

Status of Gender Based Violence and Reproductive Health & Rights in Khyber Pakhtunkhwa-2019



AwazCDS-Pakistan: Established in 1995 and is registered as not for profit organization with registrar joint stock companies under Societies Registration Act 1860 and enjoys special consultative status with United Nation's Economic & Social Council (UN ECOSOC). AwazCDS-Pakistan's core mission is to develop integrated and innovative solutions in cooperation with partners at all levels to secure the future of marginalized communities especially by creating rightful spaces and choices of life. For more information, please visit www.awazcds.org.pk.

Ujala: is national network for creating rightful spaces & choices of life. Ujala is comprised of 50 civil society organizations working together for the rights of children, women, young people, person with special abilities & transgender communities through grassroots mobilization and suggesting legislative reforms in the country regarding Gender Based Violence, Life Skills Based Education, Youth Friendly Health Services, Early Age Marriages and issues related to Stigma & Discrimination. Network is being managed by Awaz Foundation Pakistan: Centre for Development Services.

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Background

This fact based informative booklet is construed from a study based on primary data gathered from 10 districts of Khyber Pakhtunkhwa that includes Mansehra, Swat, Lower Dir, Kohat, Karak, D.I. Khan, Noshera, Peshawar, Mardan and Bannu.

The study reached out to three core groups, i.e. Adults (including parents, SRHR experts, media personnel, religious scholars, policy makers, transgender individuals and people living with disabilities who were 29 years or above); Healthcare Providers and Young People (between the ages of 15 – 29 years).

The study aimed to investigate the knowledge, attitude and behaviors of the communities regarding Reproductive Health Rights and Gender Based Violence. KP based booklit will give an idea on current situation and lead towards a more enabling environment in Pakistan at the levels of policymaking and implementation; community acceptance, practice and implementation of SRHR through increased awareness among stakeholders from local government officials, media, religious groups, parents, school community, civil society organizations and parliamentarians.

Link of the complete study: <http://awazcds.org.pk/status-of-sexual-reproductive-health-and-rights-in-pakistan/>

Status of **SEXUAL** & **REPRODUCTIVE** Health and Rights in Pakistan



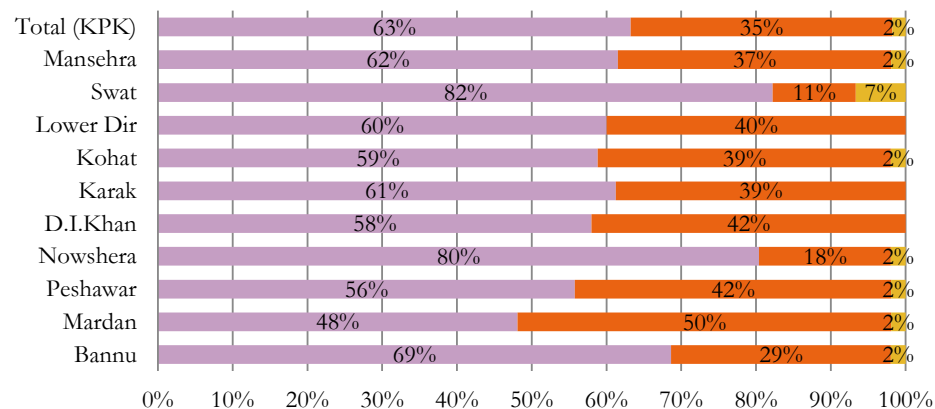
For Creating Rightful Spaces & Choices of Life

Awaz Foundation Pakistan



Demographic Information

Gender



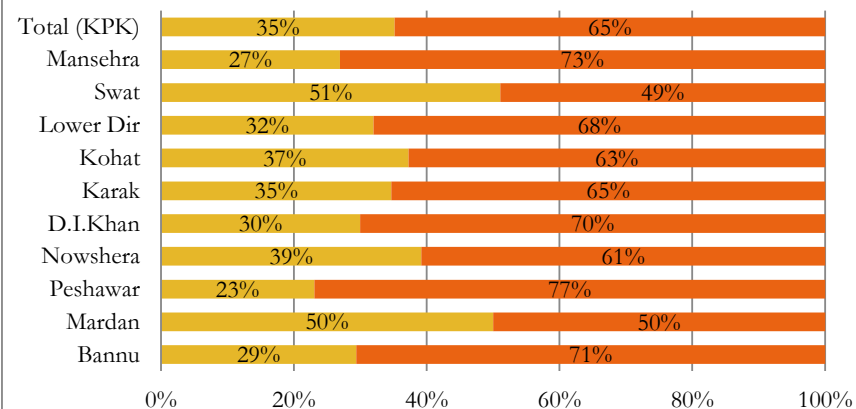
Graph 1 Male Female Transgender / Transsexual

Graph 1: Represents the percentage of gender of respondents who participated from total 10 districts of KP. The gender was categorized into sub-categories (male, female and transgender).

Overall, the total percentage of male, female and transgender respondents were 63%, 35% & 2% respectively.

Note: we aimed for gender balance between two dominating genders but average remained as 63% (M) and 35% (F).

Age

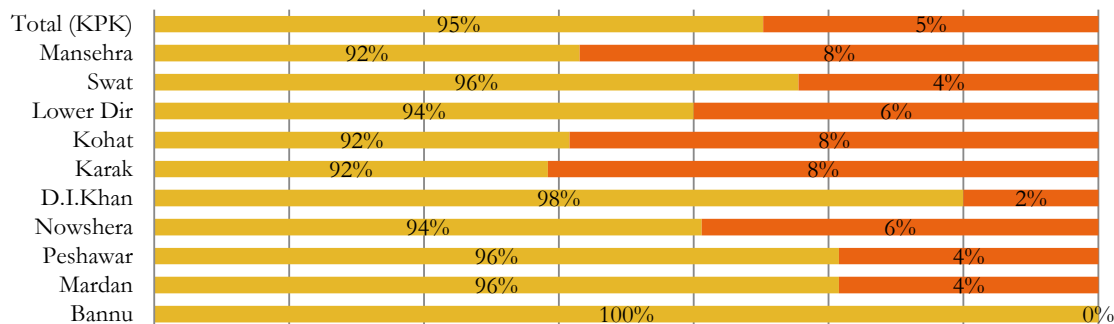


Graph 2 15 - 29 Years More than 29 Years

Graph 2: Age was further categorized into two sub-categories; respondents within the age of 15-29 years (young people) and more than 29 years (Adults).

In province KP, total 35% of the targeted audience was in between the age of 15-29 years and 65% of the respondents were adult. The district wise percentages of age of respondents are shown in graph 2

Education



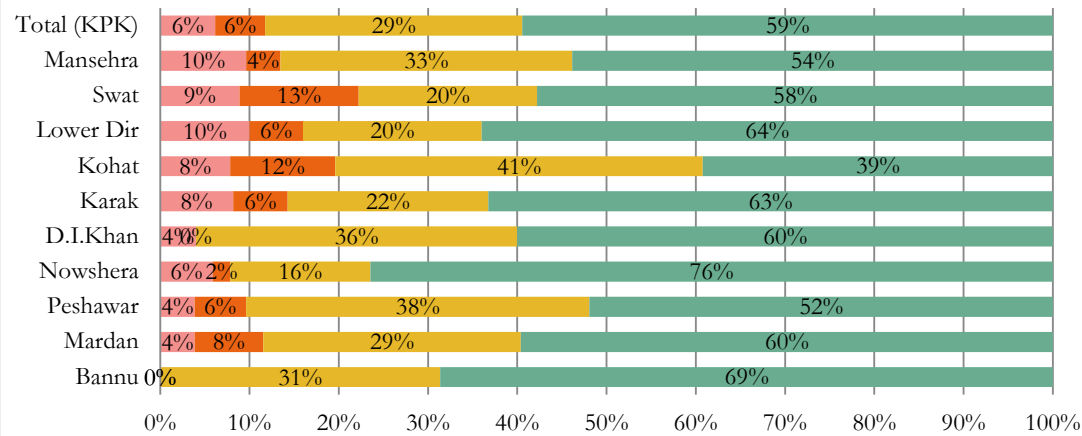
Graph 3 Yes No

Graph 3 represents the education of the respondents:

Overall, in province KP, total 95% of the respondents had attended the school and 5% of the respondents had never been to the school.

The district wise percentages of respondents' schooling in KP are shown in graph.

Highest Education

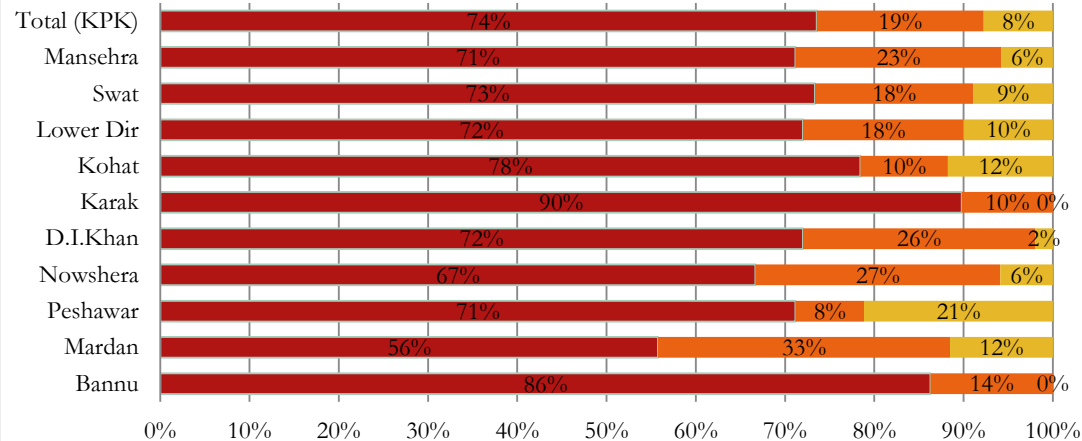


Graph 4 ■ Uneducated ■ Primary and Middle ■ High and Higher Secondary ■ Graduate and Beyond

Graph 4 represents the highest education of the respondents.

Overall in province, total 6% of the respondents were uneducated, 6% were primary and middle-passed, 29% had done high and higher secondary education and 59% were graduated and above. The district wise results of respondents' education are shown in the graph.

Relationship Status

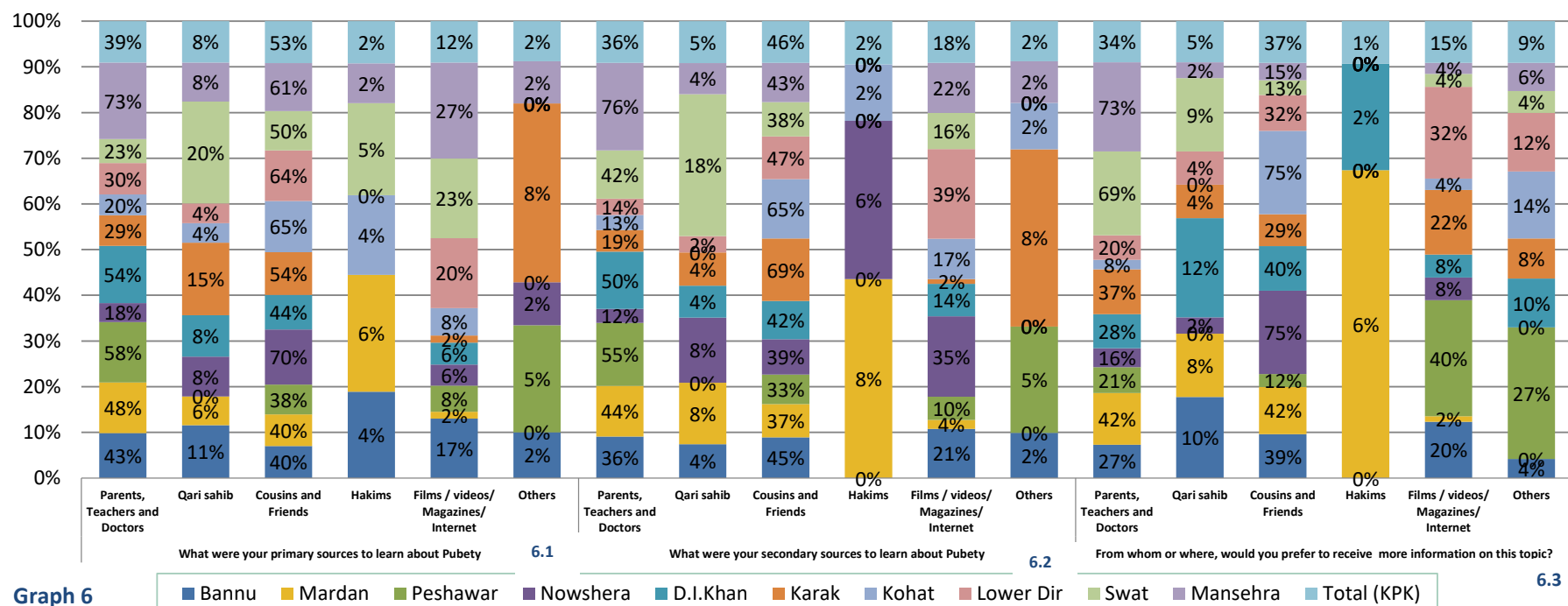


Graph 5 ■ Married ■ Un Married ■ No Response

Graph 5 represents the relationship status of the respondents.

In province KP, 74% of the respondents were married, 19% were unmarried and 8% of the respondents did not respond to the question.

Major Findings of Khyber Pakhtunkhwa



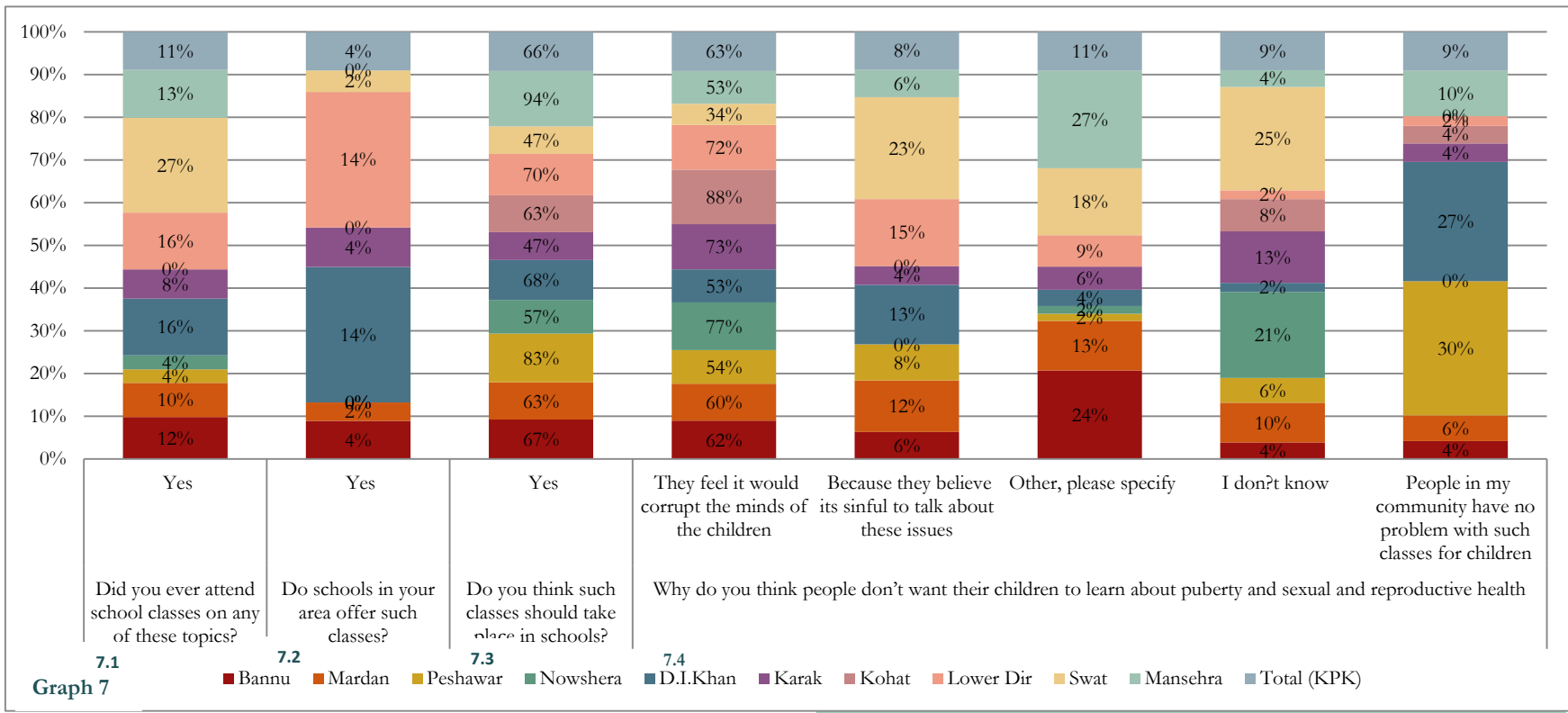
Graph 6

In section 6.1, respondents were asked regarding their primary source to learn about puberty. The highest percentages of 53%, 39% and 12% of the responses were received under categories ‘Cousins and Friends’, ‘Parents, Teachers and Doctors’ and ‘Films/videos/magazines/internet’ respectively. Further, under category ‘Cousins and Friends’, out of the average 53%, the highest percentage of 70% in Noshera, 65% in Kohat and 64% in Lower Dir were observed where the respondents had learned about puberty primarily from ‘Cousins and Friends’. From total 39% of the responses received under category ‘Parents, Teachers and Doctors’ the highest percentages were observed in districts Mansehra, Peshawar and D.I. Khan with 73%, 58% and 54% of the respondents responded in each district respectively. Similarly, out of average 12% of the responses received under category ‘Films/videos/magazines/internet’, highest 27% of the respondents were from Mansehra, 23% from Swat and 20% were from Lower Dir.

In section 6.2, while asking from the respondents regarding their secondary sources to learn about puberty, the highest percentages of 46%, 36% and 18% of the responses were again received against categories ‘Cousins and Friends’, ‘Parents, Teachers & Doctors’ and ‘Films/videos/magazines/internet’ respectively. This high percentage is alarming as respondents felt more comfortable and trust worthy to “Friends and Cousins” to learn more on puberty. Out of average 36% of the responses received against category ‘Parents, Teachers and Doctors’, the highest percentage of the respondents belonged to districts Mansehra, Peshawar and D.I. Khan with 76%, 55% and 50% of the respondents in respective districts. Under the third highest category of ‘Films/videos/magazines/internet’ with 18%, majority of the respondents were belonged to districts Lower Dir, Noshera and Mansehra with percentages 39%, 35% and 22% respectively. If we look into % of “Friend/Cousin & Movies/ internet” categories so will get to know that 63% people preferred to learn about puberty from unauthentic sources.

In section 6.3, respondents were asked that from whom they would prefer to receive more information on puberty. From all over KP, the highest average percentages of the responses received against categories, ‘Cousins and Friends’, ‘Parents, Teachers and Doctors’ and ‘Films/videos/magazines/internet’ are 37%, 34% and 15% respectively.

The highest percentage of the respondents are observed to be in category ‘cousins and friends’, however, the second highest category i.e. ‘Parents, Teachers and Doctors’ includes the percentage of 34% that is also near to the first highest category of ‘cousins and friends’ which means that a good percentage of respondents prefer to take information on puberty from authentic means.



In section 7.1, the respondents were asked if they had ever attended school classes on topics related to puberty, child protection and reproductive health issues. Average 11% of the respondents in KP attended the classes on these topics. Out of average 11%, the high percentages of the respondents were from Swat 27%, D.I. Khan & Lower Dir 16% respectively and Mansehra 13%. Whereas, we can understand that 89% of respondents were never educated on such self-protection and puberty related issues.

In section 7.2, only 4% of the respondents KP said that the schools in their area offer such classes. Rest 96% of respondents have never availed this opportunity to get authentic and right information from RIGHT source e.g. Teachers and curriculum.

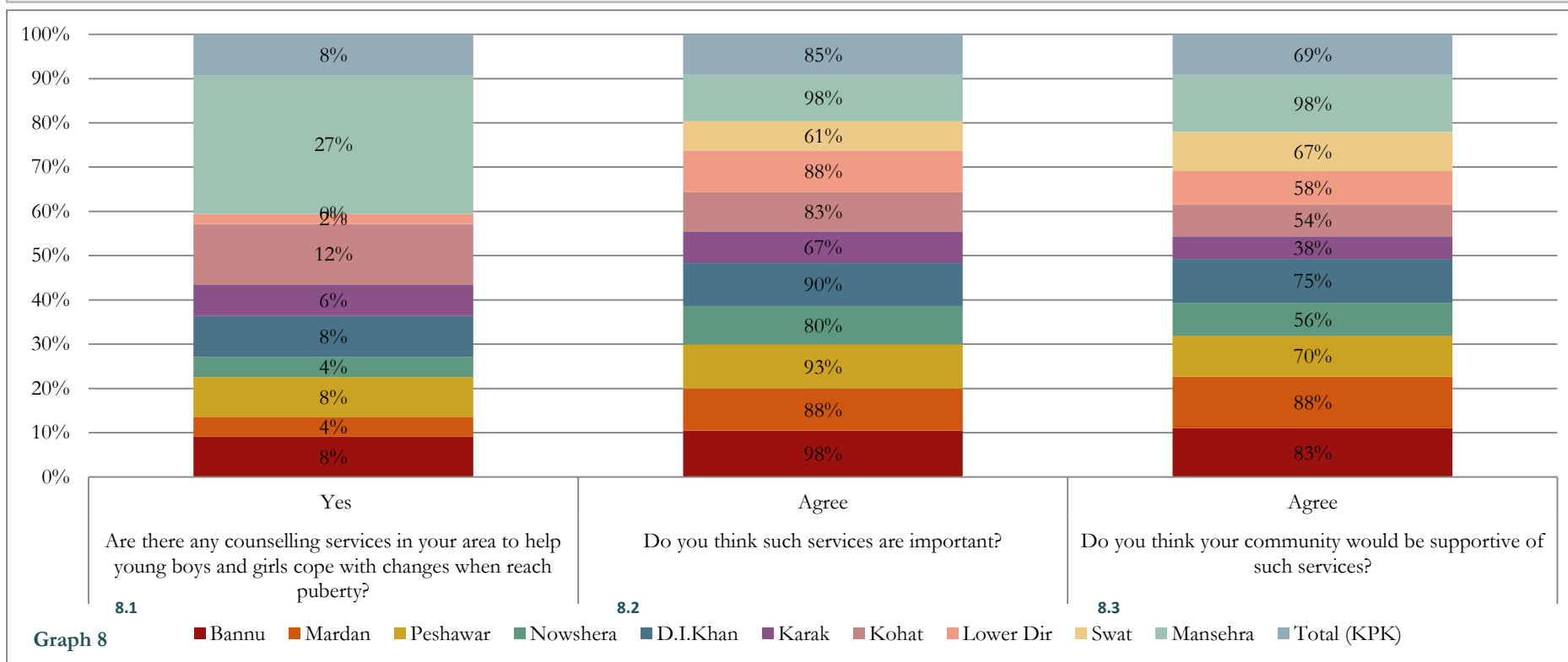
In section 7.3, while asking from the respondents if such classes should take place in schools, average 66% of the respondents in KP responded in favor of the statement. It means a high % is in favor of providing such information in schools so children so they may get aware and protected at Right age from Right Source. From the total 66%, as compared to other districts, a high % of 94% was received from district Mansehra.

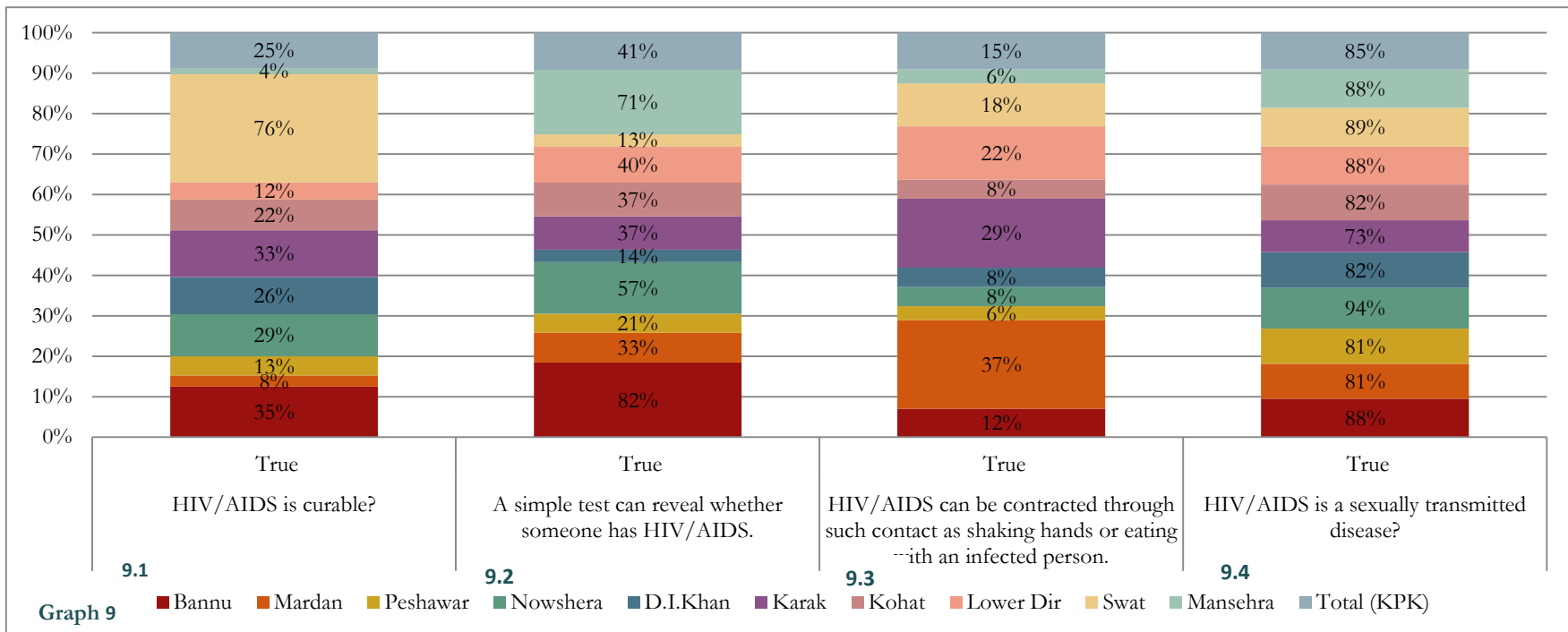
In section 7.4, the respondents were asked about reasons that why people do not want their children to learn about puberty and sexual reproductive health. Among all five categories, category 'it would corrupt the mind of children' has the highest 63% of the respondents who think that this is the main reason why people do not want their children to learn about such topics. It also shows that respondents also have misinterpretation about puberty and child protection related topics which makes them shy and concerned which is mainly misunderstanding about issues.

From below section 8.1, 8% of the respondents in KP said that there are counseling services available in their areas to help young boys and girls cope with changes when reach puberty. This shares a demise picture for having no such facility for 92% of respondents which in results increasing trends of consulting quacks and indulging into other risky behaviors.

In section 8.2, the respondents were asked if such counseling services are important. From every district, a high percentage of responses were received, with Bannu and Mansehra covering the highest percentage of 98%, Peshawar 93% and D.I. Khan 90% of the respondents who believed that such services are important. Overall, in KP, 85% of the participants agreed with the statement for having counseling services available in the area.

In section 8.3, average 69% of the respondents in KP agreed with the statement that their community would be supportive of such counseling services. However, among districts the highest percentages of the respondents were from Mansehra, Mardan and Peshawar with percentages 98%, 88% and 83% respectively.



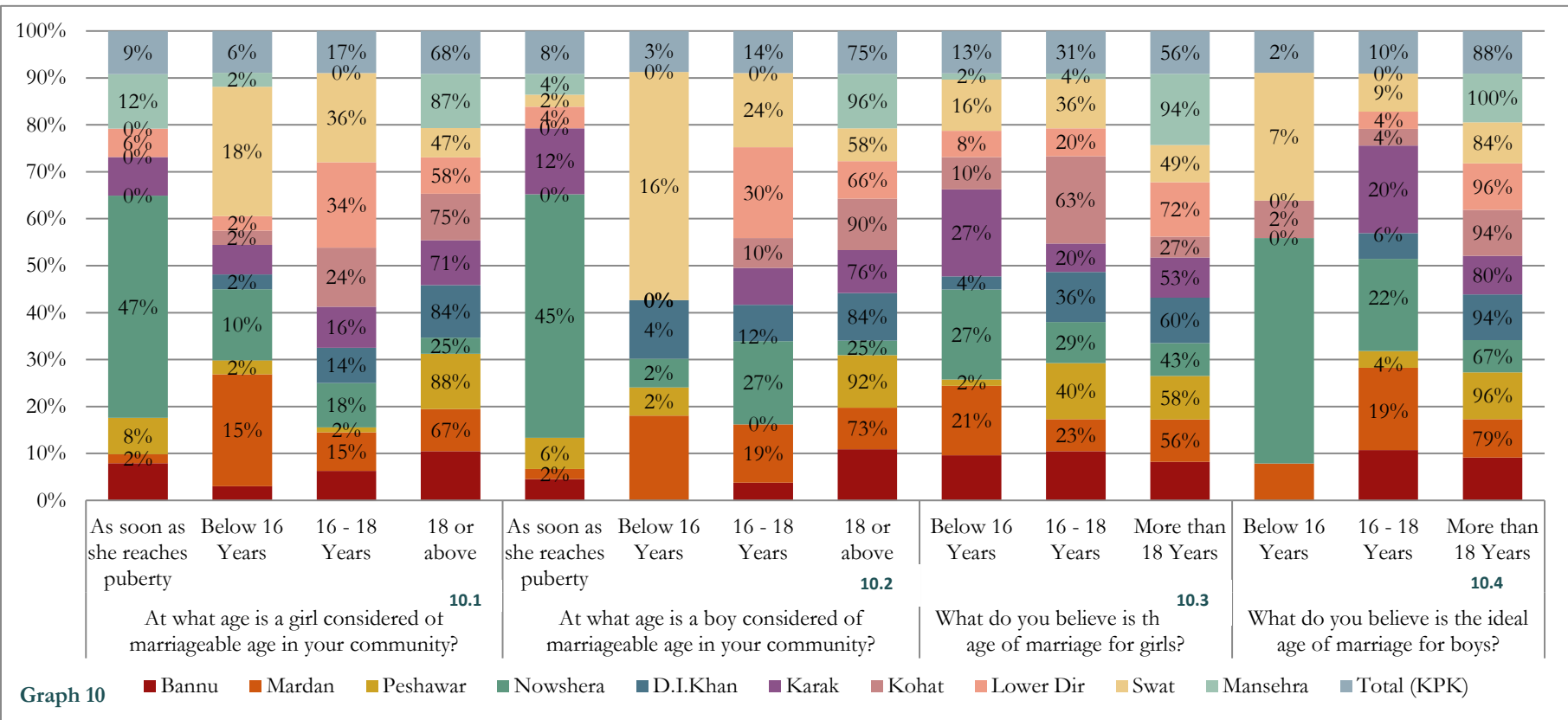


In section 9.1, respondents were asked if HIV/AIDS is curable. Overall in KP, 25% of the respondents believed that HIV/AIDS is curable. Among the districts, this misunderstanding prevails highest in Swat with the high percentage of 76% responses received for this statement. Although, different governments tried to educate public through media but it still needs a lot more investment in terms of educating people so they may remain safe from such life taking diseases.

In section 9.2, while asking from the respondents if a simple test can reveal whether someone has HIV/AIDS. Hence very disappointing % of District Bannu and Mansehra came out with 82% and 71% respectively. Whereas District Noshera is with 57% who believed that HIV/AIDS can be diagnosed from simple test. District Swat and D.I. Khan showed the minimum misunderstanding on question with 13% and 14% respectively.

In section 9.3, 15% of the respondents in KP believed that HIV/AIDS can blow out through contact like shaking hands or eating with an infected person. However, among districts, Mardan, Karak and Lower Dir was observed to be on top with 37%, 29% and 22% of the respondents respectively. Remarkably, district Peshawar and Mansehra came with least misunderstanding with 6% of the responses received from both districts.

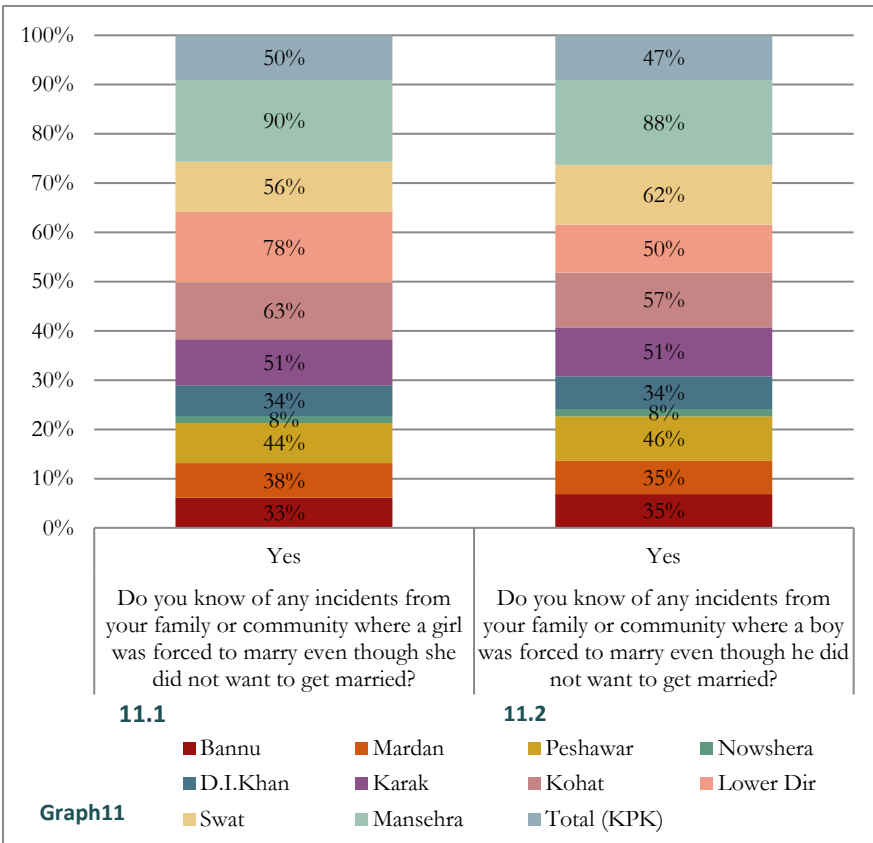
In section 9.4, the respondents were asked if HIV/AIDS is a sexually transmitted disease. While agreeing with the statement, a high percentage was received from all districts. However, district Noshera were observed to be on the top with percentages of 94% of the responses. Average 85% percent of the respondents in KP agreed with the statement. It is observed that all districts with such high percentages especially district Noshera agreed on all sources of dissemination that shows incomplete knowledge on HIV/AIDS.



In section 10.1, respondents were asked regarding the considerable age for girls to get married in their respective community. Among four categories, the category '18 or above' with average 68% were observed to be on top. Under this category, the high percentages of 88%, 87% and 84% responses were observed in districts Peshawar, Mansehra and D.I. Khan respectively. Category 16-18 years was observed less demanded with 17% of the responses received from KP. Which means people do not think 16-18 years of age is desirable for girls' marriage. It also deserves our attention in law making for Child Marriages in KP by considering the demand of 18 years or above.

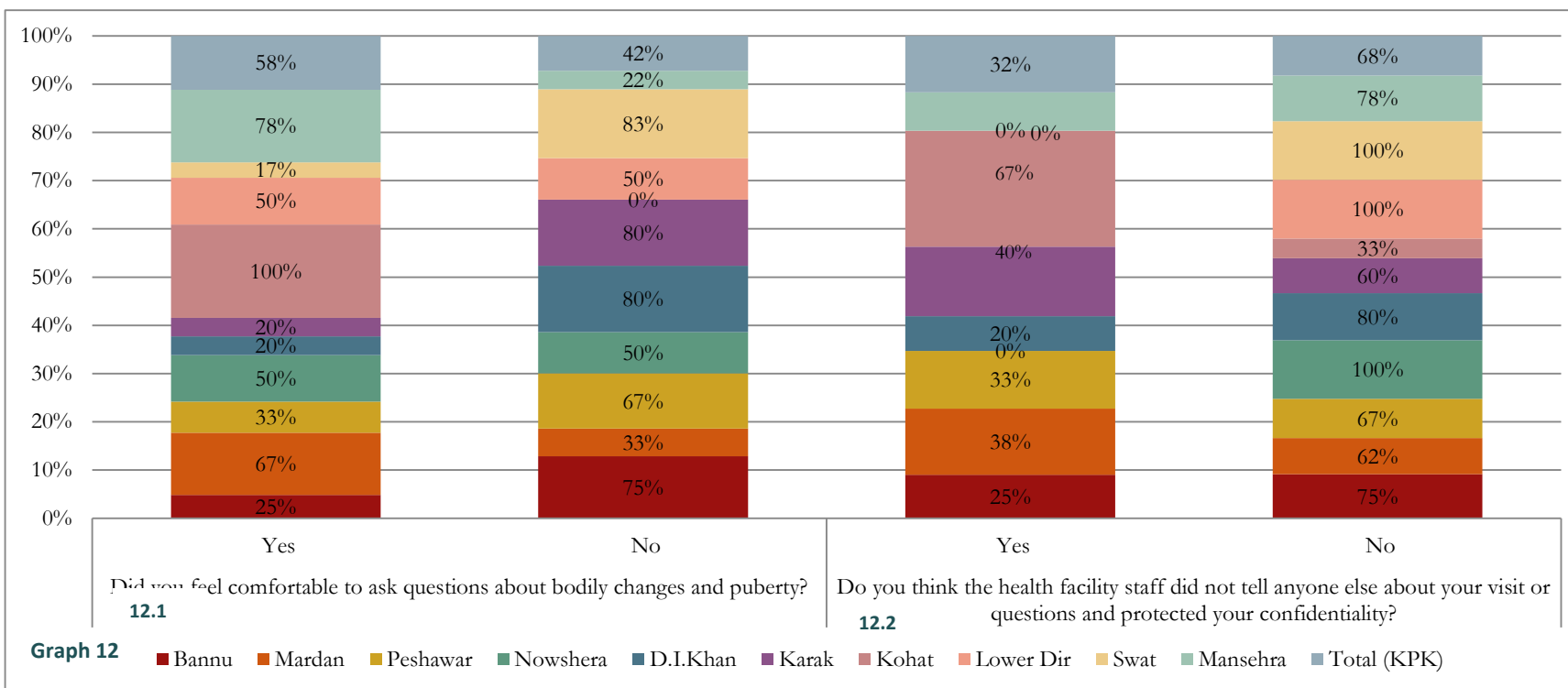
In section 10.2, respondents were asked regarding the considerable age for boys to get married in their respective community. The category '18 or above' was observed to be remained on top with the 75% of the respondents. Under this category, among districts, the high percentages of 96%, 92% and 90% were observed in districts Mansehra, Peshawar, Bannu and Kohat respectively. Districts Peshawar and Mansehra scored highest % for category 18 or above for both girls & boys. Category "16-18 years" was observed to be less required and less agreeable with 14% of the responses received from KP.

In section 10.3 & 10.4, participants were asked regarding the ideal age for girls and boys to get married. The responses received against category 'more than 18 years' covered the highest percentage of 56% for girls and 88% for boys in KP. While Mansehra, Lower Dir and D.I. Khan came out with high demand for "more than 18 years" for girls with 94%, 72% and 60% respectively. However, results are even more amusing for boys with 100% in Mansehra, 96% in Peshawar and Lower Dir, 94% in D.I. Khan and Kohat. This high % puts demand of child marriage restraint bill in KP by keeping the demand of more than 18 years for both girls and boys.



Graph 11.1 was categorized into two sub-sections. In section 11.1, the respondents were asked if they know about any incident in their family or community where a girl was forced to get married. Percentages received from districts Quetta, Mardan, Peshawar, Noshera and D.I. Khan were below 50%. However, the highest percentages of 90%, 78% and 63% were received from districts Mansehra, Lower Dir and Kohat respectively. Whereas, the total average of 50% of the respondents from KP said that they know such cases where girls were being forced to get married, even they did not want to get married.

Similarly, in section 11.2, the same question was asked for boys where they were forced to get married. In this section, percentages received from districts Quetta, Mardan, Peshawar, Noshera and D.I. Khan were also below 50%. Whereas, the highest percentages of 88%, 62% and 57% of the responses were received from districts Mansehra, Swat and Kohat respectively. However total 47% of the responses were received from KP where the respondents knew such cases. Such inhuman and brutal practices with young people leads to insensitivity for GBV in society. This high % also draws attention of Policy Maker for bringing enabling legislation where YP can exercise their right to choose and marry with their own consent.

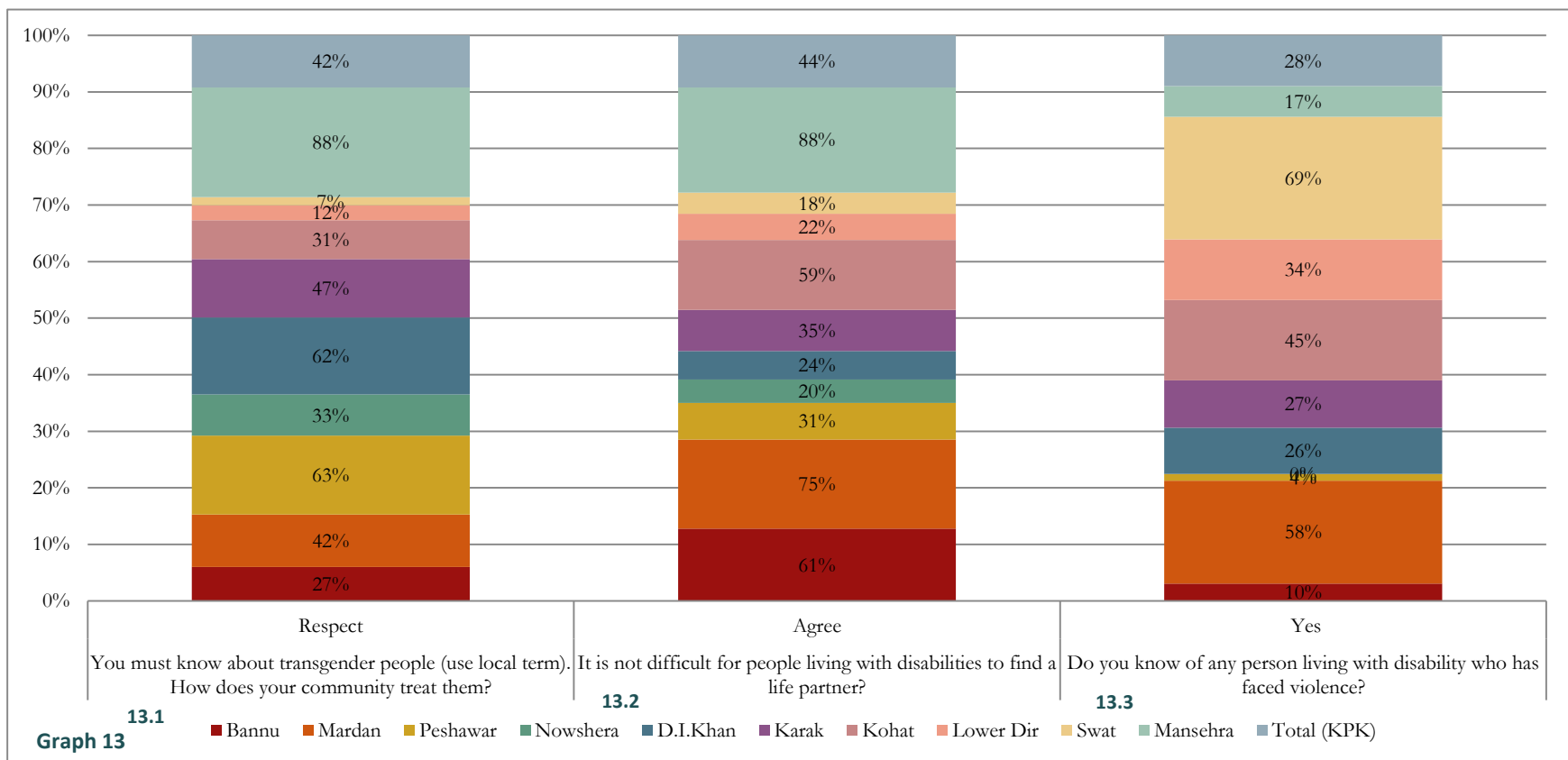


Graph 12

■ Bannu ■ Mardan ■ Peshawar ■ Nowshera ■ D.I.Khan ■ Karak ■ Kohat ■ Lower Dir ■ Swat ■ Mansehra ■ Total (KPK)

In section 12.1, respondents were asked if they feel comfortable in asking questions about bodily changes and puberty. In overall results of KP, average 58% of the respondents said that they felt comfortable in asking such question; whereas 42% of the respondents did not feel comfortable in asking questions to Health Care Provider related to bodily changes and puberty. Whereas, 100% respondents from districts Kohat said that they felt comfortable in asking such question. On the other side, the percentages of responses received in districts Swat, Karak, D.I. Khan, Bannu and Peshawar were observed to be high where respondents did not feel comfortable in asking questions related to bodily changes and puberty. That shows the high need of capacity building for health care providers on issues like “Youth Friendly Health Services” so people could visit them without hesitation and rather being going towards quacks etc.

In section 12.2, while asking from respondents regarding their confidentiality being kept by the health facility staff, the average of total 32% of the respondents in KP said that they think their confidentiality was maintained, whereas, 68% of the respondents informed that their confidentiality was not maintained by the health facility staff. However, the high percentages of 100% were observed in districts Noshera, Lower Dir and Swat where the respondents’ confidentiality was not maintained at all. The percentages of responses received from other districts were also observed high.



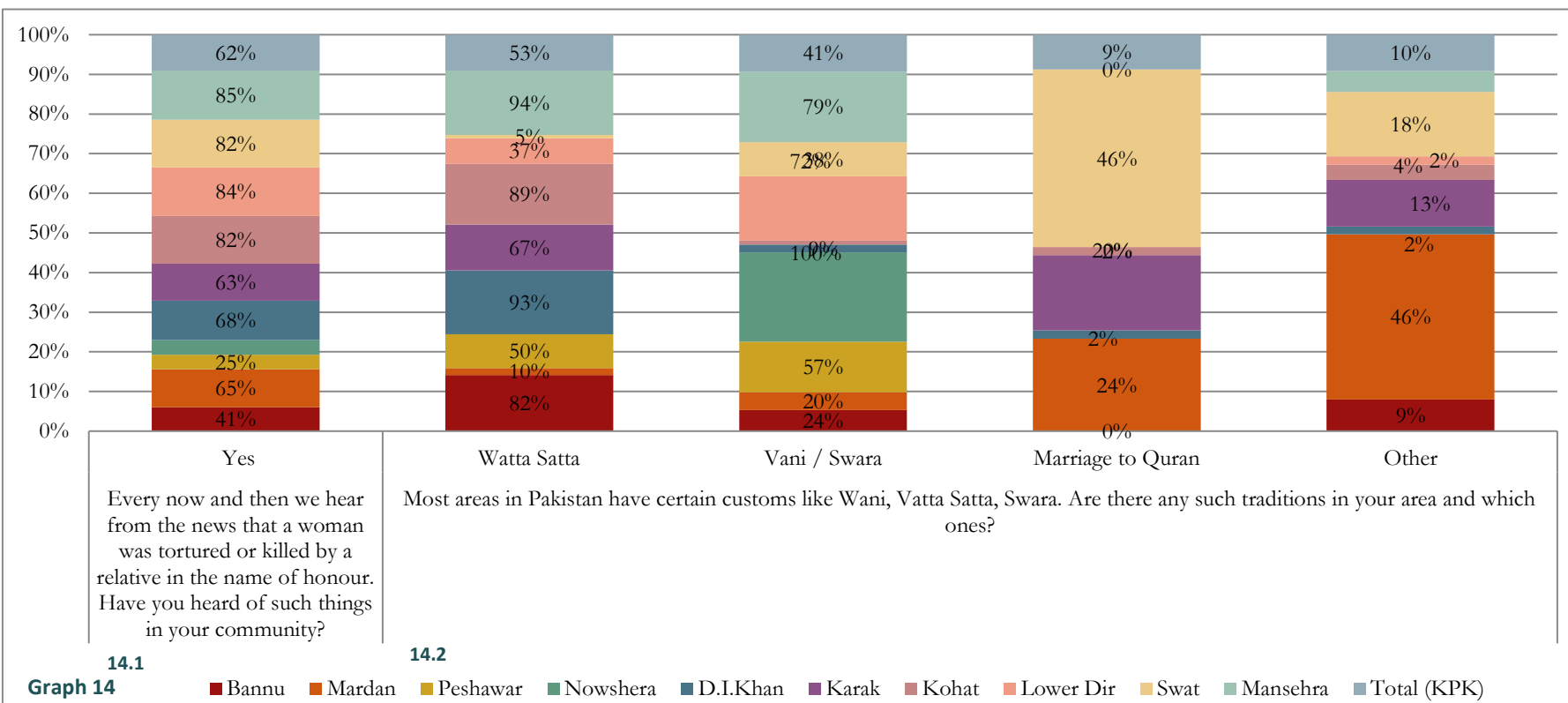
In section 13.1, respondents were asked if their respective community treats transgender with respect. Only 03 district came out with high percentages of 88%, 63% and 62% of respondents in districts Mansehra, Peshawar and D.I. Khan respectively who shared community treat them with respect. The percentages of respondent in other districts were observed even below 50% in this regard. Overall, only 42% of respondents were observed in KP who said that their respective community treats transgender with respect, which shows that 58% agreed that they are not treated either equally or respectfully. It also highlights the need of proper legislation in province to give them respect and other opportunity equally as any other Citizen of Pakistan.

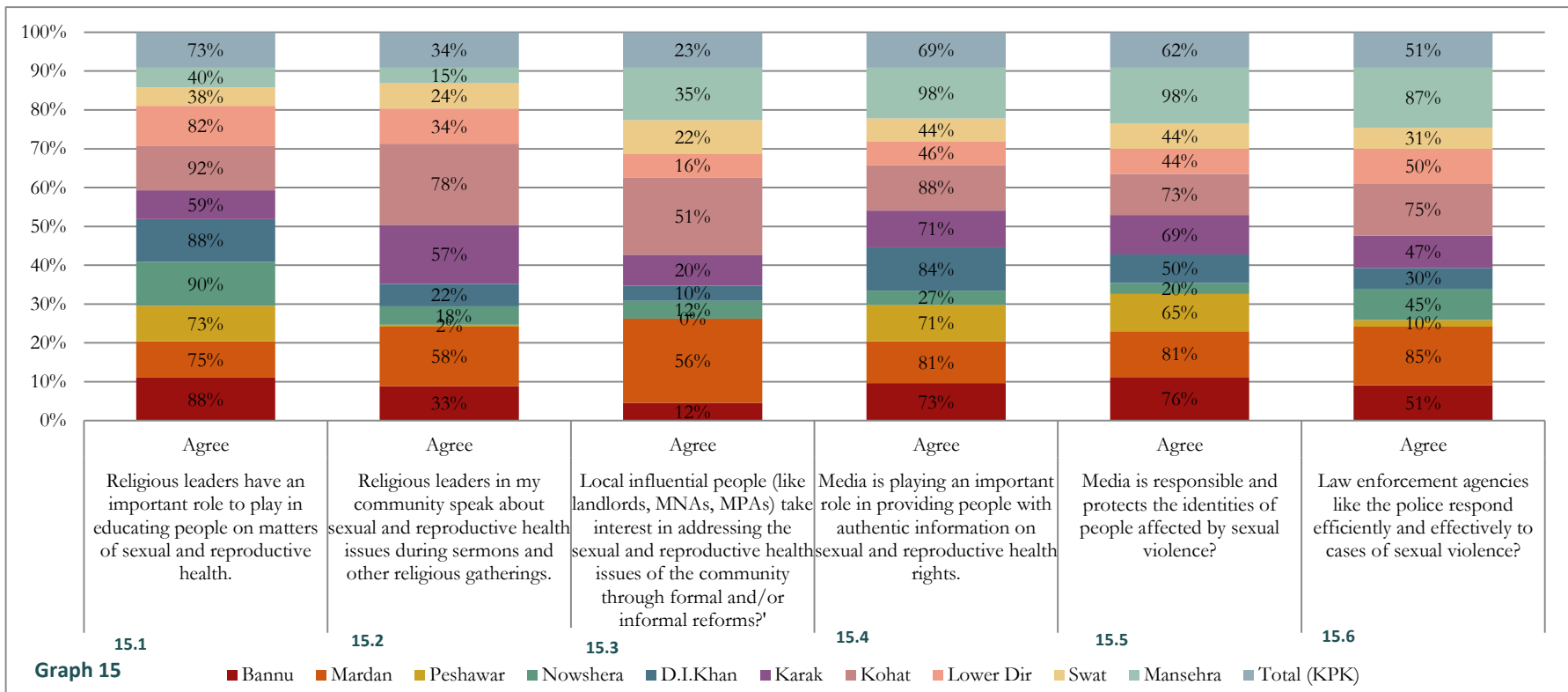
In section 13.2, only 44% of the respondents from KP said that it is not difficult for people living with disabilities to find a life partner. Whereas, 56% disagreed with the statement and consider a great difficulty for PWDs to find their life partner. Though overall disagreement of 56% also indicates towards proper legislation for creating supportive environment where they can enjoy rightful spaces. Other than legislation, it also requires behavior change education that needs to be introduced exclusively.

In section 13.3, while asking from the respondents if they know any person living with disability faced violence. In KP, total 28% of the respondents said that they know such PWDs who have faced violence. However, among districts, percentages of respondents were seemed to be highest in districts Swat, Mardan and Kohat with 69%, 58% and 45% of the responses received. Whereas, it is alarming that every district agreed to asked question which shows the less interest in providing them proper protection.

From below Graph 14, section 14.1 represents the percentage of respondents who have heard about the news in which woman was tortured or killed in the name of honor. The highest percentages of 85%, 84% and 82% were received from districts Mansehra, Lower Dir, Kohat and Swat respectively. In other districts, the percentages of respondents are in between 25% - 68% were observed who knew about such news. In KP, the average 62% of the respondents responded in agreement in this regard. This high % also pays our attention towards the formation and enactment of Domestic Violence Act in KP.

In section 14.2, respondents were asked if cruel traditional practices like Vani, Watta Satta, Sawara exists in their respective districts. Out of the four categories, 53% of the responses were received under category 'watta satta', in which huge percentages of respondents from maximum district were observed. Further, district Mansehra, Noshera, Kohat and Bannu covered the highest percentage of 94%, 93%, 89%, and 82% of the respondents respectively in this regard. Percentages of respondents in other districts were observed to be in between 5% to 67%. Category 'Vani/Sawara' with average 41% of the respondents is observed at the second highest category, in which maximum percentage of the respondents belonged to districts Noshera 100%, Mansehra 79% and Lower Dir 72% of the respondents respectively. It also shows the painful side of violence women are still facing with so called society's justified reasons which only has basis with Violation of Human Rights that requires rigorous policy making and implementation means.





In section 15.1, 73% of the respondents said that religious leaders do have an important role to play in educating people on matters related to sexual and reproductive health. Among districts, percentages of respondents in Kohat, Noshera, Bannu and D.I. Khan were observed high with 92%, 90% and 88% respectively. **But in section 15.2,** Despite agreement that religious leaders had an important role vis-à-vis SRH education the majority of the respondents of 66% shared that religious figures did not speak about SRH issues during sermons and gatherings and only 34% agreed with engagement.

In section 15.3, only 23% of the respondents in KP agreed with the statement that local influential people do take interest in addressing the sexual and reproductive health issues of the community through formal and/or informal reforms which shows that 77% respondents are negating with statement. Therefore, we also see a lesser amount of legislation on such agendas and weak implementation if any related law is there.

In section 15.4, 69% of the respondents agreed that media is playing important role in providing people authentic information on such topics whereas 31% did not agree. Whereas districts like Noshera, Lower Dir and Swat were found less satisfied with the role of media on providing authentic information on these topics with 27%, 44% and 46% respectively.

In section 15.5, 62% of the respondents agreed that media is responsible & protects the identities of people affected by sexual violence however 38% of respondent did not show their confidence. **In section 15.6,** only 51% of the respondents agreed that law enforcement agencies like police respond effectively to cases of sexual violence. Majority of the respondents indicated low levels of confidence in their ability to respond such cases.

Recommendations for Khyber Pakhtunkhwa

Recommendations

Policy level

-Rules of business for all existing laws aimed at curtailing gender based and sexual violence ought to be formalized by KP Government on priority to ensure their immediate implementation.

-Much-awaited Domestic Violence against Women (Prevention and Protection) Bill-should be passed immediately for curbing violence incidents that mostly happen with women.

-Legislation on Child Marriages with minimum age of 18 years needs to be done in province on priority basis.

-Strong implementation and monitoring of laws on transgender rights should be done instantly to discourage the dismal plight of this community and to ensure their maximum education by giving them preferential seats.

-Government policies and laws aimed at enhancing the quality of life of people living with disabilities must factor in their access to their basic human rights including quality Reproductive Health services.

-Government must have mandatory Education classes on Life Skills Based Education including Confidence, Human rights, Gender, Self-Protection and Puberty to keep our children safe from any violence and sexual assault or unfortunate instances for being misused. The changes should be promulgated through proper law making and reforms.

-Anti-sexual harassment Act 2010 must be implemented at all public, private institutions in letter and spirit.

Practice Level

-Government and civil society organizations need to run behavior change campaigns to make communities more receptive to the idea of Life Skills Based Education for their children.

-Comprehensive and prolonged behavior change campaigns on positive versus toxic masculinity need to be introduced by Government of KP and other civil society organizations to inspire behavior change among men and to empower women to assume decision-making roles at par with their husbands.

-A sense of acceptance and empathy needs to be inculcated through media among the masses regarding Person with special abilities and transgender community.

-Awareness campaigns targeting both men and women regarding various laws, including laws against domestic violence, sexual harassment and cyber bullying need to be launched by GoKP as laws are available but most women are not aware about them.

-Institutions and commissions like KP Commission on the Status of Women should play their role more vigorously by making amendments in current policies and laws and sensitizing communities through long term campaigning.

-Pakistan Electronic Media Regulatory Authority (PEMRA) must ensure the strict observation of the code of conduct that protects the identities of those impacted by sexual violence.

-Media wings and Religious leaders must be sensitized and engaged as part of the solution on Gender Based Violence and Reproductive Health issues.

**Article 25 of the Constitution of Pakistan guarantees
Equality of Citizens**

- (1). All citizens are equal before law and are entitled to equal protection of law.
- (2). There shall be no discrimination on the basis of sex.
- (3). Nothing in this Article shall prevent the State from making any special provision for the protection of women and children.

Ujala Partners from Khyber Pakhtunkhwa



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