DOMESTIC VIOLENCE AND REPRODUCTIVE HEALTH  
(Qualitative Study in Banda Aceh City 2019)

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ABSTRACT

Background: Violence against women is one form of violation of human rights and is an issue in public health. Forms of violence most experienced by women is violence in the household with estimates that 30% of women worldwide had ever experienced violence both physical and sexual by their partner. Domestic violence can have an impact not only on the physical and psychological victims, but also against sexual and reproductive health of the victims.

Materials and Methods: This is a qualitative research with case study approach. Data collection techniques done with the in-depth interviews. Informants in this study were 4 female victims of domestic violence who report to the Integrated Service Center for Empowerment of Women and Children of the City of Banda Aceh (P2TP2A).

Result: The results showed that violence had a negative impact on reproductive health, namely the occurrence of unwanted pregnancies, transmission of sexually transmitted diseases as well as a waiver of the right to reproductive and sexual.

Conclusion: Domestic violence in natural informants have an impact on reproductive Health which includes the occurrence of unwanted pregnancy and unsafe abortion as well as the risk of transmission of STDS as well as ignoring the rights of reproduction and sexual.

Keywords: Domestic Violence, Violence Against Wives, Reproductive Health
1.0 Introduction

According to the Indonesian Law on the elimination of domestic violence (PKDRT) No. 23 2014 Domestic violence is any act against someone, especially women misery or suffering physical, sexual, psychological and neglect of household including threat to commit acts, coercion or deprivation unlawful independence in the scope of the household, in general there are four types of violence experienced by women in the household, namely physical, psychological, sexual abuse and neglect.

Based on the annual fact sheet (CATAHU) of the National Commission for Women, the number of violence against women in Indonesia increases every year. In 2017 the number of violence against women was 348,466 cases and in 2018 it increased by 406,178 cases. Violence in the personal sphere in this case violence against wives is the highest case. Cases of violence in the household itself is an iceberg phenomenon where only cases that appear on the surface, but more cases are not exposed. The data obtained in Banda Aceh P2TP2A shows that there has been an increase in reporting cases of domestic violence every year, in 2016 there were 31 cases handled, in 2017 there were 56 cases and in 2018 increased to 67 cases (P2TP2A, 2018).

All forms of violence that occur in a woman's life both past and present can have profound implications for aspects of reproductive health. Abuse and violence against women can have short-term and long-term effects physically, mentally and have consequences for reproductive health. Violence committed by a partner can also be a restraint on women's freedom in determining their reproductive rights such as women's access to contraception, refusal to use condoms by a partner, coercion of sexual relations that can lead to unwanted pregnancies and several studies suggest that women who experience partner violence, high parity (Sousa, Burgess, Fanslow, 2014).

In Indonesian Law (Undang-Undang) No. 36/2009 it is also stated that every person in relation to reproductive health has the right to: Live a healthy and safe reproductive life and sexual life free from coercion and / or violence with a legal partner; Determine life its reproduction and free from discrimination, coercion and violence that respect noble values that do not demean human dignity in accordance with religious norms; Determine when and how often to reproduce medically healthy and not contrary to religious norms; Obtain education, information and counseling about reproductive health that is correct and can be accounted for.

Globally, domestic violence, especially violence committed by partners, consider as the largest proportion of the problem of violence against women. Abuse and violence against women can have short-term and long-term physical, mental and physical consequences for reproductive health. Violence committed by a partner can also be a restraint on women's freedom in determining their reproductive rights such as women's access to contraception, refusal to use condoms by a partner, coercion of sexual relations that can lead to unwanted pregnancies and several studies suggest that women who experience partner violence, high parity (Sousa, Burgess, Fanslow, 2014).

The relationship between violence against partners with reproductive health consequences has been reported by many countries, both developed and low-income countries, that violence against partners can interfere with reproductive health in various ways, including curbing
women's freedom in negotiating the use of contraception and for getting good prenatal care. Women who are victims of violence also have the possibility to experience unwanted pregnancy, abortion and gynecological disorders such as menstrual disorders, sexually transmitted infections and even sexual dysfunction (Zakar, R, Zakar, MZ., Mikolajczyk, R., Kramer, A, 2011).

2.0 Materials and Methods

This research is a qualitative research using a case study approach. Informants in this study were women victims of domestic violence who reported to the Banda Aceh City Women's and Children's Empowerment Integrated Service Center. This study uses data collection methods with in-depth interviews (indepth interview) of victims of domestic violence. The process of collecting data is done by researchers with the help of data collection tools in the form of interview guidelines that have been prepared by researchers before going to the field, a voice recording device using a voice recorder to record the conversations during interview, and the field notes of the researcher. The technique of determining informants in this study was carried out using the Purposive Sampling technique, which is the method of selecting sampling based on specific objectives or considerations which selected the research informant by first determining the criteria that would be the informants in the study (Yusuf, 2016).

Data management is done by analyzing the answers given by the informants. Analyzing the data is done by on going analysis technique that is the analysis that occurs in the field based on the data obtained. In accordance with the characteristics of qualitative research with the case study design, the data analysis is carried out throughout the research process. The process of data analysis using the Miles and Huberman model is carried out in 3 stages, namely data reduction, data presentation and conclusion drawing where all three data analyzes are carried out simultaneously during and after the study (Yusuf, 2016). The data analysis process can be seen in the following scheme:

![Data Analysis Scheme](image)

**Picture 1. Data Analysis Technique**

The validity of the data in this study is guaranteed by triangulation which includes: cross-checking data with facts from different sources, collecting data with several methods, in this study conducted with in-depth interviews and observations then conducting joint discussions and analysis with experts in research qualitative.
3.0 Result

3.1 Overview of Research Locations

Based on its geographical location, the city of Banda Aceh is located at the northern tip of the island of Sumatra as well as being the westernmost region of the island of Sumatra, astronomically the city of Banda Aceh is located between 05°16’15” - 05°36’15” north latitude and 95°16’15” - 95°22’15” east longitude and in the northern hemisphere. Based on its geographical position, Banda Aceh City has the following boundaries, The North side is adjacent to the Malacca Strait, South is adjacent to Aceh Besar Regency, West is adjacent to the Indian Ocean, and East is adjacent to Aceh Besar Regency.

Banda Aceh is the capital of the province of Aceh with a population of 256,000 spread across 9 districts. As an area with a diverse population composition, of course it is accompanied by a variety of social and health issues that are not simple. Violence against women is one of the social problems that has an impact on health.

3.2 Domestic Violence and Reproductive Health

The United Nations declaration in 1993 stated that violence against women constitutes every act based on gender differences which results in or may result in physical or sexual misery or suffering of women, including the threat of certain actions, coercion or threats of independence arbitrarily both that occur in public or in private life. In Indonesia, Domestic Violence According to the PKDRT Law No. 23 of 2014 is interpreted as "every act committed against a person, especially a woman, which results in physical, sexual, psychological and neglect of the household, including threats to commit an act, Violence against independence law within the scope of the household ". WHO (2012) describes Intimate Partner refers to every action or behavior in a coercive or seizure relationship that poses a physical, psychological, or sexual threat to a partner.

According to Setyaningrum and Aziz (2014), in general there are four forms of violence including physical violence, sexual violence, psychological violence and economic violence or neglect. Physical violence is an act that results in pain, illness or serious injury. Like, punch, slap, grab, kick or even spit. Some physical violence is also often done by using sharp objects, and flushing with hot water or certain chemical liquids. Physical violence can make victims suffer injuries and bruises, but does not rule out physical violence in causing disability and even death. Psychic violence is an act that results in loss of self-confidence, fear, and loss of the ability to act, a sense of hopelessness and cause severe psychological suffering to a person. According to WHO (2005) sexual violence can be identified by three behaviors, namely being physically forced to have sexual relations against desire, having sexual relations based on fear of actions that might be taken by the couple if they refuse, and being forced to commit shameful and uncomfortable sexual acts. Neglect of a household is the abandonment of a person who lives within the scope of his household which according to the law applies to him to provide life, care, and care for that person. This includes everyone who causes economic dependence either by limiting or prohibiting proper income inside or outside the home so that the victim is under the person’s control.
3.2.1 Unwanted Pregnant and Unsafe abortion

Domestic violence experienced by victims has an impact on reproductive health, one of which is the occurrence of unwanted pregnancy and unsafe abortion. In-depth interviews conducted with victims showed that victims experienced sexual violence, namely the occurrence of coercion in sexual relations, often victims felt helpless over partner treatment and coercion to engage in uncomfortable sexual activities. An unwanted pregnancy can be caused by a low bargaining position of women, where women can not voice their desires.

Conceptually, the term unwanted pregnancy can also be interpreted as Unintended Pregnancy. Unwanted pregnancies are pregnancies that occur either for reasons that are not appropriate (mistimed) or because they are unwanted. When a woman does not want a pregnancy that occurs for various reasons and does not want a pregnancy in the future, then the pregnancy can be categorized as an unwanted pregnancy (Unwanted). An unwanted pregnancy usually ends in an abortion. An unwanted pregnancy occurred in an informant in this study where she finally aborted her pregnancy in an unsafe way by taking abortion drugs and doing a massage to launch the abortion process because her husband did not approve of her pregnancy.

3.2.2 Transmission Sexual Transmitted Diseases

The violence experienced by the informants in this study had a negative impact, especially the informants who experienced sexual violence. Sexual violence intended in this study is the existence of coercion to have sexual relations against the wishes of the victim. In research on the transmission of sexually transmitted diseases caused by perpetrators in this case the husband of the victim has a multiple sexual partner so that it is transmitted to her partner. Sexually transmitted diseases experienced by victims can be identified through the results of interviews told by victims of symptoms they experience such as itching on the genitals, vaginal discharge that smells unpleasant and other discomforts.

Symptoms of sexually transmitted diseases were experienced by several informants in this study who claimed that her husband had more sexual partners and had sexual habits with other woman.

3.2.3 Neglect of women's reproductive rights

The neglect of reproductive and sexual rights is also one of the social impacts that has an effect on women's reproductive health. Non-fulfillment of reproductive and sexual rights causes victims not to have the freedom to live their lives either as social or personal beings who live in social groups where they have the right to live their lives as they wish. The definition of reproductive health implies that every married couple should be able to live a satisfying and safe sex life, have the ability to reproduce and have the freedom to determine the frequency, distance and number of children, in this case also the right to obtain appropriate health services for pregnancy care, childbirth and infant health.

Based on this definition, it can be explained that men and women have the same rights in carrying out and enjoying a safe and satisfying sexual life. Victims of sexual violence in the household tend to experience problems in sexual relations. Neglect of sexual needs was experienced by several informants in this study. Informants often feel neglected in matters of satisfaction in sexual relations, informants say every sexual intercourse is only because of the desire of the husband alone and with coercion so that sexual intercourse can never be enjoyed.
that there is only pain. Violence against women can result in the non-fulfillment of their reproductive rights. As experienced by the informant in this study she had to reduce her desire to have more children because her husband did not like it when she was pregnant.

4.0 Discussion

There are four forms of violence experienced by informants in this study, namely physical violence such as beatings, slaps, kicks and destruction of items carried out by husbands, psychological violence involving emotions such as insulting, saying harsh words, having another ideal woman (WIL), sexual violence experienced by informants includes forced sexual relations and shameful sexual acts such as sodomy and the last form of violence is economic and household neglect.

Forms of physical violence are often followed by sexual violence and psychological violence, according to a WHO multi-country study of domestic violence, it is stated that 23-56 percent of women who experience physical or sexual violence experience these two types of violence together, other studies in Latin America and the Caribbean show that the majority of women (61 - 93 percent) who report experiencing physical violence also experience emotional / psychological violence.

Sexual violence experienced by the informants in this study is in the form of coercion in sexual relations where the husband forces his desire to have sex with his wife without regard to the wishes or comfort of the wife. This condition causes various discomforts for the wife such as pain in the genitals and other body parts. Throughout the world of marriage is defined as a relationship where a husband has the right to sexual relations without restrictions on his wife and the power to coerce in fulfilling sexual desires so that this makes women vulnerable to unwanted pregnancies (Heise, 1999).

Women who experience violence by their partners are vulnerable to the transmission of sexually transmitted diseases through forced sexual relations. They do not have the power and rights to determine sexual relations and to negotiate the use of condoms. Gender inequality is one of the reasons why women are vulnerable to STD transmission. This can be seen from the low bargaining power to negotiate intimate relationships, tend not to be able to say 'no' to every desire of a sexual partner, as well as ignorance and unwillingness to request information from a partner about the sexual status of the sexual partner. Inequality increases sharply if women are very economically dependent on their partners. Unequal conditions like this open up the possibility of violence from those who have a higher bargaining power or consider themselves able to control others.

Feminist sociology studies explain that women housewives are vulnerable to being infected with the HIV / AIDS virus due to low bargaining power and negotiations in matters of sexual relations. This fact is consistent with the report of the UN AIDS Agency or UNAIDS, which mentions more than 1.7 million women in ASIA are living with HIV positive, and 90 percent are infected from their husbands or sexual partners (Dalimoenthe, 2011). The results of McCloskey, Boonzaier, Steinbrenner, Sheila & Hunter research (2016) in Africa shows that infidelity and multiple sexual partners committed by men are related to the incidence of violence against partners and play a role in the AIDS epidemic in Africa.
Women are often unable to avoid physical violence perpetrated by their husbands, this is because physically men are stronger than women. Physical violence is often preceded by debates and tensions in husband and wife communication which then lead to beatings and other abusive acts. Physical violence by the husband is usually a way to show his dominance in the household. in a marriage every couple wants to be able to build a harmonious, loving and happy family, but the fact is that many families cannot make this happen, instead they feel depressed and sad because of the violence in their household. By nature individual differences and the socio-cultural environment have the potential to cause conflict. Conflicts if not resolved immediately are very likely to develop into domestic violence. Physical violence can manifest in mild to severe forms that can have fatal consequences for victims.

Violence committed by a partner can also be a restraint on women's freedom in determining their reproductive rights such as women's access to contraception, refusal to use condoms by a partner, coercion of sexual relations that can lead to unwanted pregnancies and several studies suggest that women who experience partner violence, high parity (Sousa, Burgess, Fanslow, 2014).

5.0 Conclusion and recommendation

Violence against wives in the household is a form of discrimination that often occurs in the household. The impact of violence on women will not always have a direct or short-term impact, but also a long-term impact. Violence against women can have an impact on the disruption of health such as suffering from certain chronic diseases, disorders of reproductive function and other negative health behaviors that can affect the quality of life of women. Violence in the household is a form of violation of women's reproductive rights because it can cause women to not get their rights in making decisions regarding reproductive and sexual health.

Domestic violence is significantly associated with poor reproductive health and health. Violence can have short-term and long-term adverse effects on reproductive health problems and health in general. Reproductive health is a very important component for a woman's health. Women have a high complexity of reproductive health where it is related to the function, process and reproductive system when compared with men so it requires serious attention.

Domestic violence, especially against wives, requires the attention of all parties so that all impacts that may be caused can be overcome properly. Need to increase awareness of women victims of domestic violence so that they are more concerned about their reproductive health. It is expected that all parties, in this case the people directly involved in dealing with the problem of domestic violence, will be able to pay more attention not only to the psychological effects they experience but also the impact on their reproductive health. Need to increase knowledge and empower victims, through self-development programs to improve the quality of life of victims of domestic violence. besides that a comprehensive strategy is needed in an effort to empower women both through increasing knowledge and abilities so as to increase independence.
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Declaration

The author states that this article is our original work and has never been published before.

Authors contribution

Author 1: Research concepts and designs, preparing research proposals, collecting data, analyzing data and writing scripts
Author 2: Research concepts and designs, supervise the research process, actively involved in data analysis and review the manuscript and final editing.
Author 3: Research concepts and designs, supervise the research process, actively involved in data analysis and review the manuscript and final editing.
Author 4: Supervise research, review manuscripts.
Author 5: Supervise research, review manuscripts.

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