IMAGES Country Study Documentation

Cambodia

2013



KEY OBJECTIVES

From 2010 to 2013, over 10,000 men and 3,000 women in six countries across Asia and the Pacific were interviewed using the UN Multi-country Study on Men and Violence household survey on men's perpetration and experiences of violence. The countries included in the study were Bangladesh, Cambodia, China, Indonesia, Sri Lanka and Papua New Guinea. The study was a collaborative effort involving partners from academia, research institutes, civil society, the United Nations family and governments around the globe.

This epidemiological study informed by a gender, power and masculinities perspective is based on the quantitative population-based household survey with individual men and women and the data was analyzed from a scientific epidemiological perspective. However, it was premised on the well-documented hypothesis that violence against women is a manifestation of unequal gender relations and harmful manifestations of hegemonic masculinity governed by patriarchal beliefs, institutions and systems.

KEY OBJECTIVES

The study objectives were to: better understand men's use of different forms of violence against women (specifically, intimate partner violence and non-partner rape) in the Asia–Pacific region; assess men's own experience of violence as well as their perpetration of violence against other men and how it relates to the perpetration of violence against women; identify factors associated with men's perpetration of different forms of violence against women; promote evidence-based policies and programs to prevent violence against women.

2 DATA COLLECTION

In all sites, a representative sample of men aged 18-49 years was obtained from households selected through a multi-stage cluster sampling strategy. A minimum sample size of 1,000 was established on the basis of required levels of statistical power to meet the primary study objectives, but some countries chose to have a larger sample size. The researchers relied on census enumeration areas, with a probability proportionate to size, and systematically selected households within those areas. In each household, a man aged 18–49 years (where necessary, randomly selected) was invited for the interview with a trained male interviewer. Men aged 50 and older were excluded to reduce recall bias and avoid the heightened sensitivity of discussion of sexual matters. Most interviews were face to face, but answers to the most sensitive questions were selfcompleted on audio-enhanced personal digital assistants (PDAs). There was no replacement of absent or non-responding households or individuals.

2 DATA COLLECTION

This quantitative survey provides the largest cross-country comparable data set focused on men's perpetration of violence against women in the Asia–Pacific region, complementing existing studies done with women. In particular, the quantitative study aimed to answer the following broad research questions:

What is the prevalence and frequency of men's use of different forms of violence against women (specifically, intimate partner violence and non-partner rape) in the Asia–Pacific region?

What is the prevalence and frequency of men's own experiences of violence as well as their perpetration of sexual violence against other men and how does it relate to the perpetration of violence against women?

What are the factors associated with men's perpetration of different forms of violence against women?

How does this inform evidence-based policies and programs to prevent violence against women?

SAMPLE SIZE AND LOCATION

In total, 10,178 men and 3,106 women aged 18–49 were interviewed throughout the six countries.

1812 men and 477 women were interviewed in Cambodia.

<u>Cambodia - National</u>

Cambodia is a South-East Asian country bordered by Viet Nam, Thailand, Lao People's Democratic Republic and the Gulf of Thailand. Cambodia has had a tumultuous recent history, first in the American war with Viet Nam, then under the Khmer Rouge regime, during which an estimated one quarter of the population died, and then under Vietnamese occupation from 1980 to 1989. Although the Khmer Rouge regime officially ended in 1979, conflict continued in many parts of the country until as late as 1992.

SAMPLE SIZE AND LOCATION

The population of 14.9 million is predominantly Buddhist and of Khmer ethnicity. The sample was nationally representative, with the study conducted in Phnom Penh (the capital and largest city in Cambodia) and in four other randomly selected districts of Siem Reap, Battambang, Kampot and Sihanoukville.

Sample Design: Random sampling of villages (census areas) in each province using PPS, systematic sampling of households within villages.

2 of 4 subregions were randomly selected, then 2 provinces per region selected using PPS (Kampot, Sihanoukville, Siem Reap, Battambang), plus Phnom Penh.

Sampling in Cambodia is nationally representative.

No. of Clusters: 113 villages

4 RESPONSE RATE

In almost all the research sites, there was a high response rate, with more than 70 percent of selected men and women completing the interviews.

Cambodia - National Total Number of Eligible Households: 1863 Individual Male Response Rate: 89.9%

Total Number of Eligible Households: 620 Individual Female Response Rate: 92.7%

5 WEIGHTING PROCEDURE

The researchers compared the standard prevalence rates of all types of violence with prevalence weighted for the number of eligible men in a household and found no significant difference. Thus, the analysis presented in this report is not weighted. The cross-sectional nature of the survey means that causation of violence perpetration cannot be determined; however, the analysis of associated factors still provides a strong evidence base to inform prevention interventions.

6 MISSINGNESS ASSESSMENT

The research sites were selected to reflect the diversity of the region, with sites from South Asia, South-East Asia, East Asia and the Pacific, including two post-conflict sites. The countries that were included also required available funding and partner institutions with the capacity to conduct the surveys. Given that this was a multicountry study with a focus on comparisons across sites, the aim was not to obtain nationally representative samples, which would have been too costly and time consuming.

Thus, the findings only reflect the sampled sites. Not all countries in Asia and the Pacific were included in the study because it was not financially or logistically feasible; thus, the analysis of the combined sample does not represent the region.

6 MISSINGNESS ASSESSMENT

Although all countries met the minimum sample requirements, the sample sizes varied among the countries, reflecting overall population size and the number of sites where the survey was conducted. Such variations are unlikely to have influenced the results because all methods resulted in a representative sample with no particular biases related to the outcomes. There may have been non-response bias, but response rates were high.

Violence perpetration, particularly sexual violence, may have been underreported because it is perceived as a private, antisocial behaviour, although most women's reports appear to validate the findings from men. Bangladesh was the first country to undertake the study and, following that experience, the questions on sexual partner violence were expanded to include a question on coerced sex. As a result, there is some disparity between the sexual violence questions administered in Bangladesh and the other sites, and this may impact on reported prevalence there.

7 QUALITY CONTROL

A range of mechanisms were used to monitor the quality of the survey implementation. Details of eligible members of each household were compiled during the survey. Possible sampling biases were explored by comparing the sample interviewed with the distribution of eligible respondents.

To monitor the quality of the interviewers' work, supervisors conducted random rechecks of some households during fieldwork, without warning interviewers ahead of time. The supervisors did qualitycontrol interviews with a sub-sample of respondents to check consent procedures, confidentiality, the responses to a few questions and assess the respondent's perceptions about the interview. Supervisors also used field-monitoring sheets and reviewed the interviewers' paperwork each evening to track the progress of their team and of each individual interviewer. Supervisors also conducted daily debriefs with their team throughout the data collection.

QUALITY CONTROL

These mechanisms enabled the supervisors to determine and address problems directly while in the field, mitigating any potential loss of quality to the data.

Skips and valid limits were automatically programmed into the PDAs, which helped ensure that the quality of the data entry was not jeopardized by human error.

At the start of all interviews, participants were informed of the purpose and nature of the study through an information sheet. Respondents were asked to sign consent forms or, if they felt more comfortable, give verbal consent to participate in the survey (in which case the interviewer signed the consent form on behalf of the respondent), acknowledging their agreement to participate. Signed consent forms were always kept separate from household lists, and upon the interviewers' returning from the field, kept in a locked filing cabinet. The respondents were free to terminate the interview at any point and to skip any questions that they did not want to answer.

Maximizing Disclosure

Given the sensitive nature of the study, which included questions about men's own perpetration of violence, careful steps were taken throughout the process to ensure maximum disclosure from all respondents.

Questionnaire Structure and Wording

Based on the experience of the World Health Organization with its Multi-Country Study of Women's Health and Domestic Violence against Women, the questionnaires asked less-sensitive information early on and then sensitive questions later in the survey, once trust and rapport had been built between the interviewer and respondent. The women's questionnaire was designed to both begin and end with less-sensitive questions, with the most sensitive questions on experiences of violence only asked in the middle of the interview, to have enough time to build up rapport between the respondent and interviewer so that disclosure was increased and avoided respondents undergoing psychological distress after participating in the survey.

Information regarding service providers was given to all respondents in case they wanted to seek support services after the interview.

Violence against women often carries stigma, both for the perpetrator and for the woman who has experienced the violence. Based on international standards, careful effort was made to ensure that all questions were phrased in a non-judgmental manner and that the words 'violence' and 'rape' were never used in either questionnaire. Questions on violence instead described the specific acts, using objective terminology.

In both questionnaires, short introductory statements were provided at the start of each section and especially before the most sensitive questions. These statements reminded respondents of both the confidentiality of their responses and of the value of their information to help improve the lives of men and women in their country. Many of these statements also reminded respondents of their right to stop the interview, take a break or skip a question at any time.

Questionnaire Administration

The final section of the man's questionnaire, dealing primarily with men's use of sexual violence, was self-administered by men using small, handheld computers (PDAs). This meant that their responses were completely anonymous. Even the interviewers had no way of knowing men's responses in section 8 of the questionnaire. In this section, the PDAs were complemented by an audio track to ensure that all men were able to complete the section, regardless of their literacy level.

To ensure confidentiality, all interviews were conducted in a private space of the respondents' choosing, where others were not able to overhear their responses. For ethical and safety reasons, only one person was interviewed per household, and men and women were interviewed in different clusters.

<u>Interviewers</u>

For ethical reasons and to make respondents feel most comfortable, male interviewers interviewed men and female interviewers interviewed women. As far as possible, interviewers were also selected from the same ethnic or cultural background as respondents, although not from the same village or community.

Training of Interviewers and Supervisors

The selection and training of appropriate supervisors and interviewers was an essential component of ensuring the success of the study. The interviewers were selected on the basis of their ability to interact with all classes of people, be non-judgmental, their maturity, skill at building rapport and experience in dealing with sensitive issues.

Given the complexity of the questionnaire and the sensitivity of the research topic and based on the World Health Organization ethical guidelines for research on violence against women, all fieldworkers were required to attend two to three weeks of training, including a pilot test. To maintain consistency in methodology and to ensure the same ethical standards across the study sites, the training was standardized in all countries, following the UN Multi-Country Study on Men and Violence Interviewer Training Manual and Supervisor Training Manual, designed by P4P. In each country, training was conducted jointly by the research institute implementing the study and P4P, often with contribution from local NGOs.

Training focused on: sensitization around gender issues, violence and masculinities, interview techniques, practice using the questionnaire, PDA-use, ethical and safety issues and field procedures. Supervisors received additional training on sampling techniques (including the selection and enumeration of clusters, the selection of households and respondents), safety of respondents and interviewers, reducing non-response, quality-control procedures and fieldwork monitoring.

A pilot study lasting usually two days was conducted towards the end of the training in sites that were demographically and culturally similar to the main study sites. The pilot was an opportunity for both interviewers and supervisors to put into practice all that they had learned during the training and field-test the PDAs. A thorough debrief session directly followed the pilot in each country to illuminate and resolve any outstanding problems before data collection began. In cases in which certain to field procedures or concepts remained problematic after the pilot, additional training was conducted.

DATA COLLECTION PARTNER

In 2008, four United Nations agencies-UNDP, UNFPA, UN Women and UN Volunteers—came together through the regional joint program Partners for Prevention (P4P) to coordinate and strengthen efforts to prevent gender-based violence across Asia and the Pacific. Today, P4P is comprised of a team based in Bangkok, regional UN advisors in Bangkok and Bonn, and UN partners based in country offices around the region, including UN Volunteers. Our joint program brings together the combined strengths of UNDP, UNFPA, UN Women and UNV - and a wide array of partners - in a concerted effort to promote evidence- and theory-based approaches to prevention, including those that work with boys and men, alongside girls and women, to transform gender inequitable attitudes, practices and social norms.

This study was a collaborative project involving partners from academia, research institutes, civil society, the United Nations family and governments around the globe. It was developed and coordinated by P4P in collaboration with the MRC of South Africa, and study teams in each country who conducted the surveys.

DATA COLLECTION PARTNER

The national study teams comprised experts from a research institution or government agency with experience in population surveys, and a United Nations or civil society agency that provided funding and coordination. A technical advisory group of renowned experts on genderbased violence and masculinities, including the World Health Organization, advised on the methodology. A research steering committee, with representatives from each study site, made technical decisions on data analysis and ethical standards. To support the implementation and dissemination of the study, countries established national working groups consisting of government, civil society and United Nations representatives and researchers.

The United Nations Development Programme is the United Nations' global development network. Headquartered in New York City, UNDP advocates for change and connects countries to knowledge, experience and resources to help people build a better life for themselves. UNDP works to eradicate poverty and reduce inequalities through the sustainable development of nations, in more than 170 countries and territories.



DATA COLLECTION PARTNER

The United Nations Population Fund is the United Nations sexual and reproductive health agency. Their mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.

UN Women is the United Nations entity dedicated to gender equality and the empowerment of women. A global champion for women and girls, UN Women was established to accelerate progress on meeting their needs worldwide. UN Women supports UN Member States as they set global standards for achieving gender equality and works with governments and civil society to design laws, policies, programmes and services needed to ensure that the standards are effectively implemented and truly benefit women and girls worldwide. It works globally to make the vision of the Sustainable Development Goals a reality for women and girls and stands behind women's equal participation in all aspects of life.



DATA COLLECTION PARTNER

The United Nations Volunteers (UNV) programme contributes to peace and development through volunteerism worldwide. They work with partners to integrate qualified, highly motivated and well supported UN Volunteers into development programming and promote the value and global recognition of volunteerism. UNV is administered by the United Nations Development Programme (UNDP) and reports to the UNDP/UNFPA/UNOPS Executive Board.

TO ETHICAL APPROVAL

This study conducted in Cambodia met all ethical approvals by the National Ethics Committee for Health Research, Ministry of Health.

Ethical and safety guidelines for the research conducted with men on violence against women were developed for this study (Jewkes, Dartnall and Sikweyiya, 2012), drawing upon prior field experiences and the WHO guidelines for research with women (WHO, 2001). Ethics permission for the whole study was obtained from the Medical Research Council of South Africa Ethics Committee and from local institutions or national ethics boards in each country.

As part of the study, an internal ethics committee was established to advise on and respond to any serious ethical and safety issues or major adverse events that occurred.

TO ETHICAL APPROVAL

The ethical considerations are outlined here; the study followed these overall guidelines:

- The safety of respondents and the research team is paramount and guides all project decisions.
- Ensure that all methods used build upon current research experience on how to minimize the underreporting of violence and abuse.
- Establish mechanisms that will ensure the confidentiality of men's and women's responses.
- Carefully select all research team members and provide specialized training and support.
- Minimize any possible distress caused to the participants by the research.
- Train the fieldworkers to refer men and women requesting or needing assistance to available local services and sources of support.
- Where few resources exist, the study should create short-term support mechanisms.

TO ETHICAL APPROVAL

- Arrange for the most sensitive questions on sexual violence perpetration and other criminal activities to be self-administered using the audio-enhanced function of the PDAs, thus avoiding any potential ethical dilemmas for the interviewers about obligations to report criminal behaviour to the police.
- Destroy all documents with identifying details of respondents after use.
- Conduct interviews in a private setting.
- Only children younger than 2 years are permitted to be present.

All participants provided informed consent.
Participation in the study was voluntary and respondents were not paid.

NOTES ON STUDY

The United Nations Multi-Country Study on Men and Violence in Asia and the Pacific represents four years of intensive study and provides the largest multi-country data set on men's perpetration of violence against women. The overall objective of the study was to build a better understanding of men's life experiences and their use of violence against women to encourage more evidence-based interventions to prevent such violence. Although the regional and national analysis conducted to date contributes to this overall objective, further use of the data set will expand the knowledge base and contribute towards ending the violence against women.

NOTES ON STUDY

The data set reflected in this report represents the largest and most comprehensive multi-country research from the general population on men's use of gender-based violence in the Asia–Pacific region. This study has advanced the body of evidence on the prevalence, patterns and factors associated with men's perpetration of violence against women, which complements the comprehensive body of existing data from women. A great strength of this study was the use of self-completion for data collection on sensitive issues, likely reducing underreporting.

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