, respondents were allowed to enter this information privately.²⁹ They were shown illustrations of a young girl who was smiling or crying and then asked to indicate if someone ever touched them sexually against their will before age 18 by selecting the sad girl; if not, to indicate the happy girl. Of all the women interviewed, 1 percent selected the sad face at the end of the interview. Further, there was a significant relationship between child sexual abuse and the respondent having ever been pregnant.

Ever-Pregnant

The data shows that of the women who were pregnant at least once, just over 1 percent stated that they experienced sexual abuse as a child. None of the women who were never pregnant reported this type of abuse.

First Sexual Experience

Figure 35 shows that 39 percent of sexually active respondents indicated their first sexual experience occurred when they were 19 years of age or older.³⁰ Thus, the majority of sexually active respondents had their first sexual experience before they were 19 years old (18 years old, 19 percent; 17 years, 14 percent; 16 years, 11 percent; 15 years, 9 percent; and younger than 15 years, 9 percent).

Women were also asked to characterize the nature of their first sexual experience as wanted, acquiesced to, or forced. Overall, 83 percent of women had their first sexual

²⁹ Respondents were handed the tablet used to administer the survey and issued instructions to select the relevant response and clicking next before handing it back to the interviewer.

³⁰ Age of first sexual experience was only asked of women who indicated that they had been sexually active.

experience because they wanted to have sex. The younger the age at which women reported having their first sexual experience, the greater the likelihood that she experienced violence during that sexual experience. Women whose first sexual experience occurred before age 15 were much more likely to report having been forced into this act than women whose age of first sexual experience was 15 years or older. There was a marked decline in the likelihood of first sexual experiences that were forced among women whose age of first experience was 15 years or older, with women whose first experience was at 19 years or older being least at risk of their first sexual experience being forced (1 percent). Not surprisingly, the older a woman's first sexual experience, the more likely she was to have wanted to have sex. Results showed that 91 percent of women whose first sexual experience was at 19 years or older wanted the experience, while 67 percent of women whose first experience was before 15 years indicated that they wanted to have sex at that time.

Several factors need to be examined when discussing the characteristics of women who reported sexual violence with a partner or non-partner at the time of their first sexual experience: religion, ethnicity, education, current relationship status, having been married, main activity during the week, main source of income, and marriage without consent.

Most women from all ethnic backgrounds (75 percent) and religions (74 percent) characterized their first sexual experience as non-violent. However, the prevalence of sexual violence as a feature of a woman's first sexual experience was the lowest among Javanese women. As with previous results, women who had little to no schooling experienced the lowest rate of violence at first sexual experience. Similarly, women who were currently married (18 percent), married at least once (22 percent), and women who received financial support from their husband or partner (19 percent) experienced lower rates of violence at first experience. Finally, women whose marriage was consensual experienced higher rates of violence during their first sexual encounter than their counterparts.

Conclusions and Recommendations

The 2018 Suriname Women's Health Survey (SWHS) is the first national survey focused on intimate partner violence (IPV) for women and girls between 15 and 64 years old in Suriname. The survey and this report are the result of a collaborative process among various local stakeholders concerned with violence against Surinamese women and girls. Prior to this initiative, there had not been a quantitative study of this magnitude and spanning Suriname's major geographic domains.

Among the key findings of the SWHS are the prevalence rates for IPV and non-partner sexual violence (NPSV):

- The overall prevalence of physical and/or sexual IPV was found to be 32 percent (lifetime) and 6 percent (current). In other words, among ever-partnered women and girls currently 15 to 64 years old, about 1 in 3 had experienced at least one act of physical or sexual violence from an intimate partner at some point in their lives and approximately 1 in 20 in the year prior to the survey. Emotional IPV is marginally higher at 35 percent (lifetime) and 9 percent (current).
- Of all the women surveyed (i.e., including those who had never had a partner), 17 percent had experienced NPSV at least once in her lifetime.

These findings indicate that experiencing IPV and NPSV is commonplace for women in Suriname and crosses social strata such as ethnicity, employment status, educational level, marital status, and religious affiliation. Furthermore, the report makes clear that IPV and NPSV must be addressed with urgency if the Government of Suriname is to meet its commitment under Sustainable Development Goal 5, which includes “eliminate[ing] all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.”³¹

³¹ See <https://sustainabledevelopment.un.org/sdg5> for the targets and indicators for this SDG and for progress and information.

The analysis of the SWHS data presented here should prove helpful to the development of evidence-based interventions to support survivors and reduce these forms of gender-based violence. Though this study cannot establish the causes of IPV or NPSV, the data shows relationships between some key variables in women's experiences with violence that indicate potential underlying risk factors for IPV and NPSV. Furthermore, it provides some basis to identify types of IPV that are more acute in Suriname compared with other Caribbean neighbors that have recently conducted Women's Health Surveys. For example, the prevalence of emotional and economic IPV were significantly higher in Suriname than in Jamaica and in Trinidad & Tobago.

Based on the findings, the authors make the following recommendations:

- The study found strong correlations between witnessing or experiencing abuse as a child and experiencing physical IPV as an adult. Similarly, the severity of lifetime physical IPV appeared greater for survivors who experienced violence in their homes as children. In light of this, it is critical that programs to support survivors include counseling and support services for survivors' children as a preventive measure against future abuse. Further, it is incumbent on the government, communities, and families to address any social norms related to disciplining children that explicitly or implicitly permit violence.
- The results indicate that survivors are most likely to disclose their experiences of physical and/or sexual violence to close family or friends. As such, public awareness campaigns and programs aimed at reducing IPV must target and engage not only survivors but the broader community to which they are likely to turn for support, providing concrete information on how to best assist survivors and directing them to existing services.
- A majority of women surveyed held one or more patriarchal gender attitude(s), which were found to have statistically significant associations with prevalence of lifetime IPV. More than a third of respondents held views that normalized IPV and NPSV. At the same time, among ever-partnered women, almost half indicated that their partners exhibited one or more controlling behaviors, which were also shown to have a statistically significant correlation with prevalence of lifetime IPV. Programming and policies aimed at changing patriarchal attitudes and norms that provide fertile ground for violence and abusive behaviors are necessary.
- Ongoing and regular data collection around the issues covered in this study are critical to monitor and guide interventions as well as to understand the effectiveness of prevention and survivor support initiatives over time. Efforts should be made to ensure periodic implementation of the SWHS to collect time series data, to strengthen and systematize existing administrative data collection by the police and the Ministry of Home Affairs on gender-based violence, to enhance data collection within the public health care system on IPV, and to make resulting statistical information publicly available. Specifically, active steps should be taken to fully implement nationally the standardized registration form for domestic violence currently piloted by the Ministry of Justice and Police. Within the health system, we recommend that patient intake or information forms be restructured to screen for IPV.

- Police and health workers must be trained to identify and appropriately respond to IPV. To that end, IPV should be included as a topic within the curriculum of the Police Force Academy, the medical faculty, and the College for Nurses and Related Professions. Training provided to current professionals needs to be aimed at sensitizing them to violence against women and girls and the related health concerns, identifying signs when clients do not disclose and supporting survivors to receive interventions that improve their health and safety. In particular, given the relationship between pregnancy and IPV, screening in antenatal (prenatal) and postnatal care is critical. Consultation Bureaus³² must develop tailored awareness, sensitization, and training programs for patient-facing workers to better identify and care for IPV survivors, from offering dignified and holistic treatment options to handling privacy and security concerns.
- Women with certain religious affiliations were found to have a higher prevalence of IPV, as were women and girls in non-consensual marriages. Outreach to religious leaders, such as programs previously sponsored by the Ministry of Home Affairs, should be continued to sensitize them to violence against women and girls and provide training on how to prevent and identify it and how to support survivors among their congregants.
- Survivors living inland or in coastal areas other than Paramaribo were less likely to receive help from government authorities or their communities than women living in the capital and its outskirts. Targeted efforts must be made to increase sensitization and provide support services in these areas.

The authors also highly recommend further study of IPV. The limits of time and how much can or should be included in a single report deeply constrained their ability to explore themes. This is particularly unfortunate for areas where findings depart from expectations. This inability to explore certain themes can be mitigated by further study, both of the current data file, which contains much more material to explore, and by using other methodologies and instruments to investigate murky or knotty issues in other ways. For example, specific study is needed to address certain populations that are assumed to be vulnerable and that this study was not designed to cover, such as women who are differently abled or incapacitated and undocumented immigrants. Other areas which warrant attention include the following:

- Multivariate analysis of the SWHS data and possibly other comparative studies to understand the underlying causes of how various factors contribute to and/or cause IPV and to adjust for possible confounding factors such as age.
- The dynamics of perpetration from the perspective of the perpetrator, including IPV perpetration triggers.
- IPV dynamics in an intimate relationship, especially with regard to differentiating between the risk factors for and results of IPV.
- The medium- to long-term effects of IPV on survivors and their children.

³² These are mother and childcare centers at public hospitals.

- The overall gender norms in Suriname and how they encourage and/or discourage IPV.
- The reasons why the majority of women did not seek any help from a formal agency remitted with assisting IPV survivors.
- The association of environmental factors, in addition to respondent and partner characteristics.
- The apparent association of ethnicity and religion with IPV and NPSV. Taking the related findings at face value is not recommended. Without further analysis to determine if there are confounding variables, it would be foolhardy to assume this relationship is as direct as it seems.

References

- Abbott Galvão, L. 2015. Reporting on Violence against Women. A Case Study of Select News Media in Seven Countries in Latin America and the Caribbean. Discussion Paper IDB-DP-426. Washington, DC: Inter-American Development Bank. Accessed on August 14, 2018, from: <https://publications.iadb.org/en/reporting-violence-against-women-case-study-select-news-media-seven-countries-latin-america-and>.
- Bakboord, C. 2010. Living in Fear: A Study to the Relation between Intimate Partner Violence, Decision Making, and Sexual and Reproductive Health. Paramaribo: United Nations Population Fund (UNFPA)
- Bakboord, C., and M. Schmeitz. 2011. How About Us? Exploring Religion, Marriage, and sexuality in Relation to the Risk on HIV. Unpublished.
- Bakboord, C. 2014. Study Domestic Violence Standardized Registration Form. Unpublished.
- Bakboord C. 2015. Yesterday Victim, Today Perpetrator! Nature and Cause of Violent Behavior among Male Perpetrators of Intimate Partner Violence in Nickerie. Paramaribo: MOHA, Government of the Republic of Suriname.
- Bott, S., A. Guedes, A. P. Ruiz-Celis, and J. A. Mendoza. 2019. Intimate Partner Violence in the Americas: A Systematic Review and Reanalysis of National Prevalence Estimates. *Pan American Journal of Public Health*, 43:e26. Available from: <https://doi.org/10.26633/RPSP.2019.26>.
- CEDAW. 2018. Concluding Observations on the Combined Fourth to Sixth Periodic Reports of Suriname. Geneva, Switzerland: Committee on the Elimination of Discrimination against Women, United Nations. Available from: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/TBSearch.aspx?Lang=En&CountryID=166.
- ECLAC. 2016. Preliminary Overview of the Economies of Latin America and the Caribbean: Suriname. Santiago, Chile: Economic Commission for Latin America and the Caribbean. Accessed on May 19, 2019, from: https://repositorio.cepal.org/bitstream/handle/11362/40826/30/1601259BP_Suriname_en.pdf.
- EIU. 2018. Murder Rates Up in English-Speaking Caribbean. London, UK: *The Economist* Intelligence Unit. Available from: http://country.eiu.com/article.aspx?articleid=1536288937&Country=Guyana&topic=Economy&subtopic=Fo_2.

- García-Moreno, C., H. Jansen, M. Ellsberg, L. Heise, and C. Watts, 2005. *WHO Multi-country Study on Women's Health and Domestic Violence against Women: Initial Results on Prevalence, Health Outcomes and Women's Responses*. Geneva: World Health Organization. Available from: <https://www.who.int/reproductivehealth/publications/violence/24159358X/en/>.
- GBS. 2012. *General Population and Housing Census 2012*. Paramaribo: General Bureau of Statistics, Government of Suriname.
- Ellsberg, M., and L. Heise. 2005. *Researching Violence against Women: A Practical Guide for Researchers and Activists*. Washington, DC: World Health Organization, PATH. Available from: <https://www.who.int/reproductivehealth/publications/violence/9241546476/en/>.
- Hoeffler, A., and J. Fearon. 2014. *Conflict and Violence Assessment Paper: Benefits and Costs of the Conflict and Violence Targets for the Post-2015 Development Agenda; Post-2015 Consensus*. Tewksbury, MA: Copenhagen Consensus Center. Accessed on August 14, 2018. Available from: https://www.copenhagenconsensus.com/sites/default/files/conflict_assessment_-_hoeffler_and_fearon_0.pdf.
- ISSAT. 2015. *Suriname Country Profile*. Geneva: Geneva Centre for Security Sector Governance. Accessed in July 2018 from: <https://issat.dcaf.ch/Learn/Resource-Library/Country-Profiles/Suriname-Country-Profile>.
- Morrison, A., and M. L. Bielh. 1999. *Too Close to Home: Domestic Violence in the Americas*. Washington, DC: IDB. Available from: <https://publications.iadb.org/en/publication/16287/too-close-home-domestic-violence-americas>.
- OAS. 1994. *Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women (Convention of Belém do Pará)*. Washington, DC: Organization of American States. Available from: <https://www.oas.org/en/mesecvi/convention.asp>.
- Pemberton, C., and J. Joseph. 2018. *National Women's Health Survey for Trinidad and Tobago: Final Report*. Washington, DC: IDB. Available from: <https://publications.iadb.org/en/national-womens-health-survey-trinidad-and-tobago-final-report>.
- Publicnieuws. 2017. "Betrouwbare data van belang bij formuleren gedegen bevolkingsbeleid (Reliable data is important in formulating a sound population policy)." *Publicnieuws*, December 14, 2017. Available from: <https://publicnieuws.com/2017/12/betrouwbare-data-van-belang-bij-formuleren-gedegen-bevolkingsbeleid/>.
- Puri, L. 2016. *The Economic Costs of Violence against Women. Remarks by UN Assistant Secretary-General and Deputy Executive Director of UN Women, Lakshmi Puri at the high-level discussion on the "Economic Cost of Violence against Women."* New York, NY: UN Women. Accessed on August 13, 2018, from: www.unwomen.org/en/news/stories/2016/9/speech-by-lakshmi-puri-on-economic-costs-of-violence-against-women.
- Republic of Suriname. 1992. *1987 Constitution of the Republic of Suriname with Reforms of 1992, Article 8*. Paramaribo: Republic of Suriname.
- Republic of Suriname. 2017. *2017-2021 Policy Development Plan - Part 1: Development Priorities of Suriname*. Paramaribo: *Stichting Planbureau* Suriname (Suriname Planning Bureau Foundation). Available from: <https://www.planningofficesuriname.com/wp-content/uploads/2018/02/2017-2021-DEVELOPMENT-PLAN.pdf>.

- UN. 2018. The Sustainable Development Goals Report: 2018. New York, NY: United Nations. Available from: <https://unstats.un.org/sdgs/files/report/2018/TheSustainableDevelopmentGoalsReport2018-EN.pdf>.
- UNDP. 2018. CariSECURE Launches National Task Force in Suriname to Strengthen Data-Driven Crime Prevention. Christ Church, Barbados: United Nations Development Programme, Barbados, and the OECS. Available from: <http://www.bb.undp.org/content/barbados/en/home/presscenter/articles/2018/02/16/carisecure-launches-national-task-force-in-suriname-to-strengthen-data-driven-crime-prevention-0.html>.
- UNWomen. 2016. Infographic: Violence against Women. New York, NY: UNWomen. Available from: <http://www.unwomen.org/en/digital-library/multimedia/2015/11/infographic-violence-against-women>.
- Watson Williams, C. 2018. Women's Health Survey 2016: Jamaica: Final Report. Washington, DC: IDB. Available from: <https://publications.iadb.org/en/womens-health-survey-2016-jamaica-final-report>.
- WEF. 2017. Insight Report: The Global Gender Gap Report 2017. Geneva, Switzerland: World Economic Forum. Available from: http://www3.weforum.org/docs/WEF_GGGR_2017.pdf.
- WHO. n.d. Violence Against Women. Geneva: World Health Organization. Available from: <http://www.who.int/mediacentre/factsheets/fs239/en/>.
- WHO. 2001. Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence against Women. Geneva: WHO.
- WHO. 2012. Understanding and Addressing Violence against Women: Intimate Partner Violence. Geneva: WHO. Available from: http://apps.who.int/iris/bitstream/10665/77432/1/WHO_RHR_12.36_eng.pdf.
- WHO. 2013. Global and Regional Estimates of Violence against Women: Prevalence and Health Effects of Intimate Partner Violence and Non-Partner Sexual Violence. Geneva: WHO. Accessed in October 2018. Available from: https://apps.who.int/iris/bitstream/handle/10665/85239/9789241564625_eng.pdf?sequence=1.

Annex 1: Supplemental Tables

TABLE A1.1 Summary Characteristics of Survey Respondents

	Ever-Partnered		All Respondents	
	%	n	%	n
Respondent Age				
Total	100	1,376	100	1,527
15–19	6.3	87	12.7	194
20–24	9.9	136	10.1	155
25–29	11.8	162	11.1	170
30–34	11.6	160	10.8	165
35–39	12.6	174	11.6	178
40–44	9.5	131	8.6	131
45–49	12.1	166	11	168
50–54	9.8	135	8.9	136
55–59	9.3	127	8.5	130
60–64	7.1	98	6.5	99
Area				
Paramaribo	42.7	588	42.2	645
Paramaribo Outskirts	32.8	452	33.1	505
Rest of Coast and Interior	24.5	337	24.7	377
Religion				
None	5.7	79	5.5	83
Roman Catholic	20.6	284	19.3	295
Full Gospel (Full Gospel)	16.3	224	16.9	258
Evangelic Brother Community (Christian)	10	138	9.5	144
Hindu	24.3	335	25.7	393
Islam	15.8	217	16.1	246
Ethnicity				
Creole/African	14.5	198	13.7	209
Hindustani	28.6	392	30.3	462
Maroon/Boslandcreool	17.8	244	17.4	264

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TABLE A1.1 ○ Summary Characteristics of Survey Respondents *(continued)*

	Ever-Partnered		All Respondents	
	%	n	%	n
Javanese	18.5	254	18.2	277
Mixed	17	233	16.8	256
Other	3.7	51	3.6	55
Educational Attainment				
No education or primary only	20.2	279	19.1	292
Secondary	64.4	887	66.1	1009
Higher	15.3	211	14.8	226
Current Partnership Status				
Never partnered			9.8	148
Currently married	38.6	529	34.9	529
Living with man, not married	23.1	316	20.8	316
Regular partner, living apart	16.2	222	14.6	222
Currently no partner	22.1	302	19.9	302
Ever-Pregnant				
No	18.4	252	26	396
Yes	81.6	1122	74	1129
District				
Commewijne	7	96	6.9	105
Coronie	0.5	8	0.5	8
Marowijne	1.8	24	1.6	24
Nickerie	6.5	90	7.1	109
Para	1.2	16	1.3	19
Paramaribo	43.9	604	43.5	664
Saramacca	6.3	87	6.7	103
Sipaliwinicluste	3.9	53	3.6	56
Wanica	28.9	397	28.8	439
Main Activities During Past Week				
Employed in a public or private corporation	50.2	691	46	703
Self-employed	3.6	49	3.4	52
Housework or work as an unpaid family member	26	358	23.8	364
Unemployed	17.5	240	24.2	369
Out of the labor force	2.7	38	2.5	39
Main Source Of Income				
Income from own work	27.2	374	25.1	383
Support from partner or husband	25	344	22.5	344

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TABLE A1.1 ○ Summary Characteristics of Survey Respondents (*continued*)

	Ever-Partnered		All Respondents	
	%	n	%	n
Equal share self and partner	20.5	282	18.5	282
Support from relatives or friends	13.2	182	17	260
No income, pension, social services, or other	14.2	195	16.9	258
Ever-Married				
No	18.4	252	26	396
Yes	81.6	1122	74	1129

Source: Authors' elaboration.

TABLE A1.2 ○ Prevalence of IPV by Number of Eligible Women in the Household

Type of Partner Violence		Paramaribo		Paramaribo Outskirts		Rest of Coast and Interior		Ever-Partnered	
		%	n	%	n	%	n	%	n
Economic violence	Lifetime	13.3	78	18.2	82	18.0	61	16.0	221
Emotional violence	Lifetime	36.9	217	33.8	153	33.2	112	35.0	482
	Current	8.6	51	10.8	49	7.9	27	9.2	126
Physical violence	Lifetime	29.6	174	27.7	125	22.8	77	27.3	376
	Current	4.5	27	5.3	24	2.0	7	4.2	57
Sexual violence	Lifetime	13.2	78	13.1	59	13.2	44	13.2	181
	Current	2.8	17	2.8	13	1.5	5	2.5	35
Physical and/or sexual violence	Lifetime	34.4	202	31.8	143	28.3	96	32.0	441
	Current	6.6	39	7.1	32	3.6	12	6.0	83
None		53.0	311	51.5	232	52.4	176	52.3	720

Source: Authors' elaboration.

TABLE A1.3 ○ Lifetime and Current Prevalence of Specific Acts of Physical, Sexual, and Emotional IPV Among Ever-Partnered Women

	Paramaribo		Paramaribo Outskirts		Rest of Coast and Interior		Ever-Partnered	
	Current	Lifetime	Current	Lifetime	Current	Lifetime	Current	Lifetime
	%	%	%	%	%	%	%	%
Physical Acts of Partner Violence								
Slapped or threw something	3.7	22.2	2.6	17.3	1.5	16.4	2.8	19.2
Pushed or shoved	3	20.3	4.1	16.5	1.6	14.9	3	17.7
Hit with fist or something else	1.9	14.4	2	10.1	1.5	11.4	1.8	12.3
Kicked or dragged	1.4	11.8	1.5	7.7	1.1	10.7	1.4	10.2
Choked or burned	0.3	6.1	0.5	4.3	0.3	5.6	0.4	5.4
Threatened with or used weapon	1	7.5	0.9	6.3	0.3	6.1	0.8	6.8
Sexual Acts of Partner Violence								
Partner physically forced sexual intercourse	1.8	9.8	2.7	10.1	1.1	9.2	1.9	9.7
Have sexual intercourse with partner because afraid	1.5	7.9	1	7.1	1.5	9.8	1.4	8.1
Partner forced to do something degrading/humiliating	0.6	5.5	1	3.7	0.6	3.9	0.7	4.5
Partner insulted you or made you feel bad about yourself	7.7	29.3	8.8	23.7	6.3	23.3	7.7	26
Emotional Acts of Partner Violence								
Partner belittled or humiliated you in front of other people	3.90	17.10	3.20	10.20	2.10	15.70	3.30	14.50
Partner done things to scare or intimidate you on purpose	5.10	18.80	4.90	14.90	5.50	19.00	5.10	17.60
Partner verbally threatened to hurt you or someone you care about	2.40	11.30	4.50	13.10	2.90	13.10	3.20	12.30

Source: Authors' elaboration.

TABLE A1.4 ○ Prevalence of Physical, Sexual, and Emotional IPV Among Ever-Partnered Women by SWHS Domain Where Survivor Is Resident

	Current Physical Violence	Current Sexual Violence	Current Sexual and/or Physical Violence	Current Emotional Violence
	%	%	%	%
Paramaribo	4.5	2.8	6.6	8.6
Paramaribo Outskirts	5.3	2.8	7.1	10.8
Rest of Coast and Interior	2.0	1.5	3.6	7.9

Source: Authors' elaboration.

TABLE A1.5 ○ Characteristics of Violence During Pregnancy as Reported by Ever-Pregnant Women

	Paramaribo		Paramaribo Outskirts		Rest of Coast and Interior		Ever-Pregnant	
	%	n	%	n	%	n	%	n
Ever Beaten During a Pregnancy								
Yes	7	32	5	19	6	17	6	68
No	93	418	95	375	94	268	94	1061
Violence in pregnancy								
Ever punched or kicked in abdomen in pregnancy	31	10	41.6	8	46.5	8	38	26
Perpetrator in most recent pregnancy was father of child	96	30	83.6	16	89.1	15	90.5	61
Perpetrator in most recent pregnancy with abuse is/ was current/most recent partner/husband	79	25	52.9	10	58.3	10	66.2	45
Same person had beaten her before pregnancy	65	20	81.1	16	75.4	13	72	49
Beating Got Worse Compared to Before Pregnancy								
Beating got worse during pregnancy	40.3	8	45.1	7	16.2	2	35.6	17
Beating stayed the same during pregnancy	39.3	8	51.2	8	59.1	8	48.3	24
Beating got less during pregnancy	20.4	4	3.7	1	24.6	3	16.2	8
No answer	—	—	—	—	—	—	—	—

TABLE A1.6 ○ Prevalence of Physical IPV by Severity Among Ever-Partnered Women

	Severity of Lifetime Physical Violence					
	No Violence		Moderate		Severe	
	%	n	%	n	%	n
Total	72.7	1000	10.8	149	16.5	228
SWHS Domain						
Paramaribo	70.4	414	11.4	67	18.2	107
Paramaribo Outskirts	72.3	326	12.4	56	15.3	69
Rest of Coast and Interior	77.2	260	7.6	26	15.2	51
Respondent Age						
15–19	82.2	72	10.6	9	7.3	6
20–24	75.2	102	12.7	17	12.1	16
25–29	75.3	122	15.4	25	9.2	15
30–34	75.6	121	12.1	19	12.3	20
35–39	57.9	101	14.1	25	28.0	49
40–44	82.1	107	5.3	7	12.6	17
45–49	72.8	121	7.9	13	19.3	32
50–54	68.7	93	10.1	14	21.2	29
55–59	68.2	87	10.3	13	21.5	27
60–64	75.7	74	6.9	7	17.4	17
Religion						
None	72.0	57	15.0	12	13.0	10
Roman Catholic	65.6	186	12.5	35	21.9	62
Lutheran						
Volle Evangelie	75.0	168	11.7	26	13.3	30
Evangelic Brother Community	72.7	100	9.4	13	17.8	25
Hervormde Kerk						
Hindu	71.1	238	10.3	34	18.6	62
Islam	81.8	177	6.1	13	12.1	26
other	73.0	73	14.7	15	12.3	12
Ethnic Group						
Creole/African	66.0	131	20.9	41	13.1	26
Hindustani	72.4	284	9.4	37	18.2	71
Maroon/Boslandcreool	73.9	180	11.1	27	15.0	37
Inheems/Indiaans						
Javanese	80.4	204	9.3	24	10.3	26
Chinese						
Mixed	69.6	162	5.6	13	24.9	58
Other	77.2	39	13.4	7	9.3	5
Education of Respondent						
No education or primary	74.7	208	8.6	24	16.7	47
Secondary	71.3	633	11.7	104	17.0	151
Higher	75.7	160	9.9	21	14.4	30

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TABLE A1.6 ○ Prevalence of Physical IPV by Severity Among Ever-Partnered Women
(continued)

	Severity of Lifetime Physical Violence					
	No Violence		Moderate		Severe	
	%	n	%	n	%	n
Current Partnership Status						
Never partnered						
Currently married	81.9	434	7.0	37	11.1	59
Living with man, not married	62.2	197	17.7	56	20.1	64
Regular partner, living apart	73.5	163	11.7	26	14.8	33
Currently no partner	66.2	200	9.9	30	23.9	72
Ever-Married						
No	68.1	506	13.9	103	17.9	133
Yes	78.0	494	7.1	45	14.9	94
Have Ever Been Pregnant						
No	83.4	210	8.8	22	7.8	20
Yes	70.2	788	11.3	126	18.5	208
Main Activities During the Past Week						
Employed in a public or private corporation	68.1	470	13.2	91	18.6	129
Self-employed	73.8	36	9.1	4	17.2	8
Housework or work as unpaid family member	74.8	268	10.4	37	14.8	53
Unemployed	82.3	198	5.9	14	11.7	28
Out of the labor force	72.3	27	3.1	1	24.6	9
Main source of income						
Income from own work	64.8	242	11.0	41	24.2	90
Support from partner or husband	78.3	269	9.3	32	12.4	43
Equal share self and partner	75.5	213	13.0	37	11.5	32
Support from relatives or friends	77.5	141	8.2	15	14.2	26
No income, pension, social services, or other	69.2	135	12.2	24	18.5	36
Age at First Union (Living Together or Married)						
19 or older	81.9	373	6.5	30	11.5	53
18 or younger	67.7	119	8.8	16	23.6	42
Non-consensual Marriage						
No	79.4	471	6.9	41	13.8	82
Yes	57.3	23	11.5	5	31.2	12

Source: Authors' elaboration.

TABLE A1.7 Frequency of IPV Among Ever-Partnered Women

Type of IPV Number		Once		A Few Times		Many Times	
		n	%	n	%	n	%
Physical	Current	17	13.8	49	38.8	60	47.7
	Lifetime	67	14.0	97	2.0	318	66.0
Sexual	Current	23	38.7	15	25.4	21	35.8
	Lifetime	76	29.3	66	25.4	117	45.3
Physical and/or sexual	Current	13	36.2	10	29.0	12	34.8
	Lifetime	26	15.7	45	27.0	94	57.3
Emotional	Current	33	39.8	20	23.8	30	36.4
	Lifetime	102	24.0	111	26.0	212	49.9

Source: Authors' elaboration.

TABLE A1.8 ○ Prevalence of IPV Among Ever-Partnered Women

	Lifetime						Current						
	Physical Violence		Sexual Violence		Physical and/or Sexual Violence		Physical Violence		Sexual Violence		Physical and/or Sexual Violence		
	%	n	%	n	%	n	%	n	%	n	%	n	
SWHS domain													
Paramaribo	29.6	174	13.2	78	34.4	202	4.5	27	2.8	17	6.6	39	
Paramaribo Outskirts	27.7	125	13.1	59	31.8	143	5.3	24	2.8	13	7.1	32	
Rest of Coast and Interior	22.8	77	13.2	44	28.3	96	2.0	7	1.5	5	3.6	12	
Respondent age													
15–19	17.8	16	17.0	15	28.9	25	4.7	4	6.4	6	11.1	10	
20–24	24.8	34	17.7	24	33.5	45	8.0	11	7.0	9	13.8	19	
25–29	24.7	40	11.7	19	31.0	50	9.4	15	2.8	5	11.6	19	
30–34	24.4	39	7.5	12	28.2	45	4.4	7	2.9	5	7.0	11	
35–39	42.1	73	10.6	19	44.8	78	3.8	7	.6	1	3.8	7	
40–44	17.9	23	11.7	15	25.0	33	4.6	6	1.0	1	5.1	7	
45–49	27.2	45	17.0	28	29.6	49	1.1	2	2.1	4	2.1	4	
50–54	31.3	42	15.2	21	35.7	48	1.1	1	1.4	2	1.4	2	
55–59	31.8	40	13.9	18	34.0	43	1.9	2	2.1	3	3.2	4	
60–64	24.3	24	11.7	11	24.3	24	1.8	2			1.8	2	
Religion													
None	28.0	22	15.7	12	31.5	25	1.3	1	1.3	1	2.7	2	
Roman Catholic	34.4	98	12.6	36	40.1	114	5.6	16	2.4	7	8.0	23	
Lutheran													
Volle Evangelie	25.0	56	16.0	36	33.0	74	6.1	14	4.9	11	10.3	23	
Evangelic Brother Community	27.3	38	13.4	18	30.7	42	3.0	4	.0	0	3.0	4	
Hervormde Kerk													
Hindu	28.9	97	14.4	48	32.8	110	4.1	14	3.2	11	5.5	18	
Islam	18.2	40	7.7	17	19.8	43	2.7	6	1.5	3	4.2	9	
Other	27.0	27	14.1	14	33.7	34	3.2	3	1.7	2	3.6	4	

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TABLE A1.8 ○ Prevalence of IPV Among Ever-Partnered Women (continued)

	Lifetime			Current								
	Physical Violence	Sexual Violence	Physical and/or Sexual Violence	Physical Violence	Sexual Violence	Physical and/or Sexual Violence						
Ethnic Group												
Creole/African	34.0	67	13.0	26	39.9	79	1.5	3	2.2	4	3.6	7
Hindustani	27.6	108	14.3	56	31.3	123	3.7	14	2.7	11	4.9	19
Maroon/Boslandcreool	26.1	64	14.6	36	34.6	84	5.3	13	3.7	9	9.0	22
Inheems/Indiaans												
Javanese	19.6	50	12.0	31	23.2	59	3.6	9	1.3	3	4.9	12
Chinese												
Mixed	30.4	71	10.1	24	33.1	77	7.0	16	2.0	5	7.8	18
Other	22.8	12	15.3	8	27.9	14	3.4	2	5.2	3	8.6	4
Education of Respondent												
No education or primary only	25.3	71	13.6	38	29.6	82	3.2	9	2.3	6	4.5	13
Secondary	28.7	254	13.9	123	33.7	299	5.0	44	3.2	28	7.4	66
Higher	24.3	51	9.5	20	28.2	59	2.1	5	.0	0	2.1	5
Current Partnership Status												
Never partnered												
Currently married	18.1	96	9.8	52	20.9	110	2.7	14	1.8	10	3.6	19
Living with man, not married	37.8	120	15.8	50	41.6	132	7.7	24	3.4	11	9.8	31
Regular partner, living apart	26.5	59	13.2	29	34.1	76	4.4	10	3.5	8	7.9	17
Currently no partner	33.8	102	16.6	50	40.7	123	3.0	9	2.1	6	5.1	15
Ever-Married												
No	31.9	237	14.3	106	37.9	281	5.8	43	3.0	22	8.3	61
Yes	22.0	139	11.9	75	25.2	160	2.2	14	1.9	12	3.4	22
Have Ever Been Pregnant												
No	16.6	42	14.3	36	26.7	67	2.3	6	3.5	9	5.8	15
Yes	29.8	334	13.0	145	33.3	374	4.6	52	2.3	26	6.1	68

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TABLE A1.8 ○ Prevalence of IPV Among Ever-Partnered Women (continued)

	Lifetime						Current								
	Physical Violence			Sexual Violence			Physical and/or Sexual Violence			Physical Violence			Sexual and/or Physical Violence		
	Prevalence (%)	Number	Mean (SD)	Prevalence (%)	Number	Mean (SD)	Prevalence (%)	Number	Mean (SD)	Prevalence (%)	Number	Mean (SD)	Prevalence (%)	Number	Mean (SD)
Main Activities During the Past Week															
Employed in a public or private corporation	31.9	220	12.6	87	35.5	245	3.8	26	2.4	17	5.6	39			
Self-employed	26.2	13	20.0	10	33.2	16	8.3	4	7.1	3	8.3	4			
Housework or work as unpaid family member	25.2	90	12.7	46	29.4	105	4.6	16	2.5	9	6.6	24			
Unemployed	17.7	42	14.6	35	26.5	64	4.5	11	2.3	6	6.8	16			
Out of the labor force	27.7	10	10.2	4	27.7	10									
Main Source of Income															
Income from own work	35.2	132	16.4	61	40.0	149	5.1	19	3.0	11	6.6	25			
Support from partner or husband	21.7	75	10.8	37	25.5	88	2.9	10	2.6	9	5.5	19			
Equal share self and partner	24.5	69	9.6	27	26.8	76	3.3	9	.7	2	3.3	9			
Support from relatives or friends	22.5	41	15.4	28	31.1	57	3.3	6	1.9	4	5.3	10			
No income, pension, social services, or other	30.8	60	14.1	28	36.8	72	6.7	13	4.6	9	10.5	21			
Age at First Union (Living Together or Married)															
19 or older	18.1	82	10.5	48	21.5	98	2.4	11	2.0	9	3.9	18			
18 or younger	32.3	57	15.7	28	34.8	61	1.9	3	1.7	3	2.2	4			
Non-consensual Marriage															
No	20.6	123	10.1	60	23.7	141	2.3	14	2.0	12	3.6	21			
Yes	42.7	17	38.2	15	48.2	19	1.4	1	1.3	0	1.4	1			

Source: Authors' elaboration.

TABLE A1.9 ○ Prevalence of Emotional IPV Among Ever-Partnered Women

	None		Lifetime		Current	
	%	n	%	n	%	n
Total	65.0	895	35.0	482	9.2	126
SWHS domain						
Paramaribo	63.1	371	36.9	217	8.6	51
Paramaribo Outskirts	66.2	299	33.8	153	10.8	49
Rest of Coastal Region and Interior	66.8	225	33.2	112	7.9	27
Respondent age						
15–19	65.7	57	34.3	30	19.0	17
20–24	61.6	83	38.4	52	18.5	25
25–29	58.8	95	41.2	67	12.2	20
30–34	66.2	106	33.8	54	10.1	16
35–39	58.5	102	41.5	72	11.1	19
40–44	75.7	99	24.3	32	3.9	5
45–49	69.7	116	30.3	50	4.5	7
50–54	64.4	87	35.6	48	3.2	4
55–59	67.3	86	32.7	42	6.7	9
60–64	64.2	63	35.8	35	3.9	4
Religion						
None	74.6	59	25.4	20	6.1	5
Roman Catholic	57.8	164	42.2	120	11.6	33
Lutheran						
Volle Evangelie	60.4	135	39.6	89	12.6	28
EBG	67.9	93	32.1	44	5.9	8
Hervormde Kerk						
Hindu	65.3	218	34.7	116	8.4	28
Islam	74.6	162	25.4	55	6.3	14
Other	63.4	63	36.6	36	9.6	10
Ethnicity						
Creole/African	63.8	127	36.2	72	7.4	15
Hindustani	67.3	264	32.7	128	7.9	31
Maroon/Boslandcreool	62.6	152	37.4	91	12.0	29
Inheems/Indiaans						
Javanese	73.1	186	26.9	69	9.3	24
Chinese						
Mixed	57.1	133	42.9	100	10.8	25
Other	65.2	33	34.8	18	5.2	3
Education of Respondent						
No education or primary only	72.2	201	27.8	78	4.9	14
Secondary	62.6	555	37.4	332	10.7	95
Higher	65.6	138	34.4	73	8.3	18

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TABLE A1.9 ○ Prevalence of Emotional IPV Among Ever-Partnered Women (continued)

	None		Lifetime		Current	
	%	n	%	n	%	n
Current Partner Status						
Never partnered						
Currently married	76.0	402	24.0	127	5.8	31
Living with man, not married	58.5	185	41.5	131	14.1	44
Regular partner, living apart	64.0	142	36.0	80	8.3	19
Currently no partner	54.2	164	45.8	139	10.5	32
Ever-Married						
No	59.4	442	40.6	301	12.0	89
Yes	71.5	453	28.5	180	5.9	37
Ever-Pregnant						
No	68.6	173	31.4	79	8.8	22
Yes	64.1	719	35.9	403	9.3	104
Main Economic Activity						
Employed in a public or private corporation	62.0	428	38.0	262	8.5	59
Self-employed	70.6	35	29.4	14	8.4	4
Housework or work as unpaid family member	70.4	252	29.6	106	8.2	29
Unemployed	63.5	153	36.5	88	14.1	34
Out of the labor force	69.7	26	30.3	11	.0	0
Main Source of Income						
Income from own work	56.5	211	43.5	162	10.4	39
Support from partner or husband	72.4	249	27.6	95	6.9	24
Equal share self and partner	70.5	199	29.5	83	7.0	20
Support from relatives or friends	61.9	113	38.1	69	8.3	15
No income, pension, social services, other	63.1	123	36.9	72	14.9	29
Age at First Union (Living Together or Married)						
19 or older	75.0	342	25.0	114	5.4	24
18 or younger	62.4	110	37.6	66	7.2	13
Non-consensual Marriage						
No	72.6	431	27.4	163	5.7	34
Yes	55.7	22	44.3	17	8.0	3

Source: Authors' elaboration.

TABLE A1.10 ○ Characteristics of Ever-Partnered Women's Partners

	Paramaribo		Paramaribo Outskirts		Rest of Coastal Region and Interior		National	
	n	%	n	%	n	%	n	%
Partner's Age								
15–24	71	12.3%	28	6.4%	24	7.2%	123	9.1%
25–34	116	20.0%	88	19.9%	64	19.5%	268	19.8%
35–44	107	18.3%	114	25.7%	86	26.0%	306	22.6%
45–54	112	19.3%	99	22.5%	70	21.3%	282	20.8%
55–64	110	18.9%	78	17.8%	51	15.4%	239	17.7%
65 and +	65	11.2%	34	7.7%	35	10.5%	133	9.9%
Total	582	100.0%	440	100.0%	329	100.0%	1351	100.0%
Difference in Age Between Partners								
Woman older	59	10.1%	49	11.2%	34	10.3%	142	10.5%
Partner at most 3 years older	216	37.2%	164	37.3%	91	27.7%	472	34.9%
Partner 4 to 8 years older	168	28.9%	157	35.6%	120	36.5%	445	32.9%
Partner at least 9 years older	138	23.8%	70	15.9%	84	25.6%	292	21.7%
Partner's Education								
No education or primary only	65	12.6%	98	25.2%	101	35.0%	265	22.1%
Secondary	359	69.2%	263	67.4%	175	60.4%	797	66.5%
Higher	94	18.2%	29	7.4%	13	4.6%	136	11.4%
Partner's Employment Status								
Employed	337	78.8%	286	81.2%	229	85.9%	852	81.4%
Unemployed	10	2.3%	22	6.1%	15	5.7%	47	4.5%
Out of the labor force	81	18.8%	45	12.6%	22	8.4%	147	14.1%
Partner Drinks Alcohol at Least Once a Week								
No	479	81.5%	366	81.1%	285	84.4%	1129	82.1%
Yes	109	18.5%	85	18.9%	52	15.6%	247	17.9%
Partner Uses Recreational Drugs at Least Once a Week								
No	566	96.2%	438	97.0%	327	96.9%	1330	96.6%
Yes	22	3.8%	14	3.0%	10	3.1%	46	3.4%
Partner Has Had Another Relationship								
No	465	79.0%	336	74.3%	238	70.8%	1039	75.5%
Yes	123	21.0%	116	25.7%	99	29.2%	338	24.5%
Partner Has Had Children with Another Woman								
No	77	62.2%	74	63.7%	58	58.6%	208	61.7%
Yes	47	37.8%	42	36.3%	41	41.4%	129	38.3%
Missing values (not stated) for the following variables: age, education, employment								

Source: Authors' elaboration.

TABLE A1.11 ○ Percentage of Respondents Reporting Violence Against Her Mother

	Mother Hit by Husband		Mother Hit as a Child		Mother Insulted or Humiliated as a Child	
	%	p-value	%	p-value	%	p-value
Lifetime Sexual Violence						
Have ever-partnered	20.9	0.000	13.2	0.000	13.7	0.000
No	18.9		10.8		11.9	
Yes	33.7		29.1		25.9	
Type of IPV						
No violence	16.5	0.000	8.6	0.000	10.2	0.000
Physical only	27.6		18.8		18.1	
Sexual only	24.2		21.0		26.1	
Both	39.0		33.6		25.8	
Severity of Lifetime Physical Violence						
No violence	17.0	0.000	9.4	0.000	11.2	0.000
Moderate	28.8		17.6		17.4	
Severe	32.7		27.1		22.6	
SWHS Domain						
Paramaribo	22.9	0.201	16.4	0.010	16.3	0.062
Paramaribo Outskirts	18.4		9.9		12.1	
Rest of Coastal Region and Interior	20.7		12.4		11.5	

Source: Authors' elaboration.

TABLE A1.12 Gender Attitudes: Percentage of Interviewed Women that Favor Specific Gender Norms or Roles According to Selected Characteristics

	Emotional Violence						Physical Violence						Sexual Violence						Physical and/or Sexual Violence					
	LifETIME			CURRENT			LifETIME			CURRENT			LifETIME			CURRENT			LifETIME			CURRENT		
	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.
It is wife's obligation to have sex with husband																								
No	63	37	0	90	10	0.066	72	28	0.248	96	4	0.847	87	14	0.484	98	2	0.709	67	33	0.084	94	6	0.974
Yes	70	30		94	7		75	25		96	4		88	12		97	3		72	28		94	6	
Women and men should share authority in the family																								
No	82	18	0	100	0	0.021	75	25	0.764	98	2	0.426	96	4	0.047	100	0	0.240	72	28	0.532	98	2	0.214
Yes	64	36		91	10		73	27		96	4		87	14		97	3		68	32		94	6	
A woman's role is to take care of her home																								
No	70	30	0	90	10	0.268	78	22	0.002	97	3	0.314	90	10	0.010	99	1	0.036	74	26	0.001	96	4	0.032
Yes	63	38		92	9		70	30		95	5		85	15		97	3		65	35		93	7	
It is natural that men should be the head of the family																								
No	70	30	0	91	10	0.704	78	22	0.001	96	4	0.502	91	9	0.000	99	1	0.007	75	25	0.000	96	4	0.011
Yes	62	38		91	9		70	31		96	4		84	16		97	3		64	36		93	7	
A wife should always obey her husband																								
No	64	36	0	91	9	0.960	73	27	0.473	95	5	0.136	87	13	0.859	97	3	0.729	69	31	0.321	94	7	0.297
Yes	67	33		91	9		71	29		97	3		87	13		98	2		66	34		95	5	
A woman should be able to spend her own money																								
No	70	30	0	94	6	0.014	74	26	0.613	96	4	0.797	87	13	0.801	97	3	0.504	67	33	0.791	94	6	0.744
Yes	63	37		90	10		72	28		96	4		87	13		98	2		68	32		94	6	

Source: Authors' elaboration.

TABLE A1.14 ○ Justification of Violence: Percentage of Interviewed Women that Favor Men Hitting Their Wives/Partners for Specific Reasons According to Selected Characteristics

	Emotional Violence						Physical Violence						Sexual Violence						Physical and/or Sexual Violence					
	LifETIME			CURRENT			LifETIME			CURRENT			LifETIME			CURRENT			LifETIME			CURRENT		
	No (%)	Yes (%)	p.val.	No (%)	Yes (%)	p.val.	No (%)	Yes (%)	p.val.	No (%)	Yes (%)	p.val.	No (%)	Yes (%)	p.val.	No (%)	Yes (%)	p.val.	No (%)	Yes (%)	p.val.	No (%)	Yes (%)	p.val.
If she goes out without telling him																								
No	65	35	0.575	91	9	0.101	73	27	0.659	96	4	0.499	87	13	0.056	98	2	0.065	68	32	0.608	94	6	0.412
Yes	70	31		98	2		75	25		98	2		77	23		93	7		65	35		91	9	
If she neglects the children																								
No	64	36	0.109	91	9	0.528	72	28	0.331	96	4	0.616	88	12	0.000	98	2	0.000	68	32	0.350	94	6	0.019
Yes	72	28		92	8		76	24		97	3		76	24		91	9		64	36		89	11	
If she argues with him																								
No	65	35	0.276	91	9	0.919	73	27	0.549	96	4	0.757	87	13	0.008	98	2	0.000	68	32	0.114	94	6	0.002
Yes	75	25		90	10		77	23		98	2		71	29		81	19		55	45		79	21	
If she refused to have sex with him																								
No	65	35	0.318	91	9	0.314	73	27	0.599	96	4	0.509	87	13	0.525	98	3	0.608	68	32	0.890	94	6	0.422
Yes	84	16		100	0		84	16		100	0		82	18		100	0		70	30		100	0	
If she burns the food																								
No	65	35	0.676	91	9	0.463	73	27	0.736	96	4	0.960	87	13	0.002	98	2	0.001	68	32	0.102	94	6	0.154
Yes	61	39		85	15		70	30		96	4		65	35		89	12		54	46		89	12	
If he suspects she is having an affair																								
No	65	35	0.344	91	9	0.944	72	28	0.425	96	4	0.827	87	13	0.039	98	2	0.000	68	32	0.780	94	6	0.064
Yes	69	31		91	9		76	24		96	4		80	20		92	8		69	31		90	10	

Source: Authors' elaboration.

TABLE A1.15 Controlling Behavior Among Ever-Partnered Women

	Emotional Violence						Physical Violence						Sexual Violence						Physical and/or Sexual Violence					
	Lifetime			Current			Lifetime			Current			Lifetime			Current			Lifetime			Current		
	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.	No (%)	Yes (%)	p-val.
Does not permit you to meet your female friends																								
No	69.4	30.6	0.000	93.3	6.7	0.000	75.5	24.5	0.000	96.8	3.2	0.000	89.4	10.6	0.000	98.3	1.7	0.000	71.7	28.3	0.000	95.4	4.6	0.000
Yes	22.9	77.1		67.3	32.7		45.2	54.8		86.2	13.8		62	38		89.6	10.4		32.3	67.7		79.9	20.1	
Tries to limit your contact with your family of birth																								
No	67.6	32.4	0.000	91.5	8.5	0.000	75.4	24.6	0.000	96.1	3.9	0.020	88.3	11.7	0.000	98.2	1.8	0.000	70.8	29.2	0.000	94.6	5.4	0.000
Yes	19.7	80.3		78.4	21.6		26	74		90.3	9.7		61.7	38.3		85.3	14.7		19.7	80.3		82.8	17.2	
Insists on knowing where you are at all times																								
No	69.8	30.2	0.000	94.6	5.4	0.000	76.8	23.2	0.000	97.9	2.1	0.000	90.8	9.2	0.000	99.7	0.3	0.000	74.2	25.8	0.000	97.5	2.5	0.000
Yes	58.9	41.1		86.1	13.9		67.5	32.5		93.2	6.8		81.7	18.3		94.7	5.3		60.1	39.9		89.4	10.6	
Gets jealous or angry if you talk with another man																								
No	73.9	26.1	0.000	95.1	4.9	0.000	79.1	20.9	0.000	97.9	2.1	0.000	92	8	0.000	98.7	1.3	0.000	76.5	23.5	0.000	97	3	0.000
Yes	50	50		83.6	16.4		61.8	38.2		92.4	7.6		78.2	21.8		95.4	4.6		53.5	46.5		88.8	11.2	
Frequently accuses you of being unfaithful																								
No	71.9	28.1	0.000	93.7	6.3	0.000	78	22	0.000	97.8	2.2	0.000	89.8	10.2	0.000	98.2	1.8	0.000	74.3	25.7	0.000	96.3	3.7	0.000
Yes	30.3	69.7		76.6	23.4		45.8	54.2		85.9	14.1		72	28		93.9	6.1		36.4	63.6		82.2	17.8	
Expects you to ask his permission before seeking health care for yourself																								
No	66.7	33.3	0.000	91.4	8.6	0.020	74.2	25.8	0.000	96	4	0.536	88.6	11.4	0.000	98.3	1.7	0.000	70.1	29.9	0.000	94.7	5.3	0.000
Yes	49.3	50.7		85.6	14.4		58.9	41.1		94.6	5.4		70.9	29.1		89.8	10.2		48.6	51.4		87	13	
Does not trust you with any money																								
No	66.7	33.3	0.058	91.8	8.2	0.077	73.5	26.5	0.284	96.5	3.5	0.065	90.6	9.4	0.000	98.8	1.2	0.000	70.4	29.6	0.005	95.5	4.5	0.001
Yes	61.5	38.5		88.8	11.2		70.8	29.2		94.4	5.6		79.1	20.9		94.7	5.3		62.9	37.1		90.8	9.2	
Checks your cell phone to see who you have called and who has called you																								
No	68.9	31.1	0.000	93.7	6.3	0.000	75.7	24.3	0.000	97.1	2.9	0.000	88.4	11.6	0.000	98	2	0.002	72	28	0.000	95.8	4.2	0.000
Yes	43.9	56.1		75.1	24.9		56.3	43.7		88.8	11.2		78.5	21.5		94.5	5.5		46.5	53.5		84.1	15.9	

Source: Authors' elaboration.

TABLE A1.16 Frequency of Controlling Behavior Among Ever-Partnered Women

Controlling Behavior	Emotional Violence						Physical Violence						Sexual Violence						Physical and/or Sexual Violence					
	LifETIME			CURRENT			LifETIME			CURRENT			LifETIME			CURRENT			LifETIME			CURRENT		
	No (%)	Yes (%)	p-value	No (%)	Yes (%)	p-value	No (%)	Yes (%)	p-value	No (%)	Yes (%)	p-value	No (%)	Yes (%)	p-value	No (%)	Yes (%)	p-value	No (%)	Yes (%)	p-value	No (%)	Yes (%)	p-value
None	75.6	24.4	0.000	97.4	2.6	0.000	79	21	0.000	98.9	1.1	0.000	94	6	0.000	100	0	0.000	78.5	21.5	0.000	98.9	1.1	0.000
One	74.9	25.1		95.6	4.4		82.2	17.8		97.7	2.3		92.8	7.2		99.5	0.5		78.7	21.3		97.2	2.8	
More than one	52.4	47.6		84.2	15.8		62.6	37.4		92.7	7.3		79.1	20.9		95.3	4.7		54.9	45.1		89.3	10.7	

Source: Authors' elaboration.

TABLE A1.17 ○ General, Physical, and Mental Health Problems Reported Among Ever-Partnered Women by Physical and/or Sexual IPV

General health status	Rest of Coastal Region and Interior												Total											
	Paramaribo				Paramaribo Outskirts																			
	Yes	No	Ever-Partnered		Yes	No	Ever-Partnered		Yes	No	Ever-Partnered		Yes	No	Ever-Partnered									
%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n							
Some/many problems with overall health	49.3	100	39.8	154	43.1	253	65.5	94	42.4	131	49.7	224	48.7	46	47.6	115	47.9	161	54.4	240	42.7	399	46.4	639
Some/many problems with performing usual activities	2.2	4	2.1	8	2.1	13	8.6	12	2.7	8	4.6	21	7.8	7	1.3	3	3.1	11	5.5	24	2.1	20	3.2	44
Some/many problems with pain	13.9	28	9.5	37	11.0	65	19.4	28	9.8	30	12.8	58	30.4	29	8.5	21	14.7	50	19.3	85	9.3	87	12.5	172
None	47.8	97	57.1	220	53.9	317	32.5	47	55.6	171	48.3	218	41.3	39	49.4	119	47.1	159	41.4	183	54.6	511	50.4	694

Source: Authors' elaboration.

TABLE A1.18 Use of Health Services and Medication in Past 4 Weeks Among Ever-Partnered Women by Physical and/or Sexual IPV

	Paramaribo						Paramaribo Outskirts						Rest of Coastal Region and Interior						Total	
	No		Yes		No		Yes		No		Yes		No		Yes		No	Yes		
	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n		
Took medicine to sleep	11.4	44	16.9	34	17.5	54	22.3	32	10.7	26	20.0	19	13.2	124	19.3	85				
Took medicine for pain	31.7	122	47.5	96	41.1	127	56.9	82	43.2	104	54.3	52	37.8	353	52.0	229				
Took medicine for sadness/depression	2.2	9	5.2	10	4.7	14	11.3	16	4.4	11	6.1	6	3.6	34	7.4	32				
None	65.0	251	47.0	95	56.5	174	41.1	59	56.0	135	42.1	40	59.8	560	44.0	194				

Source: Authors' elaboration.

TABLE A1.19 Other Psychological Risk Factors Reported Among Ever-Partnered Women by Physical and/or Sexual IPV

	Paramaribo						Paramaribo Outskirts						Rest of Coastal Region and Interior						Total					
	Yes		No		Ever-Partnered		Yes		No		Ever-Partnered		Yes		No		Ever-Partnered		Yes		No		Ever-Partnered	
	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n
Suicidal ideation or attempt	27.4	55	10.3	40	16.2	95	34.9	50	15.6	48	21.7	98	37.3	36	18.5	45	23.8	80	32.0	141	14.2	133	19.9	274
Drink alcohol at least once a week	7.0	14	3.2	12	4.5	26	3.7	5	1.2	4	2.0	9	3.2	3	3.0	7	3.1	10	5.1	22	2.5	23	3.3	46
Use of recreational drugs at least once a week	1.7	3	0.0	0	.6	3			0.2	1	0.1	1							0.8	3	0.1	1	0.3	4
None	67.6	137	86.5	334	80.0	470	63.3	91	83.0	256	76.7	346	59.5	57	78.5	190	73.1	246	64.5	284	83.3	779	77.2	1063

Source: Authors' elaboration.

TABLE A1.20 ○ Impact of Partner Behavior on Income-Generating Activities by Experience of IPV

	Paramaribo												Rest of Coastal Region and Interior												Total							
	Physical				Sexual				Both				Ever-Partnered				Physical				Sexual				Both				Ever-Partnered			
	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n
Work not disrupted	48.3	60	32.1	9	25.4	13	0.4	82	42.5	36	45.4	8	28.9	12	0.4	56	44.4	23	51.2	10	25.9	7	0.4	39	45.7	119	41.4	27	26.7	31	0.4	177
Husband or partner interrupted work	1.9	2	5.0	1	20.7	10	0.1	14	2.3	2			16.8	7	0.1	9	2.9	2			12.1	3	0.0	5	2.2	6	2.1	1	17.4	20	0.1	28
Unable to concentrate	13.0	16	17.1	5	29.8	15	0.2	36	9.9	8	17.0	3	17.5	7	0.1	19	5.4	3			19.4	5	0.1	8	10.5	27	12.1	8	23.2	27	0.1	62
Unable to work, sick leave	10.5	13			16.8	8	0.1	21	4.5	4			5.3	2	0.0	6	6.5	3			12.5	3	0.1	7	7.8	20		11.8	14	0.1	34	
Lost confidence in own ability	2.0	2			20.0	10	0.1	12	0.7	1	7.9	1	4.2	2	0.0	4	6.9	4			5.3	1	0.1	5	2.5	7	2.2	1	11.2	13	0.0	21
N/A (no work for money)	23.3	29	28.6	8	29.4	15	0.3	52	43.2	36	25.7	5	32.5	13	0.4	54	41.4	21	44.1	8	44.1	11	0.4	41	33.3	86	32.3	21	33.8	39	0.3	147
None	6.1	8	17.1	5	3.5	2	0.1	14			4.0	1	1.9	1	0.0	2	1.0	1	4.7	1			0.0	1	3.1	8	9.9	6	2.2	3	0.0	17

Source: Authors' elaboration.

TABLE A1.21 ○ Children’s Well-Being as Reported by Women with Children 5–12 Years Old by Women’s Experience of Physical and/or Sexual IPV

	Paramaribo		Paramaribo Outskirts		Rest of Coastal Region and Interior		Total	
	Yes	No	Yes	No	Yes	No	Yes	No
	%	%	%	%	%	%	%	%
Impact of IPV on Children’s Lives								
Nightmares	17.7	5.3	17.8	14.4	7.3	4.1	15.1	8.2
Bedwetting	14.8	2.7	34.7	19.0	25.1	16.4	25.0	13.1
Child quiet or withdrawn	18.7	22.6	29.7	2.1	19.0	7.9	23.0	10.3
Child aggressive	40.8	11.0	32.3	16.7	24.0	14.6	33.4	14.3
Child has run away		1.1	2.5	2.1	2.8	1.1	1.7	1.5
Impact of IPV on Children at School								
Child dropped out of school	2.7	5.7		2.7	1.5		1.3	2.7
Child had to repeat school	11.1	14.4	31.3	14.5	27.8	29.6	23.8	19.7

Source: Authors’ elaboration.

TABLE A1.22 ○ Main Reasons Women Who Experienced IPV Left Home Last Time They Left

	Paramaribo		Paramaribo Outskirts		Rest of Coastal Region and Interior		Total	
	%	n	%	n	%	n	%	n
Total	100.0	106	100.0	55	100.0	54	1.0	216
Encouraged by friends and/or family	3.9	4	2.3	1	4.9	3	0.0	8
Could not endure more	68.1	72	60.1	33	65.3	35	0.7	141
Badly injured	3.6	4	4.5	2	1.5	1	0.0	7
He threatened or tried to kill her	7.5	8	3.2	2	9.7	5	0.1	15
He threatened or hit children	5.1	5	2.6	1	—	—	0.0	7
Saw that children suffering	7.4	8	2.0	1	6.0	3	0.1	12
Thrown out of the home	3.0	3	7.5	4	2.6	1	0.0	9
Afraid she would kill him	1.1	1	1.4	1	7.4	4	0.0	6
Afraid he would kill her	8.9	9	7.2	4	2.6	1	0.1	15
No particular incident	6.7	7	2.5	1	—	—	0.0	8
Other	29.0	31	32.9	18	27.3	15	0.3	64
None	1.2	1	1.4	1	—	—	0.0	2

Source: Authors' elaboration.

TABLE A1.23 ○ Main Reasons Women Who Experienced IPV Did Not Leave Home

	Paramaribo		Paramaribo Outskirts		Rest of Coastal Region and Interior		Total	
	%	n	%	n	%	n	%	n
Total	100.0	49	100.0	58	100.0	26	1.0	134
Didn't want to leave children	8.8	4	34.1	20	21.1	6	0.2	30
Holiness of marriage	9.4	5	4.0	2	22.1	6	0.1	13
Didn't want to bring shame on family	4.0	2	12.4	7	12.4	3	0.1	12
Couldn't support children	2.8	1	.0	0	3.9	1	0.0	2
Loved him	45.8	23	19.2	11	23.8	6	0.3	40
Didn't want to be single	5.6	3	3.8	2			0.0	5
Family said to stay	4.2	2	3.7	2	2.7	1	0.0	5
Forgave him	19.3	10	12.9	8	16.1	4	0.2	21
Thought he would change	16.5	8	14.4	8	11.9	3	0.1	20
Threatened her and/or children					2.3	1	0.0	1
Nowhere to go	1.5	1	3.2	2	7.2	2	0.0	4
Violence normal or not serious	14.6	7	38.2	22	35.4	9	0.3	39
Children need a father, both parents	5.4	3	15.9	9	7.0	2	0.1	14

Source: Authors' elaboration.

Annex 2: Suriname Women's Health Survey Sample Distribution by Estimation Domain

Given the survey objectives and the data available, the Suriname population was split in three geographic domains for sampling purposes:

1. **Paramaribo**, which covers Paramaribo district.
2. **Paramaribo outskirts**, which covers part of the population that reside in districts contiguous to Paramaribo district (Wanica, Saramacca and Commewijne), and who generally commute to Paramaribo on a daily basis.
3. **Rest of the coast and Interior**, which covers the coastal areas excluding Great Paramaribo, plus the vast Interior region that gathers in 137 small villages located in most part of Sipaliwini, the southern half of Brokopondo and small portions of other districts. Although this domain covers a much larger territory than the other two, it is the smallest domain in terms of population.

TABLE A2.1 ○ Distribution of Surveyed Women Among Domains

Domain	Number of interviewed women
Paramaribo	505
Paramaribo outskirts	618
Rest of coast and Interior	411
Total	1,534

Annex 3: Suriname National Domestic Violence Committee

Carmen Lie Kwie Sjoë-Rasam, Office of Public Prosecution, Ministry of Justice and Police

Henriette A. E. Daniël, Suriname Police Corps

Asha Naipal-Soerdjbalie, Office for Victim Support

Bidiawatie Nanden-Harpal, Bureau of Women and Child Policy, Ministry of Justice and Police

Yvonne Towikromo, Ministry of Internal Affairs

Monique Soekrasno, Ministry of Social Affairs and Housing

Saskia Susanna de Meza, Ministry of Health

Riedo Calor Banai, Ministry of Regional Development

Diana Gaddum- Riedewald, Ministry of Education, Science, and Culture

Claudia Halfhide, Foundation Stop Violence

Carlo Rudolf Lansdorf, Foundation De Stem

Annex 4: Suriname Women's Health Survey 2018 Survey Instrument

Administration Form

Identification

Country Code _____
 District [][]
 Resort cluster [][]
 Dwelling No. [][][][]
 Household Number [][][][]
 Name of Household Head : _____
 Urban = 1/Rural = 2 []

Interviewer Visits

	1	2	3	Final Visit
Date	_____	_____	_____	Day [][]
Interviewers Code	_____	_____	_____	Month [][]
Result***	_____	_____	_____	Year [][][][]
				Interviewer's no [][][][]
				Result [][]

Next Visit:				Total number
Date	_____	_____		of visits []
Time	_____	_____		
Location				

Questionnaires completed?	*** Result Codes	Check HH selection form:
[] 1. None completed <input type="checkbox"/>	Refused (specify):.....	Total in household (Q1)
 11	[][]
	Dwelling vacant or address not a dwelling..... 12	
	Dwelling destroyed 13	
	Dwelling not found, not accessible..... 14	
	Entire HH absent for extended period..... 15	
	Selected woman not at home at time of visit..... 16 <input type="checkbox"/> Need To Return	
	HH respondent postponed <input type="checkbox"/> Need To Return	
	interview 17	

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(continued)

Interviewer Visits		
[] 3. Woman's questionnaire partly <input type="checkbox"/>	Does not want to continue (specify):..... 31	
	Rest of interview postponed to next visit..... 32	<input type="checkbox"/> Need to return
[] 4. Woman's questionnaire completed <input type="checkbox"/>	41	
Language of questionnaire		[][]
Language Interview conducted in		[][]
Field Supervisor/Editor	Office Editor	Entered By
Name [][]	Name [][]	Entry 1:
Day [][]	Day [][]	_____
Month [][]	Month [][]	Entry 2:
Year [][]	Year [][]	_____

Administration Form

Identification				
Country Code				
District ressort				[][]
Cluster				[][]
Dwelling No.				[][][][]
Household Number				[][][]
Name of Household Head : _____				[]
Urban = 1/Rural = 2				[]
Interviewer Visits				
	1	2	3	Final Visit
Date	_____	_____	_____	Day [][]
Interviewers Name	_____	_____	_____	Month [][]
Result***	_____	_____	_____	Year [][][][]
				Interviewer's no
				[][][][]
				Result [][]
Next visit:				Total number of visits []
Date	_____	_____	_____	
Time	_____	_____	_____	
Location	_____	_____	_____	

(continued on next page)

(continued)

Interviewer Visits		
Questionnaires completed?	*** Result Codes	Check HH selection form:
[] 1. None completed <input type="checkbox"/>	Refused (specify):..... 11	Total in household (Q1) [][]
	Dwelling vacant or address not a dwelling..... 12	
	Dwelling destroyed 13	
	Dwelling not found, not accessible..... 14	
	Entire HH absent for extended period..... 15	
	Selected woman not at home at time of visit..... 16	<input type="checkbox"/> Need To Return
	HH respondent postponed interview 17	<input type="checkbox"/> Need To Return
[] 3. Woman's questionnaire partly <input type="checkbox"/>	Does not want to continue (specify):..... 31	
	Rest of interview postponed to next visit..... 32	<input type="checkbox"/> Need to return
[] 4. Woman's questionnaire completed <input type="checkbox"/> 41	
Language of questionnaire		[][]
Language Interview conducted in		[][]
Field Supervisor/Editor	Office Editor	Entered By
Name [][]	Name [][]	Entry 1:
Day [][]	Day [][]	_____
Month [][]	Month [][]	Entry 2:
Year [][]	Year [][]	_____

If More than One HH in Selected Dwelling: Fill Out Seperate HH Selection Form for Each One

Household Selection Form					
Hello, my name is _____. I am visiting your household to conduct a survey on behalf of the IDB across Suriname to learn about your health and safety.					
1	Please can you tell me how many people live here and share food? PROBE: Does this include children (including infants) living here? Does it include any other people who may not be members of your family, such as domestic servants, lodgers, or friends who live here and share food? Make sure these people are included in the total			Total number of people in household [][]	
2	Is the head of the household male or female?			Male..... 1	Female..... 2
				Both 3	
	Female household members	Relationship to head of HH	Residence	Age	Eligible
3	Today we would like to talk to one woman or girl from your household. To enable me to identify whom I should talk to, would you please give me the first names of all girls or women who usually live in your household (and share food).	What is the relationship of name to the head of the household.* (use codes below)	Does name usually live here? special cases: See (A) below.	How old is name ? (Years, more or less)	See criteria below (A +B)
Line num.			Yes No		Yes No
1			1 2		1 2
2			1 2		1 2
3			1 2		1 2
4			1 2		1 2
5			1 2		1 2
6			1 2		1 2
7			1 2		1 2
8			1 2		1 2
9			1 2		1 2
10			1 2		1 2
Codes	1. Head	7. Mother		13. Domestic Worker/Employee	
	2. Wife	8. Mother-In-Law		14. Lodger	
	3. Partner)	9. Sister		15. Friend	
	4. Daughter	10. Sister-In-Law		98. Other Non Relative:	
	5. Daughter-In-Law	11. Other Relative		_____	
	6. Granddaughter	12. Adopted/Foster/Step Daughter			

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Household Selection Form

(A) Special cases to be considered member of household:

- *Domestic* worker/employee if they sleep 5 nights a week or more in the household.
- *Visitors* if they have slept in the household for the past 4 weeks.

No eligible woman in HH:

- Say “I cannot continue because i can only interview women 15–64 years old. thank you for your assistance.” Finish here.

* If both (male and female) are the head, refer to the male.

Administered to Any Responsible Adult in Household

Household Questionnaire

Questions & Filters

Coding Categories

QUESTIONS 1–6: COUNTRY-SPECIFIC SOCIOECONOMIC INDICATORS, TO BE ADAPTED IN EACH COUNTRY

1	If you don't mind, I would like to ask you a few questions about your household. What is the main source of drinking water for your household?	Piped water in the dwelling.....	01
		Piped water outside the dwelling ≤ 200m.....	02
		Piped water outside the dwelling > 200m.....	03
		Rainwater in ton, bin/tank.....	04
		Well.....	05
		Creek/river.....	06
		Delivered by water tank/truck.....	07
		Other:.....	96
		Don't know/don't remember.....	98
Refused/no answer.....	99		
2	What type of toilet facilities does your household have?	WC with flushing (linked to septic tank).....	01
		WC not linked to septic tank.....	02
		Open well or hole in the ground.....	03
		River or creek.....	04
		Bush or field.....	05
		Other:.....	96
		Don't know/don't remember.....	98
		Refused/no answer.....	99
3	What is the main type of material used in constructing the roof? Record observation	Metal roofing sheets/roof tiles (zinc, galvanized, aluminum).....	01
		Wooden roof tiles.....	02
		Concrete.....	03
		Tile.....	04
		Asbestos.....	05
		Palm leaves (Pina, tasi, etc.).....	06
		Other:.....	07
		Don't know/don't remember.....	08
		Refused/no answer.....	09

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(continued)

Household Questionnaire				
Questions & Filters		Coding Categories		
4	Does your household have:	Yes	No	DK
	a. Electricity	1	2	8
	b. A refrigerator	1	2	8
	c. Computer	1	2	8
	d. Air Conditioner	1	2	8
	e. Clothes Dryer	1	2	8
	f. Internet	1	2	8
	g. A vehicle	1	2	8
<hr/>				
5				
<hr/>				
6	How many rooms in your household are used for sleeping?	Number of rooms..... [] []		
		Don't know/don't remember.....		98
		Refused/No answer.....		99
<hr/>				
7	Are you concerned about the levels of crime and/or violence in your neighborhood (like robberies or assaults)?	Not concerned		1
	Would you say that you are not at all concerned, a little concerned, or very concerned?	A little concerned		2
		Very concerned.....		3
		Don't know/don't remember.....		8
		Refused/no answer.....		9
<hr/>				
8	In the past 4 weeks, has someone from this household been the victim of a crime in this neighborhood, such as a robbery or assault?	Yes.....		1
		No.....		2
		Don't know/don't remember.....		8
		Refused/no answer.....		9
<hr/>				
9	Note sex of respondent	Male.....		1
		Female		2

Thank you very much for your assistance.

Is now a good time to talk?

It's very important that we talk in private. Is this a good place to hold the interview, or is there somewhere else that you would like to go?

Individual Consent Form for Woman's Questionnaire

Hello, my name is *. I am conducting a survey for the Inter-American Development Bank in Suriname to learn about women's health and well-being. You and many other women have been chosen at random to participate in the study.

The questionnaire will include questions regarding your general health and life experiences, including incidents of gender-based violence. Some of the topics may be personal and difficult to discuss, but many women have found it useful to have the opportunity to talk. You have the right to skip any questions that you don't want to answer or to pause or stop the interview at any time. There are no right or wrong answers.

I want to assure you that all of your answers will be kept strictly confidential. I will not keep a record of your name or address. Your participation is completely voluntary, but your experiences could be very helpful to other women in Suriname. The information you provide will be anonymously combined with that of women aged 15 to 64 from around the country to inform policies and programs that will benefit women and girls.

In order to protect your privacy, depending on the topic of the interview, if anyone enters the room while we are talking, we may stop the interview or change questions. We don't want you to feel under any pressure to talk to us, especially if you're worried that it might be risky for you. Please take a few moments to consider whether talking to us may increase your risk of violence, whether at home or in your community. We want to ensure you that you are as safe as possible if you do choose to participate.

Do you have any questions?

The interview takes about an hour to complete. Do you agree to be interviewed?

NOTE WHETHER RESPONDENT AGREES TO INTERVIEW OR NOT

DOES NOT AGREE TO BE INTERVIEWED  THANK PARTICIPANT FOR HER TIME AND END

AGREES TO BE INTERVIEWED



TO BE COMPLETED BY INTERVIEWER

I CERTIFY THAT I HAVE READ THE ABOVE CONSENT PROCEDURE TO THE PARTICIPANT.

SIGNED: _____

DATE OF INTERVIEW: day [][] month [][] year [][][][]

100. Record the start time of the woman's interview (24H system) HH:MM [][]:[][] (00–24 h)

SECTION 1 RESPONDENT AND HER COMMUNITY

Questions & Filters	Coding Categories	Skip to
---------------------	-------------------	---------

If you don't mind, I would like to start by asking you a little about <COMMUNITY NAME>.

Insert name of community/village/neighbourhood above and in questions below.

If no name, say "in this community/village/area" as appropriate.

101	Do neighbors in this community generally tend to know each other well?	Yes.....01 No.....02 Don't know/don't remember.....98 Refused/no answer.....99	
102	If there were a street fight in this community, would people generally do something to stop it?	Yes.....01 No.....02 Don't know/don't remember.....98 Refused/no answer.....99	
103	If someone in your family suddenly fell ill or had an accident, would your neighbors offer to help?	Yes.....01 No.....02 Don't know/don't remember.....98 Refused/no answer.....99	
104	I would now like to ask you some questions about yourself. What is your date of birth (day, month, and year that you were born)?	Day [][] Month [][] Year [][][][] Don't know year.....98 Refused/no answer.....99	
105	How old are you (completed years)? (More or less)	Age (years) [][]	
106	How long have you been living continuously in this community?	Number of years [][] Less than 1 year00 Lived all her life95 Visitor (at least 4 weeks in household)96 Don't know/don't remember.....98 Refused/no answer.....99	
107			
108a	What is your religious affiliation or denomination? (Do not read categories)	None01 Roman Catholic or Anglican02 Lutheran03 Evangelical04 Moravian.....05 Reformed Church06 Hinduism.....07 Islam08 Jehovah Witness09 Javinism.....10 Jewish.....11 Winti.....12 Other (specify)96 Don't know/don't remember.....98 Refused/no answer.....99	

(continued on next page)

(continued)

SECTION 1 RESPONDENT AND HER COMMUNITY		
Questions & Filters	Coding Categories	Skip to
108b	To which race or ethnic group would you say you belong? (Do not read categories)	Creole/AfroSurinamese 01 East Indian..... 02 Maroon 03 Amerindian/Indigenous..... 04 Javanese 05 Chinese 06 Caucasian..... 07 Mixed 08 Other (specify)..... 96 Refused/no answer..... 99
<hr/>		
109		
110	Have you ever attended school?	Yes..... 01 No..... 02 <input type="checkbox"/> 111c Don't know/don't remember..... 98 Refused/no answer..... 99
<hr/>		
111	a. What is the highest level of education that you achieved? Mark Highest Level. b. Convert total years in school, locally-specific coding	Primary..... Year 01 Secondary..... Year 02 Higher..... Year 03 Number of years schooling..... [] [] Don't know/don't remember..... 98 Refused/no answer..... 99
<hr/>		
111c	What is your main daily occupation? Probe: Do you earn money by yourself? [mark one]	Not working..... 01 Housewife..... 02 Student 03 Agricultural work 04 Government 05 Clerical..... 06 Small business 07 Professional..... 08 Retired 09 Seasonal work 10 Selling/trading..... 11 Other (specify)..... 96 Don't know/don't remember..... 98 Refused/no answer..... 99
<hr/>		
111d	What is now the main source of income for you and your household? [Mark one]	No income 01 Money from own work 02 Equal share own work and partner..... 03 Support from husband/partner..... 04 Support from other relatives 05 Pension..... 06 Social services/welfare 07 Remittances (from abroad) 08 Other (specify)..... 9 Refused/no answer 99

Now I would like to ask you some questions about things that you own and your earnings. We need this information to understand the financial position of women nowadays.

(continued on next page)

(continued)

SECTION 1 RESPONDENT AND HER COMMUNITY					
Questions & Filters	Coding Categories	Yes own by self	Yes own with others	No, don't own	Skip to
1101	Please tell me if you own any of the following, either by yourself or with someone else:				
	a. Land	Land	1	2	3
	b. Your house	House	1	2	3
	c. A company or business	Company	1	2	3
	d. Large animals (cows, horses, etc.)	Large animals	1	2	3
		Small animals	1	2	3
	e. Small animals (chickens, pigs, goats, etc)	Produce or crops	1	2	3
		Financial	1	2	3
	f. Produce or crops from certain fields or tree	Vehicle	1	2	3
	g. A financial investment (units, mutual funds, stocks or bonds)				
	h. Vehicle				
	For each, probe: Do you own this on your own, or do you own it with others?				
112	Where did you grow up? Probe: Before age 12 where did you live longest?	District or country (list options)			
		Don't know/don't remember.....			98
		Refused/no answer.....			99
113	Do you have access to your family so that you can easily see or visit them?	Yes.....			01 <input type="checkbox"/> 115
		No.....			02
		Living with family of birth.....			03
		Don't know/don't remember.....			98
		Refused/no answer.....			99
114	How often do you talk freely to a member of your family? Would you say at least once a week, once a month, once a year, or never?	Daily/at least once a week.....			01
		At least once a month.....			02
		At least once a year.....			03
		Never (hardly ever).....			04
		Don't know/don't remember.....			98
		Refused/no answer.....			99
115	When you need help or have a problem, can you usually count on members of your family for support?	Yes.....			01
		No.....			02
		Don't know/don't remember.....			98
		Refused/no answer.....			99
115a	How do you receive OR access information on women's health? [Don't read/check all that apply)	Personal doctor.....			a
		Health center/hospital/clinic.....			b
		Friends/family.....			c
		Newspaper/magazine.....			d
		Radio.....			e
		Television.....			f
		Internet health sites.....			g
		Social media sites/Facebook.....			h
		Refused/no answer.....			i
		Other (specify).....			x

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(continued)

SECTION 1 RESPONDENT AND HER COMMUNITY		
Questions & Filters	Coding Categories	Skip to
119 Are you <i>currently</i> married and living together? If no: are you <i>involved in a relationship with a man without living together</i> ? If needed probe: <i>Such as a regular boyfriend or a fiancé</i> ? If needed probe: Do you and your partner live together?	Currently married, living together 01	<input type="checkbox"/> 123
	Currently married, not living together 02	<input type="checkbox"/> 123
	Living with man, not married (common law) 03	<input type="checkbox"/> 123
	currently have a regular male partner (engaged or dating or visiting), not living together 04	<input type="checkbox"/> 123
	Not currently married and do not have a male partner 05	
	Currently have a female partner 06	
120 a Have you ever been married or lived with a male partner?	Yes, married 01	<input type="checkbox"/> 121
	Yes, lived with a man, but never married 03	<input type="checkbox"/> 121
	No 05	
120b Have you ever been involved in a relationship with a man without living together (such as being engaged or dating or a boyfriend)?	Yes 01	<input type="checkbox"/> S2
	No 02	<input type="checkbox"/> S2
	Refused/no answer 99	
121 Did your last partnership with a man end in divorce or separation, or did your husband/partner die?	Divorced 01	<input type="checkbox"/> 123
	Separated/broken up 02	
	Widowed/partner died 03	
	Don't know/don't remember 98	
	Refused/no answer 99	
122 Was the divorce/separation initiated by you, by your husband/partner, or did you both decide that you should separate?	Respondent 01	
	Husband/partner 02	
	Both (respondent and partner) 03	
	Other (specify): 96	
	Don't know/don't remember 98	
Refused/no answer 99		
123 How many times in your life have you been married and/or lived together with a man? (include current partner if living together)	Number of times married or lived together ... [][]	<input type="checkbox"/> S2
	Never-married or lived together 00	
	Don't know/don't remember 98	
	Refused/no answer 99	
123a How old were you the first time you were married or lived together with a man?	Age In Years [][]	
	Don't know/don't remember 98	
	Refused/no answer 99	
124 The next few questions are about your current or most recent partnership. Do/did you live together (in the same home) with your husband's family, your family, both families, or alone by yourselves?	His family 01	
	Her family 02	
	Both families 03	
	Alone 04	
	Don't know/don't remember 98	
Refused/no answer 99		

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(continued)

SECTION 1 RESPONDENT AND HER COMMUNITY			
Questions & Filters		Coding Categories	Skip to
131	Did you yourself choose your current/most recent husband/partner, did someone else choose him for you, or did he choose you? If she did not choose herself, probe: Who chose your current/most recent husband/partner for you?	Both chose 01 Respondent chose..... 02 Respondent's family chose 03 Husband/partner chose 04 Husband/partner's family chose 05 Other (specify):..... 96 Don't know/don't remember..... 98 Refused/no answer..... 99	<input type="checkbox"/> 1103 <input type="checkbox"/> 1103
132	Before the marriage with your current partner/ most recent husband, were you asked whether you wanted to marry him or not?	Yes..... 01 No..... 02 Don't know/don't remember..... 98 Refused/no answer..... 99	
* CHECK: Ref. sheet, Box A (s11mar)	Currently married/currently living with a man (Option K) [] <input type="checkbox"/> (1)	Not currently married or living with a man/current or past male dating Partner (Options L, M, N) [] <input type="checkbox"/> (2)	S2
CHECK 111D	1. Options 2 or 3 Marked [] <input type="checkbox"/>	2. Any other option marked [] <input type="checkbox"/>	S2
1103	Are you able to spend the money you earn how you want yourself? Or do you have to give all or part of the money to your husband/partner?	Self/own choice 01 Give part to husband/partner..... 02 Give all to husband/partner 03 Don't know/don't remember..... 98 Refused/no answer..... 99	
1104	Would you say that the money that you bring into the family is more than what your husband/partner contributes, less than what he contributes, or about the same as he contributes?	More than husband/partner 01 Less than husband/partner..... 02 About the same 03 Don't know/don't remember..... 98 Refused/no answer..... 99	

Before Starting with Section 2:

Review Responses in Section 1 and Mark Marital Status on Reference Sheet, Box A.

SECTION 2 GENERAL HEALTH		
I would now like to ask a few questions about your health and use of health services.		
201	In general, would you describe your overall health as excellent, good, fair, poor, or very poor?	Excellent01 Good.....02 Fair03 Poor04 Very poor05 Don't know/don't remember...98 Refused/no answer.....99
201a	Do you have difficulty seeing, even if wearing glasses?	No, no difficulty01 Yes, some difficulty02 Yes, a lot of difficulty03 Cannot do at all04 Don't know/don't remember...98 Refused/no answer.....99
201b	Do you have difficulty hearing, even if using a hearing aid?	No, no difficulty01 Yes, some difficulty02 Yes, a lot of difficulty03 Cannot do at all04 Don't know/don't remember...98 Refused/no answer.....99
201c	Do you have difficulty walking or climbing steps?	No, no difficulty01 Yes, some difficulty02 Yes, a lot of difficulty03 Cannot do at all04 Don't know/don't remember...98 Refused/no answer.....99
201d	Do you have difficulty remembering or concentrating?	No, no difficulty01 Yes, some difficulty02 Yes, a lot of difficulty03 Cannot do at all04 Don't know/don't remember...98 Refused/no answer.....99
201e	Do you have difficulty with self-care such as washing all over or getting dressed?	No, no difficulty01 Yes, some difficulty02 Yes, a lot of difficulty03 Cannot do at all04 Don't know/don't remember...98 Refused/no answer.....99
201f	Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?	No, no difficulty01 Yes, some difficulty02 Yes, a lot of difficulty03 Cannot do at all04 Don't know/don't remember...98 Refused/no answer.....99

(continued)

SECTION 2 GENERAL HEALTH

202	Now I would like to ask you about your health in the past 4 weeks ONLY . How would you describe your ability to walk around? I will give 5 options, which one best describes your situation: Would you say that you have no problems, some problems, many problems, or that you are unable to walk at all?	No problems01 Some problems02 Many problems03 Unable to walk at all04 Don't know/don't remember...98 Refused/no answer.....99																				
203	In the past 4 weeks did you have problems (difficulty) with performing usual activities, such as work, study, household, family, or social activities? Please choose from the following options: Would you say no problems, some problems, many problems, or unable to perform usual activities?	No problems01 Some problems02 Many problems03 Unable to perform activities...04 Don't know/don't remember...98 Refused/no answer.....99																				
204	In the past 4 weeks have you been in pain or discomfort? Please choose from the following options: Would you say not at all, some pain or discomfort, moderate pain or discomfort, or severe pain or discomfort?	No pain or discomfort01 Some pain or discomfort.....02 Moderate pain or discomfort..03 Severe pain or discomfort.....04 Don't know/don't remember...98 Refused/no answer.....99																				
205	In the past 4 weeks have you had problems (difficulty) with your memory or concentration? Please choose from the following 5 options: Would you say no problems, some problems, many problems, or extreme memory or concentration problems?	No problems01 Some problems02 Many problems03 Extreme problems04 Don't know/don't remember...98 Refused/no answer.....99																				
207	In the past 4 weeks, have you taken medication: a. To help you calm down or sleep? b. To relieve pain? c. To help you not feel sad or depressed?	<table border="1"><thead><tr><th></th><th>No</th><th>Once or twice</th><th>A few times</th><th>Many times</th></tr></thead><tbody><tr><td>a. For sleep</td><td>1</td><td>2</td><td>3</td><td>4</td></tr><tr><td>b. For pain</td><td>1</td><td>2</td><td>3</td><td>4</td></tr><tr><td>c. For sadness</td><td>1</td><td>2</td><td>3</td><td>4</td></tr></tbody></table>		No	Once or twice	A few times	Many times	a. For sleep	1	2	3	4	b. For pain	1	2	3	4	c. For sadness	1	2	3	4
	No	Once or twice	A few times	Many times																		
a. For sleep	1	2	3	4																		
b. For pain	1	2	3	4																		
c. For sadness	1	2	3	4																		
	For each, if yes probe: How often? Once or twice, a few times or many times?																					
209	Over the past 2 weeks , have you been bothered by any of the following problems? a. Feeling nervous, anxious or on edge	<table border="1"><thead><tr><th></th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>a.</td><td>1</td><td>2</td></tr></tbody></table>		Yes	No	a.	1	2														
	Yes	No																				
a.	1	2																				

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SECTION 2 GENERAL HEALTH			
	b. Not being able to stop or control worrying	1	2
	c. Worrying too much about different things	1	2
	d. Trouble relaxing	1	2
	e. Being so restless that it is hard to sit still	1	2
	f. Becoming easily annoyed or irritable	1	2
	g. Feeling afraid as if something awful might happen	1	2
	h. Little interest or pleasure in doing things	1	2
	i. Feeling down, depressed, or hopeless	1	2
	j. Trouble falling or staying asleep, or sleeping too much	1	2
	k. Feeling tired or having little energy	1	2
	l. Poor appetite or overeating		
	m. Feeling bad about yourself—or that you are a failure or have let yourself or your family down	1	2
	n. Trouble concentrating on things, such as reading the newspaper or watching television	1	2
	o. Moving or speaking so slowly that other people could have noticed? Or the opposite—being so fidgety or restless that you have been moving around a lot more than usual	1	2
	p. Thoughts that you would be better off dead or of hurting yourself in some way	1	2
210	Just now we talked about problems that may have bothered you recently. I would like to ask you now: Have you ever seriously thought about ending your life?	Yes01 No02 Don't know/don't remember...98 Refused/no answer.....99	<input type="checkbox"/> 214
211	Have you ever tried to take your life?	Yes.....01 No02 Don't know/don't remember...98 Refused/no answer.....99	
211a	Have you thought seriously about ending your life in the past 12 months ?	Yes.....01 No02 Don't know/don't remember...98 Refused/no answer.....99	<input type="checkbox"/> 214 <input type="checkbox"/> 214 <input type="checkbox"/> 214

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SECTION 2 GENERAL HEALTH				
211b	Have you ever tried to end your life in the past 12 months?	Yes.....01 No.....02 Don't know/don't remember...98 Refused/no answer.....99		<input type="checkbox"/> 214
211 c	At the (last) time when you tried to end your life, did you require medical care or hospitalization?	Yes.....01 No.....02 Don't know/don't remember...98 Refused/no answer.....99		
214	Do you now smoke cigarettes.....	Daily.....01 Occasionally02 Not at all03 Don't know/don't remember...98 Refused/no answer.....99		<input type="checkbox"/> 216 <input type="checkbox"/> 216
	1. Daily? (smoking at least once a day)			
	2. Occasionally?			
	3. Not at all?			
215	Have you ever smoked cigarettes in your life?	Daily.....01 Occasionally02 Not at all03 Don't know/don't remember...98 Refused/no answer.....99		
	1. Daily? (smoking at least once a day)			
	2. Occasionally?			
	3. Not at all?			
216	How often do you drink alcohol? Would you say:	Every day or nearly every day01 Once or twice a week02 One to three times in a month.....03 Less than once a month04 Never/stopped05 Don't know/don't remember...98 Refused/no answer.....99		<input type="checkbox"/> 220
	1. Every day or nearly every day			
	2. Once or twice a week			
	3. One to three times a month			
	4. Occasionally, less than once a month			
	5. Never/Stopped more than a year ago			
217	On the days that you drank in the past 4 weeks, about how many alcoholic drinks did you usually have in a day?	Usual number of drinks [][] No alcoholic drinks in past 4 weeks00		
218	In the past 12 months (In the last 12 months of your relationship), have you experienced any of the following problems, related to your drinking?	A) Money problems B) Family problems x) Other (specify): _____	Yes No Don't Know 1 2 3 1 2 3 1 2 3	
	a. Money problems			
	b. Family problems			
	c. Any other problems, specify.			
220	Did you ever use marijuana? Would you say:	Every day or nearly every day01 Once or twice a week02 One to three times in a month.....03 Less than once a month04 Never05 Don't know/don't remember...98 Refused/no answer.....99		
	1. Every day or nearly every day			
	2. Once or twice a week			
	3. One to three times a month			
	4. Occasionally, less than once a month			
	5. Never/Stopped more than a year ago			

SECTION 3 REPRODUCTIVE HEALTH

Now I would like to ask about all of the children that you may have given birth to during your life.

301	Have you ever given birth? How many children have you given birth to that were alive when they were born? (include births where the baby didn't live for long)	Number of children born [][] <input type="checkbox"/> 302a If 1 or more <input type="checkbox"/> None..... 00
302	Have you ever been pregnant?	Yes..... 01 <input type="checkbox"/> 310 No..... 02 <input type="checkbox"/> 310 Maybe/not sure 03 <input type="checkbox"/> S5 N.A. (Never had intercourse)..... 97 <input type="checkbox"/> 310 Don't know/don't remember..... 98 <input type="checkbox"/> 310 Refused/no answer..... 99
302a	How old were you when you first became pregnant?	Age in years [][] Don't know/don't remember..... 98 Refused/no answer..... 99
303	How many children do you have, who are alive now? Record number	Children [][] None 00
304	Have you ever given birth to a boy or a girl who was born alive, but later died? This could be at any age. If no, probe: Any baby who cried or showed signs of life but survived for only a few hours or days?	Yes..... 01 <input type="checkbox"/> 306 No 02
305	a) How many sons have died? How many daughters have died? (This is about all ages)	a) Sons dead [][] b) Daughters dead..... [][] None 00
306	Do (did) all your children have the same biological father, or more than one father?	One father..... 01 <input type="checkbox"/> 308 More than one father..... 02 N/A (never had live birth)..... 97 Don't know/don't remember..... 98 Refused/no answer..... 99
307	How many of your children receive financial support from their father(s)? Would you say none, some or all? If only one child and she says 'yes,' code '3' ('all').	None..... 01 Some..... 02 All..... 03 N/A 97 Don't know/don't remember..... 98 Refused/no answer..... 99
308	How many times have you been pregnant? Include pregnancies that did not end in a live birth, and if you are pregnant now, your current pregnancy? Probe: How many pregnancies were with twins, triplets?	Total no. of pregnancies..... [][] Pregnancies with twins [] Pregnancies with triplets..... [] Other (specify)..... []
309	Have you ever had a pregnancy that miscarried, or ended in a stillbirth? Or a terminated pregnancy (abortion)? Probe: How many times did you miscarry, how many times did you have a stillbirth, and how many times did you abort? <i>Probe may need to be locally adapted</i>	Miscarriages [][] Stillbirths [][] Abortions [][] None..... 00

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SECTION 3 REPRODUCTIVE HEALTH

310 Are you pregnant now? Yes..... 1 **A**
No..... 2 **B**
Maybe..... 3 **B**

Do either a or b: if pregnant now ==> [301]+ [309 A+b+c] + 1 =
[308A]....+ [308b]..... + [2x308c]..... =

If not pregnant now ==> [301]+ [309 A+b+c] =
[308A]....+ [308b]..... + [2x308c]..... =

Verify that addition adds up to the same figure. If not, probe again and correct.

311 Have you **ever** used anything, or tried in any way, to delay or avoid getting pregnant? Yes..... 01 **315**
No 02 **S.5**
N.A. (never had intercourse) 97
Don't know/don't remember..... 98
Refused/no answer..... 99

312 Are you **currently** doing something, or using any method, to delay or avoid getting pregnant? Yes..... 01 **315**
No 02
Don't know/don't remember..... 98
Refused/no answer..... 99

313 What (main) method are you and your partner **currently** using? Pill/tablets 01
Injectables 02
Implants (Norplant) 03
If more than one, only mark main method IUD (Mirena/copper T)..... 04
Diaphragm/foam/jelly 05
Calendar (rhythm)/mucus method.. 06
Female sterilization..... 07
Condoms 08
Male sterilization (vasectomy) 09
Withdrawal..... 10
Herbs 11
Other (specify): 96
Don't know/don't remember..... 98
Refused/no answer..... 99

314

315 Has your **current/most recent** husband/partner ever refused to use a method or tried to stop you from using a method to avoid getting pregnant? Yes..... 01 **S.5**
No 02
N.A. (never had a partner)..... 97
Don't know/don't remember..... 98
Refused/no answer..... 99

316 Has your **current/most recent** husband/partner ever refused to use a condom? Yes..... 01
No 02
Don't know/don't remember..... 98
Refused/no answer..... 99

Before Starting with Section 4:

Review Responses and Mark Reproductive History on Reference Sheet, Box B.

SECTION 4 CHILDREN		
CHECK: Ref. Sheet, box B, point Q (s4bir)	ANY LIVE BIRTHS [] □ (1)	NO LIVE BIRTHS [] □ (2)
		□ S.5
I would like to ask about the last time that you gave birth (live birth, regardless of whether the child is still alive or not).		
401	What is the date of birth of this child?	Day [][] Month..... [][] Year [][][] Refused/no answer..... 99
402	Is your last child a boy or a girl?	Boy 01 Girl 02 Refused/no answer..... 99
403	Is that child still alive?	Yes..... 01 □ 405 No 02 Refused/no answer..... 99
404	How old was (he/she) at his/her last birthday? Record age in completed years Check age with birth date	Age in years [][] □ 406 If not yet completed 1 year 00 □ 406 Refused/no answer..... 99 □ 406
405	How old was (he/she) when (he/she) died?	Years [][] Months (if less than 1 year) [][] Days (if less than 1 month). [][] Refused/no answer..... 99
406	Check if date of birth of last child (in q401) is more or less than 5 years ago	5 Or more years ago..... 01 □ 417 Less than 5 years ago 02 Refused/no answer..... 99
407	I would like to ask you about the pregnancy for your last born (son/daughter) . At the time you became pregnant with (him/her) did you want to become pregnant then, did you want to wait until later, did you want no (more) children, or did you not mind either way?	Become pregnant then 01 Wait until later 02 Not want children..... 03 Not mind either way..... 04 Don't know/don't remember..... 98 Refused/no answer..... 99
408	At the time you became pregnant with (him/her) did your husband/partner want you to become pregnant then, did he want to wait until later, did he want no (more) children at all, or did he not mind either way?	Become pregnant then 01 Wait until later 02 Not want children..... 03 Not mind either way..... 04 Don't know/don't remember..... 98 Refused/no answer..... 99
409	When you were pregnant with this child did you see anyone for an antenatal (prenatal) check? IF YES: Whom did you see? Anyone else? Mark all that apply <i>Use 'prenatal' if better understood</i>	No one a Obstetrician/gynecologist b Other doctor..... c Nurse/midwife d Traditional birth attendant..... e Other (specify): x

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SECTION 4 CHILDREN	
410	Did your husband/partner stop you, encourage you, or have no interest in whether you received antenatal care for your pregnancy? Stop 01 Encourage 02 No interest 03 Don't know/don't remember 98 Refused/no answer 99
411	When you were pregnant with your last (son/daughter) did your husband/partner have preference for a son, a daughter, or did it not matter to him whether it was a boy or a girl? Son 01 Daughter 02 Did not matter 03 Don't know/don't remember 98 Refused/no answer 99
412	During this pregnancy did you consume any alcoholic drinks? Yes 01 No 02 Don't know/don't remember 98 Refused/no answer 99
413	During this pregnancy did you smoke any cigarettes or use tobacco? Yes 01 No 02 Don't know/don't remember 98 Refused/no answer 99
414	Were you given a (postnatal) check-up at any time during the 6 weeks after delivery? Yes 01 No 02 No, child not yet six weeks old 03 Don't know/don't remember 98 Refused/no answer 99
415	Was your (son/daughter) weighed at birth? Yes 01 <input type="checkbox"/> 417 No 02 <input type="checkbox"/> 417 Don't know/don't remember 98 Refused/no answer 99
416	How much did he/she weigh? Record from health card where possible Kgs from card [] [] 01 Kgs from recall [] [] 02 Don't know/don't remember 98 Refused/no answer 99
417	Do you have any children aged between 6 and 11 years? How many? (Include 6-year-old and 11-year-old children.) Number [] [] <input type="checkbox"/> S.5 None 00
<i>This should be school age—if needed adapt age range for this and subsequent questions</i>	
418	a. How many are boys? a) Boys [] b. How many are girls? b) Girls []
Make sure only children aged 5–12 years.	
419	How many of these children (ages 6–11 years) currently live with you? Probe: a) Boys [] <input type="checkbox"/> S.5 b) Girls [] a. How many boys? If "0" for both sexes ==== go to <input type="checkbox"/> b. How many girls?
420	Do any of these children (ages 6–11 years): a. Have frequent nightmares? a. Nightmares Yes No Don't Know b. Wet their bed often? b. Wet bed 1 2 8 c. Are any of these children very timid or withdrawn? c. Timid 1 2 8 d. Are any of them aggressive with you or other children? d. Aggressive 1 2 8

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SECTION 4 CHILDREN		
421	Of these children (ages 6–11 years), how many of your boys and how many of your girls have ever run away from home?	a) Number of boys run away [] b) Number of girls run away [] None 00
422	Of these children (ages 6–11 years), how many of your boys and how many of your girls are studying, in school, or homeschooled?	a) Boys [] <input type="checkbox"/> S.5 b) Girls [] If "0" for both sexes ==== go to <input type="checkbox"/>
423	Have any of these children had to repeat (failed) a year at school?	Yes..... 01 No..... 02 Don't know/don't remember..... 98 Refused/no answer..... 99
Make sure only children aged 6–11 years.		
424	Have any of these children stopped school for a while or dropped out of school?	Yes..... 01 No..... 02 Don't know/don't remember..... 98 Refused/no answer..... 99
Make sure only children aged 6–11 years.		

SECTION 5 CURRENT OR MOST RECENT HUSBAND/PARTNER			
CHECK: Ref. sheet, Box A (s5mar)	CURRENTLY MARRIED, OR LIVING WITH A MAN/ENGAGED OR DATING A MALE PARTNER (Options K, L) [] <input type="checkbox"/> (1)	FORMERLY MARRIED/LIVING WITH A MAN/ENGAGED OR DATING A MALE PARTNER (Option M) [] <input type="checkbox"/> (2)	NEVER MARRIED/ NEVER LIVED WITH A MAN (NEVER MALE PARTNER) (Option N) [] [] <input type="checkbox"/> (3)
<input type="checkbox"/> S.6			

I would now like you to tell me a little about your **current/most recent** husband/partner.

501	How old is your husband/partner (completed years)? Probe: More or less? If most recent husband/partner died: How old would he be now if he were alive?	Age (years) [][] Refused/no answer..... 99
502	In what year was he born?	Year [][][][] Don't know/don't remember..... 98 Refused/no answer..... 99
502a	Where is he from? Is he from the same community or town as you?	(District or country – list options) Don't know/don't remember..... 98 Refused/no answer..... 99
503	Can (could) he read and write?	Yes..... 01 No 02 Don't know/don't remember..... 98 Refused/no answer..... 99
504	Did he ever attend school?	Yes..... 01 <input type="checkbox"/> 506 No 02 Don't know/don't remember..... 98 Refused/no answer..... 99

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(continued)

SECTION 5 CURRENT OR MOST RECENT HUSBAND/PARTNER			
505	a. What is the highest level of education that he achieved? Mark highest level. b. Convert total years in school	Primary _____ year 01 Secondary _____ year 02 Higher _____ year 03 Don't know 98 Number of years schooling.... [] [] Don't know/don't remember 98 Refused/no answer 99	
506	If currently with husband/partner: Is he currently working, looking for work or unemployed, retired, or studying? If not currently with husband/partner: Toward the end of your relationship was he working, looking for work or unemployed, retired, or studying?	Working 01 Looking for work/unemployed 02 Retired 03 Student 04 Disabled/long term sick 05 Don't know/don't remember 98 Refused/no answer 99	<input type="checkbox"/> 508 <input type="checkbox"/> 508 <input type="checkbox"/> 509
507	When did his last job finish? Was it in the past 4 weeks, between 4 weeks and 12 months ago, or before that? (For most recent husband/partner: in the last 4 weeks or in the last 12 months of your relationship?)	In the past 4 weeks 01 4 Wks – 12 months ago 02 More than 12 months ago 03 Never had a job 04 Don't know/don't remember 98 Refused/no answer 99	<input type="checkbox"/> 509
508	What kind of work does/did he normally do? Specify kind of work	Professional: 01 Semi-skilled: 02 Unskilled/manual: 03 Military/police: 04 Other: 96 Don't know/don't remember 98 Refused/no answer 99	
509	How often does/did your husband/partner drink alcohol? a. Every day or nearly every day b. Once or twice a week c. One to three times a month d. Occasionally, less than once a month e. Never	Every day or nearly every day 01 Once or twice a week 02 One to three times a month 03 Less than once a month 04 Never 05 Don't know/don't remember 98 Refused/no answer 99	<input type="checkbox"/> 512A
510	In the past 12 months (in the last 12 months of your last relationship) , how often have you seen (did you see) your husband/partner drunk? Would you say most days, weekly, once a month, less than once a month, or never?	Most days 01 Weekly 02 Once a month 03 Less than once a month 04 Never 05 Don't know/don't remember 98 Refused/no answer 99	
511	In the past 12 months (in the last 12 months of your last relationship) , have you experienced (did you experience) any of the following problems related to your husband/partner's drinking? a. Money problems b. Family problems c. Other: _____ a. Money problems _____ b. Family problems _____ c. Any other problems, specify. _____	Yes No Refused/ a. Money 1 2 don't problems 1 2 know b. Family 1 2 9 problems 9 c. Other: 9	

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(continued)

SECTION 5 CURRENT OR MOST RECENT HUSBAND/PARTNER

512a	Does your husband/partner currently or has he ever used marijuana?	Every day or nearly every day 01 Once or twice a week 02 One to three times in a month 03 Less than once a month 04 Never 05 In the past, not now 06 Don't know/don't remember..... 98 Refused/no answer..... 99	
	1. Would you say:		
	2. Every day or nearly every day		
	3. Once or twice a week		
	4. One to threetimes a month		
	5. Occasionally, less than once a month		
	6. Never		
	<i>In countries where appropriate to ask about drug use. Include local examples</i>		
512	Does your husband/partner currently or has he ever used other illegal drugs (e.g. cocaine)?	Every day or nearly every day 01 Once or twice a week 02 One to three times a month 03 Less than once a month 04 Never 05 In the past, not now 06 Don't know/don't remember..... 98 Refused/no answer..... 99	
	1. Would you say:		
	2. Every day or nearly every day		
	3. Once or twice a week		
	4. One to three times a month		
	5. Occasionally, less than once a month		
	6. Never		
513	Since you have known him , has your husband/partner ever been involved in a physical fight with another man?	Yes..... 01 No 02 Don't know/don't remember..... 98 Refused/no answer..... 99	<input type="checkbox"/> 515 <input type="checkbox"/> 515
514	In the past 12 months (in the last 12 months of the relationship), has this happened never, once or twice, a few times, or many times?	Never (not in past 12 months) 01 Once or twice..... 02 A few (3–5) times..... 03 Many (more than 5) times..... 04 Don't know/don't remember..... 98 Refused/no answer..... 99	
515	As far as you know, has your current/most recent husband/partner had a relationship with any other women while being with you?	Yes..... 01 No 02 May have 03 Don't know/don't remember..... 98 Refused/no answer..... 99	<input type="checkbox"/> 1008 <input type="checkbox"/> 1008
516	As far as you know, has your current/most recent husband/partner had children with any other woman while being with you?	Yes..... 01 No 02 May have 03 Don't know/don't remember..... 98 Refused/no answer..... 99	
	As far as you know, was your current/most recent husband/partner's mother hit or beaten by her husband/partner?	Yes..... 01 No 02 Parents did not live together 03 Don't know/don't remember 98 Refused/no answer..... 99	
	As far as you know, was your current/most recent husband/partner himself hit or beaten regularly by someone in his family when he was a child?	Yes..... 01 No 02 Don't know/don't remember..... 98 Refused/no answer..... 99	

SECTION 6 ATTITUDES

In this community and elsewhere, people have different ideas about men and women, families, and what is acceptable behavior for men and women in the home. I am going to read you a list of statements, and I would like you to tell me how much you personally agree or disagree with the statement. There are no right or wrong answers.

601 Gender norms/roles		Agree	Disagree	Don't know	
a	It is the wife's obligation to have sex with her husband whenever he wants it, except when she is sick or menstruating.	1	2	8	
b	Women and men should share authority in the family.	1	2	8	
c	A woman's most important role is to take care of her home and cook for her family.	1	2	8	
d	It is natural (God intended) that men should be the head of the family.	1	2	8	
e	A wife should obey her husband even if she disagrees.	1	2	8	
f	A woman should be able to spend her own money according to her own will.	1	2	8	
602 Normalization/acceptability of violence		Agree	Disagree	Don't Know	
a	Violence between husband and wife is a private matter and others should not intervene.	1	2	8	
c	A woman should tolerate violence to keep her family together.	1	2	8	
d	If a woman is raped, she has usually done something careless to put herself in that situation.	1	2	8	
e	If a woman doesn't physically fight back, you can't really call it rape.	1	2	8	
607	In your opinion, is a husband justified in hitting or beating his wife in the following situations:		Yes	No	Don't know
	a. Goes out		1	2	8
	b. Neglects child		1	2	8
a.	If she goes out without telling him?	c. Argues	1	2	8
b.	If she neglects the children?	d. No sex	1	2	8
c.	If she argues with him?	e. Burns food	1	2	8
d.	If she refuses to have sex with him?	f. Ouside relationship	1	2	8
e.	If she burns the food?				
f.	If he suspects she has an outside relationship?				

SECTION 7 RESPONDENT AND HER HUSBAND/PARTNER

CHECK: **EVER MARRIED/EVER LIVING WITH A** **NEVER MARRIED/NEVER LIVED WITH A** **S.10**
Ref. MAN/MALE PARTNER MAN/NEVER MALE PARTNER
sheet, (Options K, L, M) [] (Option N) []
Box A
(s7mar) **(1)** **(2)**

When two people marry or live together, they usually share both good and bad moments. I would now like to ask you some questions about your current and past relationships and how your husband/partner treats (treated) you. If anyone interrupts us, I will change the topic of conversation. I would again like to assure you that your answers will be kept confidential and that you do not have to answer any questions that you do not want to. If you need some time to rest between questions, please let me know. You do not have to give me any reason for not responding to any question. May I continue?

701	In general, do (did) you and your (current or most recent) husband/partner discuss the following topics together:		Yes	No	Don't know
	a. His day		1	2	8
	b. Your day		1	2	8
	c. Your worries		1	2	8
	d. His worries		1	2	8
	a. Things that have happened to him in the day				
	b. Things that happen to you during the day				
	c. Your worries or feelings				
	d. His worries or feelings				
702	In your relationship with your (current or most recent) husband/partner, how often would you say that you quarrelled? Would you say rarely, sometimes or often?	Rarely01
		Sometimes.....			.02
		Often.....			.03
		Don't know/don't remember.....			.98
		Refused/no answer.....			.99
703	I am now going to ask you about some situations that are true for many women. Does your current or most recent husband/partner generally do any of the following?:		Yes	No	
	a. See friends		1	2	
	b. Contact family		1	2	
	c. Wants to know		1	2	
	d. Jealous or angry		1	1	
	e. Suspicious				
	f. Health care		1	2	
	g. Money		1	2	
	h. Cellphone		1	2	
	i. Prohibited work		1	2	
	j. Taken earnings				
	k. Refused money				
	a. Stop you from meeting your female friends				
	b. Try to limit contact with your family of birth				
	c. Insist on knowing where you are at all times				
	d. Get jealous or angry if you talk with another man				
	e. Frequently accuse you of being unfaithful				
	f. Expect you to ask his permission before seeking health care for yourself				
	g. Does not trust you with any money				

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SECTION 7 RESPONDENT AND HER HUSBAND/PARTNER

- 703
- h. Check your cellphone logs/messages to see who you have called or messaged/who has called or messaged you
 - i. Prohibit you from getting a job, going to work, trading, earning money, or participating in income-generating projects
 - j. Take your earnings from you against your will
 - k. Refuse to give you money you need for household expenses even when he has money for other things (e.g., alcohol and cigarettes)

704	The next questions are about things that happen to many women and that your current partner, or any other partner, may have done to you. Has your current husband/partner, or any other partner ever?	a) (If YES continue with B. If NO skip to next item)	b) Has this happened in the past 12 months? (If YES ask C and D . If NO ask D only)	c) In the past 12 months would you say that this has happened once, a few times or many times?	d) Did this happen before the past 12 months? If yes: would you say that this has happened once, a few times or many times?
-----	--	--	--	--	---

	Yes	No	Yes	No	One	Few	Many	No	One	Few	Many
a. Insulted you or made you feel bad about yourself?											
b. Belittled or humiliated you in front of other people?	1	2	1	2	1	2	3	0	1	2	3
c. Done things to scare or intimidate you on purpose (e.g., by the way he looked at you, by yelling and smashing things)?	1	2	1	2	1	2	3	0	1	2	3
d. Verbally threatened to hurt you or someone you care about?											

Check: Question 704 **Mark when yes for any act (at least one "1" circled in column a)** **Mark when all answers no circled (only "2" circled in column a)** **705**

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SECTION 7 RESPONDENT AND HER HUSBAND/PARTNER

704 e	Who did the things you just mentioned happen? (Mention acts reported in 704) Was it your current or most recent husband/partner, any other husband or partner that you may have had before or both?	Current/most recent husband/partner..... 01 Previous husband/partner 02 Both 03 Don't know/don't remember..... 98 Refused/no answer..... 99
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705	Has he or any other partner ever....	a) (If YES continue with B. If NO skip to next item)	b) Has this happened <i>in the past 12 months?</i> (If YES ask C and D. If NO ask D only)	c) In the past 12 months would you say that this has happened once, a few times or many times?	d) Did this happen before the past 12 months? If yes: would you say that this has happened once, a few times or many times?
		Yes No	Yes No	One Few Many	No One Few Many
	a. Slapped you or thrown something at you that could hurt you?	1 2	1 2	1 2 3	0 1 2 3
	b. Pushed you or shoved you or pulled your hair?	1 2	1 2	1 2 3	0 1 2 3
	c. Hit you with his fist or with something else that could hurt you?	1 2	1 2	1 2 3	0 1 2 3
	d. Kicked you, dragged you, or beaten you up?	1 2	1 2	1 2 3	0 1 2 3
	e. Choked or burned you on purpose?	1 2	1 2	1 2 3	0 1 2 3
	f. Threatened you with or actually used a gun, knife, or other weapon against you?	1 2	1 2	1 2 3	0 1 2 3

Check:	Mark when yes for any act (at least one "1" circled in column a)	Mark when all answers no circled (only "2" circled in column a)	<input type="checkbox"/> 706
Question 705	[] <input type="checkbox"/>	[]	

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SECTION 7 RESPONDENT AND HER HUSBAND/PARTNER

705 g	Who did the things you just mentioned? (Mention acts reported in 705) Was it your <i>current or most recent</i> husband/partner, any other husband or partner that you may have had before or both?	Current/most recent husband/partner.....	01
		Previous husband/partner	02
		Both	03
		Don't know/don't remember.....	98
		Refused/no answer.....	99

706	a) (If YES continue with B . If NO skip to next item)	b) Has this happened in the past 12 months? (If YES ask C and D . If NO ask D only)	c) In the past 12 months would you say that this has happened once, a few times or many times?	d) Did this happen before the past 12 months? If yes : would you say that this has happened once, a few times or many times?
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706	a. Did your current partner or any other partner ever force you to have sexual intercourse when you did not want to, for example by threatening you or holding you down? If necessary: We define sexual intercourse as vaginal, oral or anal penetration.	Yes 1	No 2	Yes 1	No 2	One 1	Few 2	Many 3	No 0	One 1	Few 2	Many 3
	b. Did you ever have sexual intercourse you did not want to have because you were afraid of what your current partner or any other partner might do if you refused? For example, because you were intimidated by him or afraid he would hurt you?	1	2	1	2	1	2	3	0	1	2	3

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SECTION 7 RESPONDENT AND HER HUSBAND/PARTNER

	c. Did your current partner or any other partner ever force you to do anything else sexual that you did not want or that you found degrading or humiliating?	1	2	1	2	1	2	3	0	1	2	3	
CHECK: Question 706	Mark when yes for any act (at least one "1" circled in column a)	Mark when all answers no circled (only "2" circled in column a)						<input type="checkbox"/> 707					
		[]						[]					
		<input type="checkbox"/>											
706 d	Who did the things you just mentioned? (Mention acts reported in 706) Was this your <i>current or most recent</i> husband/partner, any other husband or partner that you may have had before or both?	Current/most recent husband/partner.....01						Previous husband/partner02					
		Both03						Don't know/don't remember.....98					
		Refused/no answer.....99											
	Verify whether answered yes to any question on physical violence, see question 705	Yes, physical violence01						Mark in box c					
		No physical violence02											
	Verify whether answered yes to any question on sexual violence, see question 706	Yes, sexual violence01						Mark in box c					
		No sexual violence02											
708a	Are you afraid of your current/most recent husband/partner? Would you say never, sometimes, many times, or most/all of the time?	Never01						Sometimes.....02					
		Many times03						Most/all of the time04					
		Don't know/don't remember.....98						Refused/no answer.....99					
CHECK: Ref. sheet, Box B	(s7preg) (s7prnum) (s7prcur)	Ever been pregnant (option p)						Never pregnant <input type="checkbox"/> s8					
		(1) []						(2) [] <input type="checkbox"/>					
		<input type="checkbox"/>											
		Number of pregnancies (option t) [] []											
		[]											
		<input type="checkbox"/>											
		Currently pregnant? (Option s)						Yes....01					
								No.... 02					
								<input type="checkbox"/>					
709	You said that you have been pregnant (TOTAL) times. Was there ever a time when you were pushed, slapped, hit, kicked, or beaten by (any of) your husband(s)/ partner(s) while you were pregnant?	Yes.....01 <input type="checkbox"/> S8						No02 <input type="checkbox"/> S8					
		Don't know/don't remember.....98 <input type="checkbox"/> S8						Refused/no answer.....99					
710	If respondent was pregnant only once, enter "01"	Number of pregnancies in which this happened.....[] []											
	If respondent was pregnant more than once: Did this happen in one pregnancy, or more than one pregnancy? In how many pregnancies did this happen (in how many pregnancies were you pushed, slapped, hit, kicked or beaten)?												

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SECTION 7 RESPONDENT AND HER HUSBAND/PARTNER

710a	Did this happen in the last pregnancy?	Yes.....01 No.....02	
	If respondent was pregnant only once, circle code '1'.	Don't know/don't remember.....98 Refused/no answer.....99	
711	Were you ever punched or kicked in the abdomen while you were pregnant?	Yes.....01 No.....02 Don't know/don't remember.....98 Refused/no answer.....99	
If violence reported in one pregnancy, refer to that particular pregnancy If violence reported in more than one pregnancy, the following questions refer to the last/most recent pregnancy in which violence reported			
712	During the most recent pregnancy in which you were beaten , was the husband/partner who did this to you the father of the child?	Yes.....01 No.....02 Don't know/don't remember.....98 Refused/no answer.....99	
713	Was the man who did this your current/most recent husband/partner?	Yes.....01 No.....02 Don't know/don't remember.....98 Refused/no answer.....99	
714	Had the same person also done such things to you before you were pregnant?	Yes.....01 No.....02 Don't know/don't remember.....98 Refused/no answer.....99	<input type="checkbox"/> S8 <input type="checkbox"/> S8
715	Compared to before you were pregnant, did the slapping/beating (REFER TO RESPONDENT'S PREVIOUS ANSWERS) get less, stay about the same, or get worse while you were pregnant? By worse I mean, more frequent or more severe.	Got less.....01 Stayed about the same.....02 Got worse.....03 Don't know/don't remember.....98 Refused/no answer.....99	

(continued)

SECTION 8 INJURIES

805b	Has this happened in the past 12 months ?	Yes..... 01 No..... 02 Don't know/don't remember 98 Refused/no answer..... 99
806	In your life, did you ever receive health care for this injury (these injuries)? Would you say, sometimes, always, or never?	Yes, sometimes 01 <input type="checkbox"/> S.9 Yes, always..... 02 No, never 03 Don't know/don't remember 98 Refused/no answer..... 99
807	In your life, have you ever had to spend any nights in a hospital due to the injury/injuries? If yes: How many nights? (More or less)	Number of nights in hospital [] [] If none enter '00' Don't know/ don't remember 98 Refused/no answer..... 99
808	Did you tell a health worker the real cause of your injury?	Yes..... 01 No..... 02 Don't know/don't remember 98 Refused/no answer..... 99

SECTION 9 IMPACT AND COPING

This section is for women who report physical or sexual violence by husband/partner.

I would now like to ask you some questions about what effects your husband/partner's acts have had on you.

By acts I mean... (refer to specific acts the respondent has mentioned in section 7).

If reported more than one violent husband/partner, add: I would like you to answer these questions in relation to the *most recent/last husband/partner who did these things to you.*

CHECK: Ref. sheet Box C (S9phys)	WOMAN EXPERIENCED PHYSICAL VIOLENCE ("YES" TO Option U) <input type="checkbox"/> (1)	WOMAN HAS EXPERIENCED SEXUAL VIOLENCE ONLY [] ("NO" to Option U and "YES" to option V) <input type="checkbox"/> (2)	<input type="checkbox"/> 906
901	Are there any particular situations that tend to lead to (or trigger) your husband/partner's behaviour? Refer to acts of physical violence mentioned before. Probe: Any other situation? Mark all mentioned	No particular reasona When man drunkb Money problemsc Difficulties at his work.....d When he is unemployede No food at homef Problems with his or your family....g You are pregnanth He is jealous of youi You refuse sexj You are disobedient.....k He wants to teach you a lesson, educate or discipline youl He wants to show he is bossm Other (specify)x	

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(continued)

SECTION 9 IMPACT AND COPING

CHECK: CHILDREN LIVING [] NO CHILDREN ALIVE [] **906**
(Ref. sheet, Box B, option R) (1) (2)
(s9child)

902	For any of these incidents, were your children present or did they overhear you being beaten? If yes: How often? Would you say once, several times or most of the time?	Never01 Once02 Several (2–5) times03 Many times/most of the time.....04 Don't know/don't remember.....98 Refused/no answer.....99
904	During the times that you were hit, did you ever fight back physically or to defend yourself? If yes: How often? Would you say once, several times or most of the time?	Never01 <input type="checkbox"/> 905 Once02 Several (2–5) times03 Many times/most of the time.....04 Don't know/don't remember.....98 Refused/no answer.....99
904a	What was the effect of you fighting back on the violence at the time? Would you say that it had no effect, the violence became worse, the violence became less, or that the violence stopped, at least for the moment.	No change/no effect01 Violence became worse02 Violence became less.....03 Violence stopped04 Don't know/don't remember.....98 Refused/no answer.....99
905	Have you ever, hit or beaten your husband/partner when he was not hitting or beating you? If yes: How often? Would you say once, several times or many times?	Never01 Once02 Several (2–5) times03 Many times/most of the time.....04 Don't know/don't remember.....98 Refused/no answer.....99
906	Would you say that your husband/partner's behaviour towards you has affected your physical health? Would you say, that it has had no effect, a little effect or a large effect? Refer to specific acts of physical and/or sexual violence she described earlier	No effect01 A little02 A lot.....03 Don't know/don't remember.....98 Refused/no answer.....99
907	In what way, if any, has your husband/partner's behaviour (the violence) disrupted your work or other income-generating activities? Mark all that apply	N/A (no work for money).....a Work not disruptedb Husband/partner interrupted work .c Unable to concentrated Unable to work/sick leave.....e Lost confidence in own ability.....f Other (specify).....x

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(continued)

SECTION 9 IMPACT AND COPING

908	Whom have you told about his behaviour? Mark all mentioned Probe: Anyone else?	No onea Friends.....b Motherc Fathero Brother or sisterd Uncle or aunte Husband/partner's family.....f Childreng Neighboursh Police.....i Doctor/health workerj Priest/religious leaderk Counsellorl Ngo/women's organizationm Community leadern Other (specify):x	
909	Did you ever seek help from anyone for your situation? If yes , whom did you ask for help? Mark all mentioned Probe: Anyone else?	No onea Friends.....b Parentsc Brother or sisterd Uncle or aunte Husband's/partner's familyf Childreng Neighborsh Police.....i Doctor/health workerj Priest/religious leaderk Counselorl NGO/women's organization.....m Local leadern Other (specify):x	
910a	Did you ever go to any of the following for help? read each one a. Police b. Hospital or health center c. Social services d. Court/magistrate e. Stop the Violence against Women Foundation f. Women's shelter g. NGO/Women's organization, specify _____ h. Community drop-in center i. Religious organization		910 b. ASK ONLY FOR THOSE MARKED YES in 910a. Were you satisfied with the help given?

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(continued)

SECTION 9 IMPACT AND COPING

910a	Yes	No	Yes	No
a. Police	1	2	1	2
b. Hospital/health center	1	2	1	2
c. Social services	1	2	1	2
d. Court/magistrate	1	2	1	2
e. Stop the Violence against Women Foundation	1	2	1	2
f. Women's shelter	1	2	1	2
g. NGO/women's organization	1	2	1	2
h. Community drop-in center				
i. Religious organization				

CHECK: Question 910a * ** (s9check) **MARK WHEN YES FOR ANY IN Q. 910a (AT LEAST ONE "1" CIRCLED IN COLUMN MARKED WITH *)** **MARK WHEN ALL ANSWERS NO CIRCLED (ONLY "2" CIRCLED **)** **912**

[] []

(1)

910	What were the reasons that made you go for help?	Encouraged by friends/family	a	For all options go to 913
		Could not endure more	b	
		Badly injured	c	
		He threatened or tried to kill her	d	
		He threatened or hit children	e	
		Saw that children were suffering	f	
		Thrown out of the home	g	
		Afraid she would kill him	h	
		Afraid he would kill her	i	
		Afraid he would hit her/more violence	j	
		Other (specify):	x	

Mark all mentioned and go to 913

911	What were the reasons that you did not go to any of these?	Don't know/no answer	a
		Fear of threats/consequences/more violence	b
		Violence normal/not serious	c
		Embarrassed/ashamed/afraid would not be believed or would be blamed	d
		Believed no help/know other women not helped	e
		Afraid would end relationship	f
		Afraid would lose children	g
		Bring bad name to family	h
		Did not know her options	i
		Other (specify):	x

Mark all mentioned

912	Is there anyone that you would like (have liked) to receive (more) help from? Who?	No one mentioned	a
		His relatives	b
		Her relatives	c
		Friends/neighbours	d
		Health centre	e
		Police	f
		Priest/religious leader	g
		Social worker	i
		Other (specify):	x

Mark all mentioned

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SECTION 9 IMPACT AND COPING

913	Did you ever leave, even if only overnight, because of his behaviour? If Yes: How many times? (More or less)	Number of times left [][] <input type="checkbox"/> 919 Never 00 <input type="checkbox"/> S.10 N.A. (not living together) 97 Don't know/don't remember..... 98 Refused/no answer..... 99
914	What were the reasons why you left the last time ? Mark all mentioned	No particular incident..... a Encouraged by friends/family b Could not endure more..... c Badly injured..... d He threatened or tried to kill her e He threatened or hit children f Saw that children were suffering g Thrown out of the home..... h Afraid she would kill him i Encouraged by organization:..... j Afraid he would kill her k Other (Specify): x
915	Where did you go the last time ? Mark one	Her relatives 01 His relatives 02 Her friends/neighbors 03 Hotel/lodgings..... 04 Street 05 Church/temple 06 Shelter 07 Other (specify): 96 Don't know/don't remember..... 98 Refused/no answer..... 99
916	How long did you stay away the last time ? Record number of days or months	Number of days (if less than 1 month)..... [][] .01 <input type="checkbox"/> S.10 Number of months (if 1 month or more) [][] .02 Left husband/partner, did not return, not with husband/partner 03
917	What were the reasons that you returned? Mark all mentioned	Didn't want to leave children..... a For all options go to section 10 Holiness of marriage b Didn't want to bring shame on family c Couldn't support children..... d Loved him e Didn't want to be single f Family said to stay..... g Forgave him..... h Thought he would change i Threatened you/children..... j Nowhere to go k Violence normal, not serious l The children need a father/both parents m Other (Specify): x

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SECTION 9 IMPACT AND COPING

918	What were the reasons that made you stay?	Didn't want to leave children..... a Holiness of marriage b Didn't want to bring shame on family c Couldn't support children..... d Loved him..... e Didn't want to be single f Family said to stay..... g Forgave him..... h Thought he would change i Threatened her/children j Nowhere to go k Violence normal/not serious l The children need a father/both parents..... m Other (Specify): x
	Mark all mentioned	

SECTION 10 OTHER EXPERIENCES

N01 Read to respondent:

In their lives, many women have unwanted experiences and experience different forms of maltreatment and violence from all kinds of people. These may be relatives, other people that they know, and/or strangers. If you don't mind, I would like to ask you about some of these situations. Everything that you say will be kept confidential. I will first ask about what has happened in your whole life, and thereafter during the past 12 months.

FOR WOMEN WHO WERE EVER MARRIED OR PARTNERED ADD: These questions are about people other than your husband/partner(s).

N06	A) (If YES continue with B. If NO skip to next item)	B) Has this happened <i>in</i> <i>the past 12</i> <i>months?</i> (If YES ask C and D. If NO ask D only)	C) <i>In the past 12</i> <i>months</i> would you say that this has happened once, a few times or many times?	D) Did this happen <i>before the</i> <i>past 12 months?</i> If yes: would you say that this has happened once, a few times or many times?
	Yes No 1 2	Yes No 1 2	One Few Many 1 2 3	No One Few Many 0 1 2 3
	a. During your whole life, including when you were a child has any male person except any husband/ male partner ever forced you into sexual intercourse when you did not want to, for example by threatening you, holding you down, or putting you in			

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SECTION 10 OTHER EXPERIENCES

a situation where you could not say no. Remember to include people you have known, as well as strangers. Please at this point exclude **attempts** to force you.

N06	b. Has a man who was not a husband or boyfriend ever forced you to have sex with him when you were too drunk or drugged to refuse?	1	2	1	2	1	2	3	0	1	2	3
-----	---	---	---	---	---	---	---	---	---	---	---	---

If necessary:
We define sexual intercourse as penetration (when a man puts his penis, other body part, or an object inside) of a vagina, mouth, or anus.
Note that this question is about rapes that actually happened

CHECK	AT LEAST ONE 'YES' ('1') MARKED IN COLUMN A.	ONLY 'NO' ('2') MARKED	<input type="checkbox"/> N08
	[] <input type="checkbox"/>	[] <input type="checkbox"/>	

N07	a) Who did this to you [Mention acts above]? Probe: Anyone else? How about a relative? How about someone at school or work? How about a friend or neighbour? A stranger or anyone else? Do not read out the list Mark letter for all mentioned	b) How old were you when it happened with this person for the first time? (more or less)	c) How old was this person? PROBE: roughly (more or less).
-----	---	--	--

Father	a	[] [] []	[] [] []
Father-in-law.....	b	[] [] []	[] [] []
Sibling (brother or sister)	c	[] [] []	[] [] []
Other family member	d	[] [] []	[] [] []
Someone at work.....	e	[] [] []	[] [] []
Friend/acquaintance	f	[] [] []	[] [] []
Recent acquaintance.....	g	[] [] []	[] [] []
Complete stranger.....	h	[] [] []	[] [] []
Teacher	i	[] [] []	[] [] []
Doctor/health staff	j	[] [] []	[] [] []
Religious leader.....	k	[] [] []	[] [] []
Police/soldier	l	[] [] []	[] [] []
Boyfriend (not mentioned in section 7).....	m	[] [] []	[] [] []
Other (specify).....	x	[] [] []	[] [] []

Don't Know = 98

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SECTION 10 OTHER EXPERIENCES		
N07e	I am now going to ask you about your experience of forced sex , when was the most recent incident that you were forced to have sex?	Less than one year ago 1 Between one and five years ago 2 Longer than five years ago 3 Refused/no answer..... 9
N07f	Make sure that the person perpetrating this abuse was not already covered in section 7	Yes..... 1 <input type="checkbox"/> N07i No..... 2 Refused/no answer..... 9
N07g	How did the police respond? COUNTRY SPECIFIC CODING	They opened a case 1 They sent me away 2 Other..... 3 Refused/no answer..... 9
N07h	Was the person who did this to you arrested and convicted?	Not arrested..... 1 Arrested but not convicted..... 2 Convicted..... 3 Refused/no answer..... 9
N07i	Did you report it to a health service (doctor or nurse)?	Yes..... 1 <input type="checkbox"/> N07i No..... 2 Refused/no answer..... 9
N07j	Were you offered any medication/treatment for preventing pregnancy?	Yes..... 1 No..... 2 Don't know..... 8 Refused/no answer..... 9
N07k	Were you offered any medication/treatment for preventing transmission of HIV (PEP)?	Yes..... 1 No..... 2 Don't know..... 8 Refused/no answer..... 9
N07l	Did you receive (formal) counselling with regards to the incident that you experienced?	Yes..... 1 No..... 2 Refused/no answer..... 9
N07m	Did you tell anyone in your family about the incident? Anyone else, such as a friend or neighbour?	No one a <input type="checkbox"/> N08 Female member of your family of birth b Male member of your family of birth c Female member of your in-laws d Male member of your in-laws e Your child/children f Friend/neighbour g Other (specify): x
N07n	How did they respond? Anything else?	Blamed me for it a Supported me b Were indifferent c Told me to keep it quiet d Advised to report to police e Other (specify): x

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SECTION 10 OTHER EXPERIENCES							
N08	I want you to think about any male person. For women who ever had a partner add: except your husband/male partner. Apart from anything you may have mentioned, can you tell me if, in your whole life , if any male person has done the following to you? Remember to include people you have known, as well as strangers.	A.		B. Has this happened in the past 12 months?			
		Yes	No	Yes	No	DK	
		a. Has anyone attempted but NOT succeeded to force you into sexual intercourse when you did not want to, for example by holding you down or putting you in a situation where you could not say no?	1	2	1	2	8
		b. Has anyone touched you sexually when you did not want them to. This includes for example touching of breasts or private parts?	1	2	1	2	8
c. Has anyone made you touch their private parts against your will?	1	2	1	2	8		
N09	Now, I want you to think about any male or female person. For women who ever had a partner add: except your husband/male partner. Apart from anything you may have mentioned, can you tell me if, in your whole life , any person, male or female has done the following to you?			B. If yes: What was the sex of the person or people who did this?			
		Yes	No	Male	Female	Both	
		a. Have you ever been asked to perform sexual acts against your will in order to get a job or keep your job, or to get promoted?	1	2	1	2	8
		b. Have you ever been asked to perform sexual acts against your will in order to pass an exam or get good grades at school?	1	2	1	2	8
		c. Have you ever been groped, sexually touched, or had someone rubbed against you in the bus or another public space?	1	2	1	2	8
d. Have you ever received personal electronic messages with sexual content (e.g. remarks, invitations, pictures) that were hurtful to you or made you feel uncomfortable? For example, via Facebook, Whatsapp, cellphone, e-mail, excluding spam	1	2	1	2	8		
N10	In the past 12 months, have you become sexually involved with someone because they provided you with, or you expected that they would provide you with, gifts, help you to pay for things, or help you in other ways?	Yes.....01					
		No.....02					
		Don't know.....98					
		Refused/no answer.....99					

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SECTION 10 OTHER EXPERIENCES

1004	How old were you when you first had sexual intercourse? If necessary: We define sexual intercourse as vaginal, oral or anal penetration.	Age years (more or less) [] [] □ 1006 Not had sex 95 Refused/no answer..... 99
1005	How would you describe the first time that you had sexual intercourse? Would you say that you wanted to have sex, you did not want to have sex but it happened anyway, or you were forced to have sex?	Wanted to have sex 01 Not want but had sex 02 Forced to have sex 03 Don't know/don't remember..... 98 Refused/no answer..... 99
1005c	The first time you had sexual intercourse, was this with your (future) husband/cohabiting partner, or was it with someone else? If someone else: Was he your age or was he older?	(Future) husband/partner..... 01 Someone else more or less your own age 02 Someone else who was older..... 03 Someone else who was younger..... 04 Refused/no answer 99
1006	If over 18 When you were a child (under the age of 18), was your mother hit by your father (or her husband or boyfriend)? If under 18 Was your mother ever hit by your father (or her husband or boyfriend)?	Yes..... 01 No 02 Don't know/don't remember..... 98 Refused/no answer..... 99
1006a	If over 18 When you were under the age of 18, were you were beaten so hard at home that it left a mark or bruise? If under 18 Were you ever beaten so hard at home that it left a mark or bruise?	Yes..... 01 No 02 Don't know/don't remember..... 98 Refused/no answer..... 99
1006b	If over 18 When you were under the age of 18, were you insulted or humiliated by someone in your family in front of other people? If under 18 Were you insulted or humiliated by someone in your family in front of other people?	Yes..... 01 No 02 Don't know/don't remember..... 98 Refused/no answer..... 99

(continued)

SECTION 11 COMPLETION OF INTERVIEW			
	I have asked you about many difficult things. How has talking about these things made you feel?	Good/better Bad/worse Same/ no difference	01 02 03
	Write down any specific response given by respondent _____ _____ _____ _____ _____ _____ _____ _____ _____ _____		
	Finally, do you agree that we may contact you again if we need to ask a few more questions for clarification?	Yes No	01 02
	Countries to specify time period depending on when they plan to do quality control visits		
	<i>Finish one – if respondent has disclosed problems/violence</i>		
	I would like to thank you very much for helping us. I appreciate the time that you have taken. I realize that these questions may have been difficult for you to answer, but it is only by hearing from women themselves that we can really understand about their health and experiences of violence.		
	From what you have told us, I can tell that you have had some very difficult times in your life. No one has the right to treat someone else in that way. However, from what you have told me I can see also that you are strong, and have survived through some difficult circumstances.		
	Here is a list of organizations that provide support, legal advice and counselling services to women in STUDY LOCATION. Please do contact them if you would like to talk over your situation with anyone. Their services are free, and they will keep anything that you say confidential. You can go whenever you feel ready to, either soon or later on.		
	<i>Finish two – if respondent has not disclosed problems/violence</i>		
	I would like to thank you very much for helping us. I appreciate the time that you have taken. I realize that these questions may have been difficult for you to answer, but it is only by hearing from women themselves that we can really understand about women's health and experiences in life.		
	In case you ever hear of another woman who needs help, here is a list of organizations that provide support, legal advice and counselling services to women in study location . Please do contact them if you or any of your friends or relatives need help. Their services are free, and they will keep anything that anyone says to them confidential.		
1205	Record time of end of interview: HH:MM [] [] : [] [] (00–24 h)		
1206	Ask the respondent. How long did you think the interview lasted? This should be her own estimate Hours [] minutes [] []		



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