



Male Perceptions of Gender Based Violence

Luang Namtha, Phongsaly, Oudomxay, and Savannakhet provinces,
Lao PDR

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The views in this paper are those of the authors alone and do not necessarily represent those of the CARE or its programs, or Governments or any other partners with whom CARE works.

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Table of contents

Executive Summary	4
Introduction	10
Methodology	12
Gender-Based Violence in Lao PDR	18
Findings and analysis	22
Prevalence of GBV	22
Level of Awareness of GBV	22
Patriarchal norms and other factors related to men’s awareness and perpetration of GBV in Lao PDR	26
Driver #1: Condoning violence against women	29
Driver #2: Men have power and control over women in public and private life	34
Driver #3: Rigid gender stereotypes and dominant forms of masculinity	38
Driver #4: Male peer relations that promote aggression, dominance, and disrespect towards women	43
Legal Literacy on GBV	47
Responding to and Preventing GBV	49
Conclusions	54
Recommendations	56
References	60

Abbreviations

CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
COVID-19	Novel Coronavirus 2019
CSO	Civil Society Organisation
FGD	Focus Group Discussion
GBV	Gender-Based Violence
GDA	Gender Development Association
GoL	Government of Laos
HJA	Huam Jai Asasamak Association
IDI	In-depth Interview
KII	Key Informant Interview
KOICA	Korea International Cooperation Agency
Lao PDR	Lao People's Democratic Republic
LGBTIQ+	Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Plus
LNT	Luang Namtha
LWU	Lao Women's Union
LYU	Lao Youth Union
NPAVAW	National Plan of Action on the Prevention and Elimination of Violence Against Women
NGO	Non-Governmental Organisation
ODX	Oudomxay
PSL	Phongsaly
SNAP	Social Norms Analysis Plot
SVK	Savannakhet
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
WHO	World Health Organization

Executive Summary

Gender-based violence (GBV) is rooted in unjust and unequal power relations, structures and rigid social and cultural norms that lead to the acceptance of violence. Existing evidence examining GBV in Lao PDR suggests that high levels of acceptance of GBV in certain circumstances, and particularly in intimate partner relationships, is a symptom of discriminatory beliefs and patriarchal social norms which perpetuate traditional gender roles and the subordination of women.

This study, commissioned by the United Nations Development Programme (UNDP) under the Khan Hom Project supported by the Korea International Cooperation Agency (KOICA), aimed to contribute to the existing evidence by exploring in further detail the perceptions and beliefs of men in relation to GBV. Drawing on key informant interviews, a men's and women's survey, and focus group discussions (with a total of 864 study participants), it examined the gendered norms within the household and the community which contribute to acceptance of violence against women in Vientiane, Phongsaly, Oudomxay, and Savannakhet provinces.

The results of this study indicate the importance of understanding male attitudes and perceptions in relation to GBV and how these patriarchal norms contribute to acceptance of violence against women. These insights can inform interventions to engage men and boys in the prevention of GBV and efforts to shift patriarchal norms across all levels of Lao society.

Key findings

Prevalence of GBV

This study did not set out to measure the prevalence of GBV. However, data which was collected revealed prevalence rates which roughly correspond to other, more thorough, studies of GBV in Laos:

- 16% of female participants had experienced some form of GBV (bullying, beating), with 8% of women experiencing this a few times and 3% of women experiencing this many times.
- 11% of female participants reported that they had experienced verbal violence (being insulted by their partner in front of others).
- 40% of women with disabilities who participated in this study had experienced GBV.

Awareness of GBV in the community

This study sought to understand men's awareness of GBV in the community, including the different forms violence can take and the consequences of this violence, to gain insight into the deterrents that could prevent violence from occurring in the first place.

- Findings suggest that both men and women understand abstract ideas of gender equality with 95% of men and 90% of women responding that they believed that men and women should be treated the same way.
- There was also evidence that community members have been exposed to information about GBV. Over half of the men responding to the survey indicated they had heard information about violence against women on the television or radio and had also joined activities relating to violence against women in their community or workplace.
- Responses also demonstrated some understanding of the causes and consequences for women of GBV, including emotional, physical, and economic consequences.
- However, only some forms of GBV were readily identified as violence. For example, there was some indication that emotional violence is seen as less severe than other forms of violence. In a hypothetical scenario that was presented, 41% of participants expected the husband would respond with emotional violence if his wife returned home late.

Patriarchal norms and other factors related to men's awareness and perpetration of GBV in Lao PDR

A central focus of this research study was to examine the patriarchal norms and other factors which are related to men's awareness and perpetration of GBV in Lao PDR in order to better understand and identify key areas for advocacy and programming work. The results of the study demonstrate the existence of patriarchal norms which support four drivers of violence against women:

Driver 1. Condoning violence

- A large proportion of both men and women believe that in certain circumstances gender-based violence, and particularly intimate partner violence, is acceptable:
 - More than half of the male survey respondents agreed that if a wife makes a mistake, her husband has a right to punish her.
 - Almost two-thirds of men surveyed agreed (60%) or strongly agreed (5%) that a woman should endure violence to keep her family together. Almost half of female respondents also agreed or strongly agreed with this statement.
 - 45% of focus group participants expected the husband would respond with violence in the hypothetical scenario when his wife returned home late without preparing dinner or informing him, because the woman had failed to conform to her gendered role.
 - Responses also suggested that violence may be dismissed or downplayed for women who breach socially accepted roles or identities, such as women who work at entertainment venues such as karaoke bars and massage parlours.
- The survey also revealed the belief that forced sex between husband and wife is viewed as acceptable behaviour.
 - 55% of men surveyed agreed that a woman cannot refuse to have sex with her husband.
 - More than half of the women agreed (46% agree and 6% strongly agree) that if women do not physically fight back, it would not be rape. 52.5% of men also agreed or strongly agreed with this statement.
 - 68% of women also agreed or strongly agreed that their partner expects that she will accept when he wants to have sex.
- It was also a commonly held belief that violence is a private matter which should remain within the household.
 - Almost half of the women surveyed either agreed (39%) or strongly agreed (10%) that what happens within the household should remain private.
 - Men were even more likely to agree with this (50% agree and 20% strongly agree).
 - 72% of focus group participants agreed that the man's behaviour in the scenario (scolding his wife for arriving home late) would be different in public.
- This community expectation that violence is a 'private matter' can lead to violence being condoned or even reinforced because it is viewed as something which should be resolved within the family unit. The use of village mediation units for domestic and sexual violence cases in Lao PDR was noted with concern by the CEDAW Committee.
 - Significantly, 100% of survey participants who identified as being members of a Village Health Committee and more than a third who identified as being members of a Village Mediation Unit agreed that a woman should endure violence to keep her family together.

Driver 2. Men have power and control over women in public and private life

- The survey explored controlling behaviour within intimate partner relationships. This revealed a perception that women should obey their husbands:

- 75% of male respondents agreed and 5% strongly agreed that a woman should obey her husband. Over half of the women surveyed also agreed with this statement.
- 35% of men indicated that they were the type of person who decided who their partner could spend time with and over half stated that they like to know where their partner is all the time (47.5% agree and 5% strongly agree).
- This attitude was also evident in the focus group discussions, with participants agreeing that the wife should be scolded because she did not inform her husband of her whereabouts and that she would be late arriving home.
- The survey also examined decision making power within the household:
 - 39% of women agreed or strongly agreed that a man should make the final decision for all decisions relating to the family. Men were even more likely to support this statement (55% agree and 20% strongly agree).
 - Despite this finding, when participants were asked who made decisions in relation to certain aspects of family life, most decisions were described as being made jointly.
 - This also included decisions in relation to women's health, highlighting many women may not have control over their own reproductive health and rights. Only 15% of women responded that they made the final decision in relation to their own health.
 - This perception of joint decisions in the household may not be translating into joint decision-making power. Almost half of the women surveyed believed that their husband/partner had more rights than they did to share ideas regarding decision making, which impacted their family. Significantly, 60% of men also agreed or strongly agreed with this statement.

Driver 3. Rigid gender stereotypes and dominant forms of masculinity

- The survey explored gender roles within the household such as how the division of domestic duties were managed:
 - There was a consensus that men and women should share household tasks. 81% of women and 97.5% of men agree or strongly agree that a man should share household chores.
 - In practice, evidence suggested that women still undertake a disproportionate share of domestic chores, except for childcare which appeared to be shared more equally.
 - More than a third of men indicated their wife normally did the cooking (37.5%), the cleaning (32.5%), and the washing (45%).
 - A significant proportion of female survey participants indicated they did all or most cooking (36%), cleaning (53%) and washing (55%).
 - Childcare seemed to be more equitably shared between husband and wife, with 52% of women and 75% of men indicating this task was shared equally.
 - Notwithstanding the actual division of household tasks, there is a perception that domestic duties are a woman's role. 51% of women agree and 23% totally agree that a woman's most important role is taking care of the household and preparing food for her family. Over two-thirds of men agreed with this statement.
- Socially dominant forms of masculinity of privilege, control, dominance, and subordination of women, such as men being the head of the household, were also evident in the findings:
 - 65% of men agreed with the statement, "to be a man you need to be a strict person".
 - More than half of male survey respondents (57.5%) agreed that they would be embarrassed if their son had a same-sex relationship. This discriminatory attitude is reflective of ideas around gender roles and forms of masculinity within the community. Women survey respondents were less likely to agree with this statement (33% agree and 3% totally agree).
- Men who are reflective of dominant forms of masculinity will often be promoted and provided with responsibility within the community:

- 80% of those who identified as a village chief agreed with the statement that men should make the final decision in the household. All of those who identified as being a member of a Village Education Committee also agreed or strongly agreed with this statement, together with 59% of those who were members of a Village Mediation Unit.
- Worryingly, all survey participants who identified as being members of the Village Health Committee, 60% of those who were village chiefs, and 41% of those who identified as being a members of a Village Mediation Committee agreed that if a woman does not fight back physically, it is not rape.

Driver 4. Male peer relations promote aggression, dominance, and disrespect towards women

- The dynamics of peer relationships were not explored in depth in this study, but the focus group discussions suggested peer and community expectations do shape behaviour.
- Responses also indicated that emotional violence is less likely to be viewed as a form of violence within peer groups.

Reinforcing Factors

- The study also explored other factors such as poverty, alcohol, drug-use and natural disasters and crises, which can contribute to or reinforce the wider context of gender inequality and, therefore, exacerbate GBV and its impacts:
 - Drugs and alcohol were seen as having a detrimental impact on positive relationships between intimate partners. Focus group participants were asked about the main cause of domestic arguments in their community. Excessive use of drugs (14%) and alcohol (19%) were identified by a large number of participants, as well as financial hardship (12%), laziness (5%) and cheating (8%) and jealousy (6%).
 - Interestingly, men surveyed who had experienced war and natural disasters were more likely to agree that women should endure violence to keep the family together and that if a woman does not fight physically, it will not be rape.

Legal literacy on GBV

- Despite the range of laws against GBV, this study found that almost half of all men did not have knowledge of these laws and 13% of men mistakenly believed that Laos did not have any laws related to violence against women.
- Just under half (40%) of men were aware that there were laws prohibiting GBV, which corresponds roughly to the number of men who reported having received teaching on these laws and policies (32%). However, two-thirds of respondents (67%) reported that they have never been taught the laws or policies related to GBV.
- 60% of women were aware of GBV-related laws, 29% were unsure, and 12% believed that there were no laws prohibiting GBV.
- In regard to understanding the punishment for sexual violence, most men (64%) were unaware of the consequences. However, for those that did understand the consequences, most men agreed or totally agreed that the consequences were too severe.
- Although only a small percentage (7%) of male community members in focus group discussions nominated laws and regulations as a way to prevent GBV, most (two-thirds) of community leaders interviewed suggested that better understanding and enforcement of laws would be one of the best measures to prevent GBV.

Responding to and preventing GBV

- More than 40% of male survey participants did not know of any method of support for women experiencing violence.

- In the women's survey, only 27% of participants said that they knew of a method of support. One-third did not know and a further 40% did not respond to this question.
- During the focus group discussions, male participants discussed who and what could stop violence among couples. Authorities and family members were identified as having an important role in preventing violence which underlines the need to ensure these village-level bodies are taking a survivor-centred and rights-based approach to GBV.
- Key informants suggested a number of strategies to respond to and prevent GBV and these proposals have informed the recommendations in this report.

Recommendations:

The findings of this research have informed the development of recommendations to engage men and boys in the prevention of GBV and to shift patriarchal social norms to achieve long term change. It is hoped these recommendations will contribute to programming, policy and advocacy efforts to prevent GBV across Laos PDR.

The final section of this report sets out a framework for shifting patriarchal social norms which could be integrated into programmes and policies, together with practical actions to be taken across government and by local and international development actors.

The focus of these recommendations are summarised below and the full recommendations are available in the Recommendations section at the end of this report.

Recommendations across Government:

Policy reform and coherence: recommendations are focused on ensuring new policies integrate a prevention approach and building the capacity at all levels of government and across sectors in relation to GBV and the drivers of violence including targeted strategies to support village leaders, village focal points and members of village committees to adopt a survivor-centred approach to responding to GBV (including reform of mediation practices).

Communicating for change: strategies for disseminating information about laws in relation to GBV at the community level, a national awareness campaign featuring positive male role models and the creation of a GBV prevention awareness network.

Addressing data gaps: focussed on strengthening collection, reporting and analysis of GBV data, including data on social norm change and intersectional data.

Government resourcing and prioritisation: supporting the allocation of adequate resources to implement priority actions, including quality holistic care for survivors, and support for women's rights organisations working to challenge discriminatory social norms.

Reform across different sectors: strategies to support coordination and reform across sectors (including educational institutions) and national coordination of a high-level steering committee of key ministries across sectors that respond to GBV.

Recommendations for international and local development actors:

Includes recommendations focussed on how the findings of this study, and applying a social norms lens, can inform advocacy, programmatic work, partnership approaches, data collection and support for government prevention actions and policy initiatives.

Introduction

“There is still a lot of social violence in the district, but everyone thinks it’s normal, especially violence within the family.” - Key informant interview¹

Gender-based violence (GBV) is rooted in unjust and unequal power relations, structures and rigid social and cultural norms that lead to the acceptance of violence. This means GBV is often normalised within relationships, communities and societies.

Various studies by CARE show that women in the community identify GBV as a significant issue in their community. In almost all of these cases, the perpetrators are men, and so a greater understanding of men’s understanding and attitudes on GBV is vital to developing policies and programming to prevent men from using violence in the future, supporting men to recognise and address the drivers of GBV, and enabling men to hold other men accountable.



A family engaging in the social analysis and action activity to understand more about gender.

Existing evidence examining GBV in Lao PDR suggests that high levels of acceptance of GBV in certain circumstances, and particularly in intimate partner relationships, is a symptom of discriminatory beliefs and patriarchal social norms which perpetuate traditional gender roles and the subordination of women.

This study examining male perceptions on GBV was commissioned by the United Nations Development Programme (UNDP) under the Khan Hom Project supported by the Korea International Cooperation Agency (KOICA) to contribute to the improvement of policies within Lao PDR and prevent GBV. This study aims to contribute to the existing evidence by exploring in further detail the perceptions and beliefs of men in relation to GBV. Drawing on key informant interviews, a men’s and women’s survey and focus group discussions, it seeks to understand the patriarchal norms and other factors which are related to men’s awareness and perpetration of GBV in Lao PDR.

The objectives of the study are to:

1. Identify social norms and other factors that underpin men’s perpetration of different forms of GBV in Lao PDR;
2. Understand men’s perceptions of GBV and its consequences;
3. Identify factors associated with men’s awareness and perpetration of GBV in Lao PDR (particularly social characteristics, legal awareness, health status and substance abuse, own experiences of violence, adversity, gender norms, attitudes, and practices); and,
4. Promote evidence-based policies and programmes to prevent GBV in Lao PDR through targeted recommendations.

¹ Key Informant Interview, KII-ODX-20-C1-07, District Health Officer.

The findings of this research have informed the development of recommendations to engage men and boys in the prevention of GBV and to shift patriarchal social norms to achieve long term change. It is hoped these recommendations will contribute to programming, policy and advocacy efforts to prevent GBV across Laos PDR.

In this study, when we refer to 'woman/women' or 'man/men' it refers to female or male identifying people; this includes transgender people, cisgender people, and others who identify themselves within the spectrum of the gender identity of woman or man.

Methodology

Key Research Questions

For this study, the Key Research Questions were:

1. What are the patriarchal norms and other factors that are related to men's awareness and perpetration of GBV in Lao PDR? (Particularly social characteristics, vulnerabilities, health status, own experiences of violence, adversity, gender norms, attitudes, and practices)
2. What is the level of awareness by men in Lao PDR of GBV?
3. What is the level of legal literacy by men in Lao PDR in relation to GBV? Are they knowledgeable on legal consequences for GBV? If yes, do they support the existing legislation on GBV?
4. What will be key strategic and practical recommendations for prevention priorities in Lao PDR?

Mixed Methods Approach

This study employed a mixed method approach incorporating a quantitative survey and qualitative tools drawing on [CARE's Social Norms Analysis Plot](#) (SNAP Framework). Below is a summary of the methods employed.

The SNAP Framework

The SNAP framework guided the design of qualitative vignettes that were used in focus group discussions (FGDs) and in-depth interviews (IDIs) to draw out views on patriarchal norms and other factors that related to men's awareness and perpetration of GBV in Lao PDR. The use of imaginary characters in vignettes – which reflect participants' own experiences – enables participants to more freely discuss topics which may be sensitive, such as GBV. This enables researchers to not only explore personal opinions but to also uncover social norms.

Quantitative Survey

A quantitative survey was conducted using the Kobo toolbox through smartphones and tablets. There was a survey for men and a separate survey for women. The survey was administered in Lao language with support in the areas of Akha, Khmu and Hmong from local interpreters who spoke the relevant local language. The survey focussed on collecting data in relation to social characteristics, health status, personal experiences of violence, level of GBV awareness, and legal literacy on GBV laws and policies for men and women.

Key informant interviews

Semi-structured key informant interviews with community leaders and sub-national and national authorities were used to explore attitudes, behaviours and other factors experienced by men which may be associated with or contributing to GBV. These key informant interviews were held with Lao Women's Union (LWU), Lao Youth Union (LYU), village mediation units, police, justice office, NGOs, CSOs, CSO Gender Network, and GBV taskforce members. Strategic and practical recommendations for prevention priorities in Lao PDR were explored with these key informants as well as with community members in FGDs.

Data Collection

The data collection took place from 20th April to 17th June 2022 in selected research sites in nine districts in four provinces, namely Luang Namtha province (three districts - Namtha, Sing and Long), Phongsaly province (three districts – Mai, Samphan, Boon Nue), Oudomxay province (one district - Houn), and Savannakhet (two districts – Kaysone Phomvihane, and Thapangthong). Three villages were selected from each district (except Oudomxay where five villages were selected).

The research sites were selected on the basis of previous studies (UN prevalence study, Lao Social Indicator Surveys (LSIS) 2013, and 2017), combined with CARE's and programme partners' contextual knowledge. Geographical characteristics and the diversity of ethnic backgrounds represented by the research sites were also considered.

The research team was composed of CARE staff, representatives from partner organisations, Gender Development Association (GDA) and Huam Jai Asasamak Association (HJA), and Government of Laos (GoL) counterparts working on gender and GBV. The team was 70% male (46 men and 19 women), with male facilitators used for the FGDs and male enumerators for the survey and key informant interviews with men's groups. Female facilitators were assigned to female FGDs and Key Informant Interviews (KII).

Purposive sampling was employed to ensure the research sample was reflective of disability inclusion, sexual orientation and gender expression, and an age range of 18 to 49 years. The research tools were also adapted as needed for each context.

In total, 864 individuals participated in this study, including 15 participants who identified as having a disability:

- Key informant interviews were held with 25 women, 13 men and 4 people who identified as LGBTIQ+.
- 81 focus group discussions were held with a total of 438 participants.
- Individual surveys were completed with 236 men and 146 women.

A full breakdown of research participants by demographics and research sites is included in the next section.

Ethical Considerations

The design and implementation of the study was developed to comply with the guidelines from the UN Multi-Country Study on Men and Violence (2013) and the WHO (2016) [Ethical and safety recommendations for intervention research on violence against women](#). The safety of respondents and the research team was paramount and informed all decisions throughout the study.

Data collection prioritised the highest ethical and safety considerations relating to individual consent, voluntary participation, confidentiality, physical safety of informant and researchers, and the principle of do no harm. Particular guidance was provided in relation to perpetrator disclosure and information on GBV resources and support was provided at all research sites. This included information relating to the LWU Hotline and specific provincial contact numbers.

Ethical review of data collection tools:

The ethics of the data collection tools were reviewed internally by experts within CARE Laos and CARE Australia.

Informed consent:

Verbal informed consent was sought from all participants. Written consent was avoided because participants felt exposed signing a consent form.

Confidentiality:

The research team ensured the confidentiality and anonymity of the respondents throughout the study.

Support for research teams:

The data collection teams in all research sites were trained using CARE's Community Dialogue Tool (CDT) to improve understanding of gender, GBV, and women's rights. This two-day training aimed not only to strengthen gender analysis and understanding of GBV for the purposes of this study, but also to inform future programmes

of work by partners and the GoL to prevent GBV. In addition, the research teams were trained on data collection methods and ethical and safety considerations.

Limitations of the study

The timeframe for data collection coincided with the start of the rainy season. This led to data collection in the research sites being postponed multiple times due to the condition of the roads, especially in Oudomxay and Phongsaly provinces. The data collection period also overlapped with the beginning of the agriculture season for produce such as corn, rice, bananas, rubber tree and sugar cane. This meant that men were working in the fields and farms, leading to a shortage of research participants in some villages. Additionally, in Savannakhet, the Thailand border restrictions were eased during the study period. As a result, many young men and women returned to work in Thailand. This led to the age of research participants in Savannakhet district being disproportionately older than in other provinces.

While this study sought to include representation from women and men of different ages, ethnic backgrounds, sexual orientation, and abilities, intersectional analysis has been limited by small sample sizes. For example, there were only four participants in the research who identified as LGBTIQ+ and five women who identified as having a disability. There are also limitations in relation to the analysis in this study in regard to ethnicity, given there were only small numbers in the sample size for some ethnic groups. For example, there were only 9 men and four women who participated from the Taidam community and 7 men and 3 women participants identifying as Lahou.

Demographics

Gender and Disability

For this study, participants were engaged through surveys, focus group discussions, and key informant interviews, as follows:

Survey Participants

	Province	Number of Villages	Participants	Persons with disabilities
Men	LNT	9	50	4
	PSL	9	92	0
	ODX	5	44	0
	SVK	6	50	6
	Total	29	236	10
Women	LNT	9	47	2
	PSL	9	46	0
	ODX	5	20	2
	SVK	6	33	1
	Total	29	146	5
Total Participants			382	15

A total of 382 participants engaged in the survey from across 29 villages. Of these, 15 people (around 4%) were persons with disabilities.

Focus Group Discussions

	Province	Number of Villages	Number of FDG groups	Participants	Persons with disabilities
Men	LNT	9	25	166	-
	PSL	9	26	120	-
	ODX	5	14	72	-
	SVK	6	16	80	-
	Total	29	81	438	-

The FGDs involved 81 people from 29 villages. No person with disabilities participated in the discussions.

Key Informant Interviews

Province	Women	Men	LGBTIQ+
LNT	2	4	1
PSL	9	1	0
ODX	1	5	2
SVK	7	1	1
VTE	6	2	0
Total	25	13	4

A total of 42 people participated in KIIs, of which most were women (59.5%) and around one third were men (31%). A small number identified as LGBTIQ+ (9.5%).

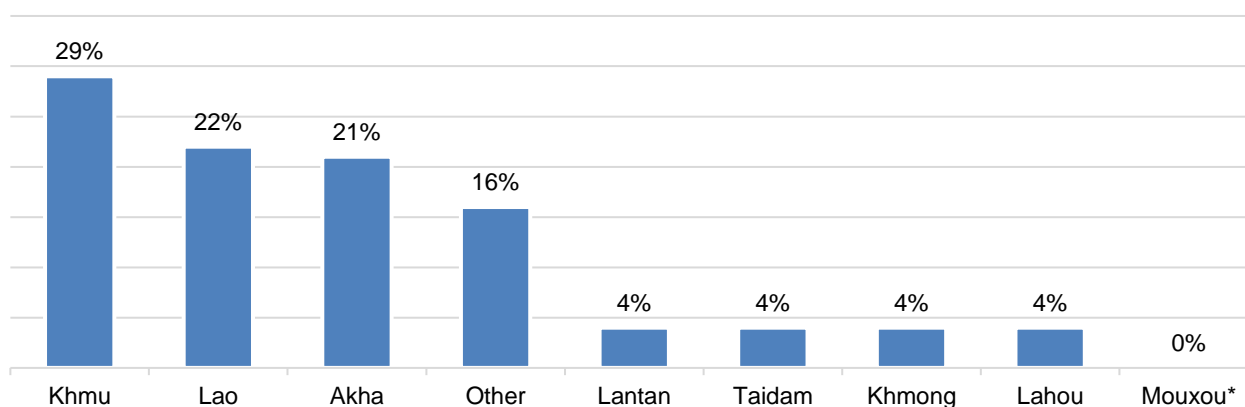
Overall, 862 individuals participated in this study (395 men; 171 women). This included 15 participants with disabilities (10 men; 5 women), and 4 participants who identified as LGBTIQ+.

Ethnicity

Of the 382 survey respondents, most participants identified with the following ethnicities in descending order: Khmu (mainly from Phongsaly and Odoumxyay); Lao Lum (mainly from Savannhaket); and Akha (mainly from Phongsaly and Odoumxyay). A smaller percentage of participants also identified as Lantan, Hmong and Lahou (mainly from Luangnamtha); and Taidam (mainly from Odoumxyay).

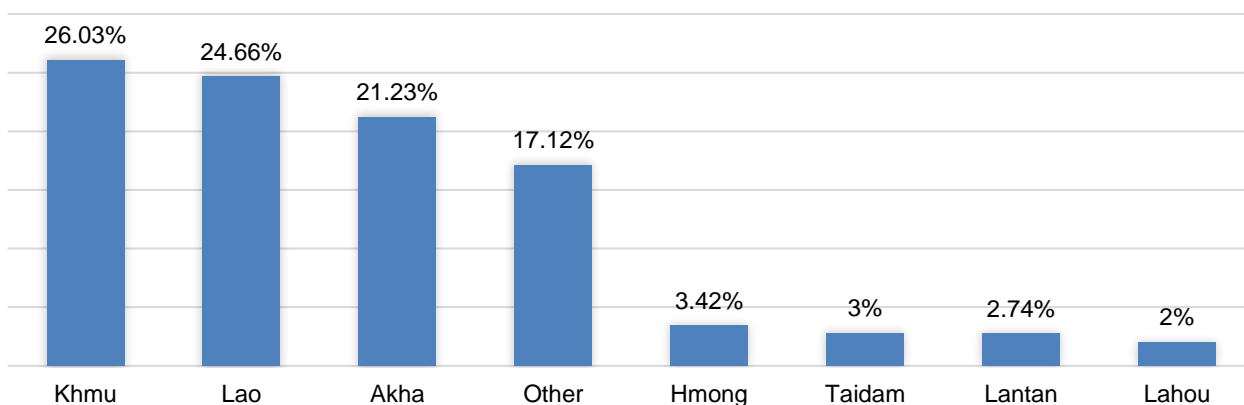
Participants with disabilities mainly identified as Lao Loum, Hmong, Lahou and as other ethnicities.

Graph 1: Ethnicity of male survey respondents

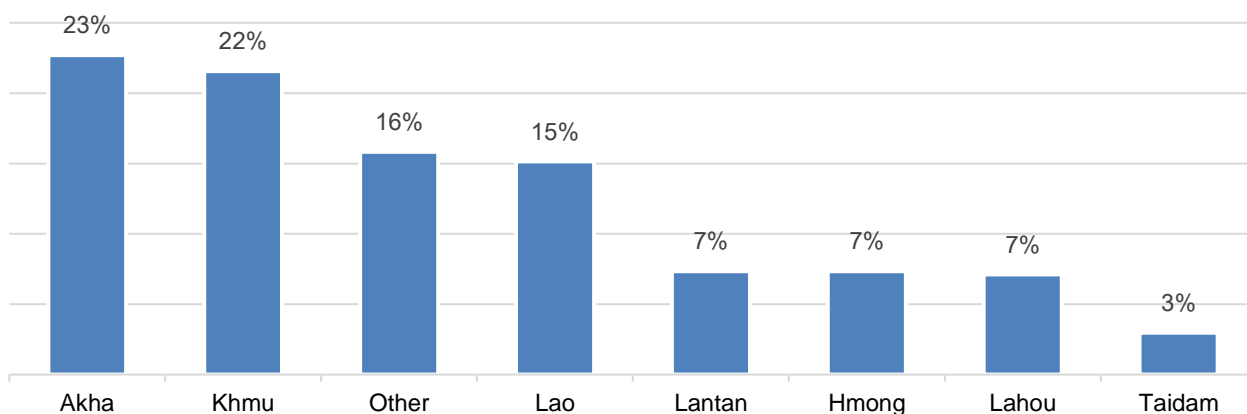


*Note: One respondent was from the Mouxou ethnic group, but due to formulaic constraints, this graph shows 0%.

Graph 2: Ethnicity of female survey respondents



Graph 3: Ethnicity of male focus group discussion participants



Social Attributes and Experiences

Education

Participants had a range of educational backgrounds. Around one-third of men (35%) and women (34%) had completed lower secondary education; another third of men (31%) and women (32%) had completed primary education; and just under one-third of men (31%) and women (27%) had never attended or not completed primary school. A small percent of both men and women (2-3%) had attended university, vocational or higher education. Female survey participants reported that 50% of their partners had a higher level of education than them; 34% had equal levels of education as their partners; and 16% had higher education levels than their partner. Male survey participants reported higher (35%) and equal (35%) levels of education as their partner, and 30% reported lower levels of education compared to their partner.



Her husband is happy to take care of the baby while she attends the women workload reduction

Income

In the past 12 months, 96% of male survey participants reported earning an income. The majority (82%) earned less than 50,000 Kip per day (US\$3.11). Most male survey participants worked in agriculture or fishing (83%), with a smaller percentage working as businessmen (9%), officer workers (1%) and drivers (1%). Half of male respondents (57%) engaged in seasonal work, whereas 39% of male respondents reported having work all year round. Some male respondents (17%) reported that they were currently unemployed and looking for work. Just under half of all male participants (44%) reported being the main income earner for their household, whereas a small percentage of female respondents (12%) reported being the main income earner. About half of all couples reported being equal income earners.

Relationship status

The majority of survey participants were married (93%), with a small percentage reporting themselves as single (3%) or in a relationship (living with partner (2%); not living partner (3%)). Women reported marrying mostly around the ages of 17 to 19 years old.

16% of female respondents were married under 15 years of age, with the lowest reported marrying age of 12 years. A small percent (4%) married between the ages of 30 to 34 years. For men, most respondents married between the ages of 19 and 25 years, with the lowest reported marrying age of 15 years, and the oldest age of 40 years.

The majority of married couples chose one another, with their parents' consent (89 - 93%), whereas a small percentage of couples chose to marry one another without their parents' consent (8% of women; 3% of men). A small percentage of men also had their wives chosen for them by their parents (3%).

Gender-Based Violence in Lao PDR

What is gender-based violence?

Gender-based violence (GBV) is any form of violence against an individual based on that person's biological sex, gender identity or expression, or perceived adherence to socially defined expectations of what it means to be a man or woman, boy or girl. It is a pervasive and systemic human rights violation which disproportionately affects women and girls.²

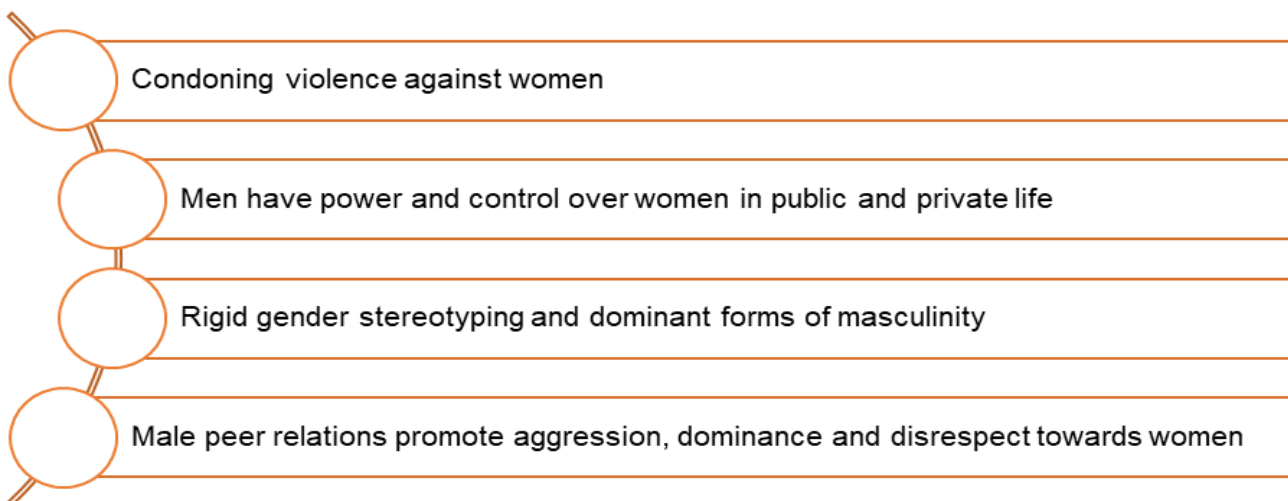
GBV includes physical, sexual and psychological abuse, threats, coercion, arbitrary deprivation of liberty, and economic deprivation, whether occurring in public or private spheres. Examples of GBV include, but are not limited to, intimate partner violence; early and forced marriage; "honor" killings; female genital cutting/mutilation; economic deprivation; female infanticide; child sexual abuse and exploitation; trafficking in persons; sexual coercion, harassment and abuse; neglect; violence against widows; violence against people identifying as LGBTIQ+; and elder abuse.³

What causes gender-based violence?

GBV is rooted in unjust and unequal power relations, structures, and rigid social and cultural norms that lead to the normalisation of violence. This means GBV is often accepted within relationships, communities and societies. This can prevent survivors of violence from accessing support and can mean perpetrators are not held to account for their actions. Violence may also be used to enforce gender roles and social norms. For example, women and LGBTIQ+ people who do not conform to traditional gender roles often face GBV.

In this way, gender inequality and other forms of oppression create the social context for GBV. Within this context, evidence indicates there are four factors which most consistently drive GBV:⁴

Figure 1: The drivers of violence against women



² Definition used in CARE. Gender-based violence guidance for development programs, adapted from the Interagency Gender Working Group definition of gender-based violence.

³ CARE. Gender-based violence guidance for development programs.

⁴ See Our Watch. [Change the story: A shared framework for the primary prevention of violence against women in Australia](#) (second edition). Our Watch, Melbourne, 2021.

These drivers are expressed differently at the individual level, within relationships, in communities and at the societal level, and these levels all interact and inter-relate.⁵

There are also factors which are known as ‘reinforcing factors.’ These interact with the drivers and wider context of gender inequality to exacerbate GBV and its impacts. Examples of reinforcing factors include experiences of and exposure to violence, backlash against prevention work, and factors that weaken pro-social behaviour, such as alcohol misuse and gambling.⁶ These reinforcing factors are discussed further in the Findings and Analysis section of this report.

Taking an intersectional approach to understanding GBV

Women will have different experiences of violence and the probability of experiencing violence (or particular forms of violence) is higher for some women, due to the intersection between gender inequality and other forms of structural inequality such as racism, ageism and ableism.

This study acknowledges that specific groups of women and girls face a higher risk of different forms of violence such as adolescent girls, older women, women and girls with disabilities, women belonging to ethnic and other minorities, trans women, women working in the sex and entertainment industry, women who are refugees, internally displaced or stateless, and women migrant workers. For example, women with disabilities are at least two to three times more likely than other women to experience violence, including by family, intimate partners, caregivers, and institutions.⁷

There is also considerable crossover between the drivers of violence against LGBTIQ+ people and the drivers of violence against women, particularly regarding rigid binary gender norms.

Research conducted in Laos in 2019 undertaken by the Community Health and Inclusion Association noted that violence and discrimination against the LGBTIQ+ community remains a critical issue due to binary gender norms and heterosexual norms in Laos. It was noted that transgender women are particularly vulnerable to poverty and discrimination. The research also found limited support services for LGBTIQ+ people in Laos including access to health services.⁸

Notably, there is no reported data on lesbian, gay, bisexual, and transgender-related GBV in Lao.⁹

What do we know about GBV in Lao PDR?

The most recent data for prevalence of GBV is the Lao PDR Violence Against Women Prevalence Study published in 2015.¹⁰ This study used the standardized World Health Organisation (WHO) methodology and is the country’s first national survey on violence against women. Key findings are in the box below.

⁵ This is referred to as the socio-ecological model - Heise, Lori. 1998. Violence Against Women: An Integrated, Ecological Framework, *Violence Against Women*. 4 (3): 262-290

⁶ Read more about reinforcing factors at page 48 of Our Watch. 2021. [Change the story: A shared framework for the primary prevention of violence against women in Australia](#) (second edition). Our Watch, Melbourne.

⁷ UN Women. Fact and Figures: Women and girls with disabilities.

⁸ APCOM Foundation. 2020. [The State of LGBTIQI People’s Economic Inclusion: Lao PDR](#)

⁹ World Bank. 2020. [Lao PDR Gender-based Violence Institutional Mapping Report](#). World Bank, page 13.

¹⁰ National Commission for the Advancement of Women, Lao PDR, 2015. Lao National Survey on Women’s Health and Life Experiences 2014 - A Study on Violence against Women.

Lao PDR Violence Against Women Prevalence Study 2014 – Key findings:

- 11.6% of ever-partnered women experienced physical violence in their lifetime, and 4% of them experienced it in the past 12 months.
- 7.2% of ever-partnered women experienced sexual violence in their lifetime, and 3.3% of them experienced it in the past 12 months.
- 26.2% of ever-partnered women experienced emotional violence in their lifetime, and 10.5% of them experienced it in the past 12 months.
- 34.8% of ever-partnered women experienced controlling behaviours by their partners in their lifetime.
- 6.8% of ever-partnered women experienced economic abuse in their lifetime.

In addition, there have been some smaller studies in relation to the prevalence of GBV in Lao PDR. For example, a survey conducted in 2018 with 350 men found that 40.6% had perpetrated economic violence against women.¹¹ In 2020, the World Bank conducted a GBV institutional mapping report which includes a situational analysis. This draws on the Lao PDR Violence Against Women Prevalence Study but also highlights the prevalence of other forms of violence such as early marriage, adolescent pregnancies, child sexual exploitation and trafficking.¹² Notably, there is no reported data on lesbian, gay, bisexual, and transgender related GBV.¹³

Emerging evidence also indicates an increase in GBV in Lao PDR during the COVID-19 pandemic, with measures put in place such as lockdowns and other movement restrictions, increasing the risk of domestic violence as well as making detection of GBV even more difficult.¹⁴

There have been a number of studies which have examined attitudes towards GBV. A 2012 study conducted by the UN Women Regional Office for Asia and the Pacific examined the perceptions and attitudes of young people on issues related to violence against women and girls in Lao PDR.¹⁵ The study found that while young people demonstrated an interest and willingness to address issues of GBV, patriarchal gender roles and social norms which give rise to inequality and violence against women are identified and perpetuated by young people.

Research by CARE has also focussed on attitudes and perceptions of violence against women in remote ethnic communities. This research found that intimate partner violence is seen as a normal practice within marriage, and that women living in remote ethnic communities view GBV as something to be tolerated. These attitudes were found to be exacerbated by the practice of bride price. Emotional violence was identified as the most common form of violence, but physical violence and economic abuse in the form of unpaid labour, were also identified as common by respondents. Findings revealed that violence was rarely reported by women in remote ethnic communities and was viewed as a private family matter.¹⁶

The Lao PDR Violence Against Women Prevalence Study (2014) included analysis of attitudes and perceptions underlying intimate partner violence. Around 35.6% of respondents agreed with the statement that “a good wife obeys her husband, even if she disagrees”, 22.9% agreed that “a man should show he is boss” and 29.4% accepted that a wife was obliged to have sex with her husband.¹⁷ The Lao PDR Social Indicator Survey (LSIS) 2012 found that 58% of women and 49% of men felt that violence against women is justified. The LSIS 2017

¹¹ Ayuwat. 2018. Influential Factors Among Male Population Associated with the Economic Violence Against Women in Laos.

¹² World Bank. 2020. [Lao PDR Gender-based Violence Institutional Mapping Report](#). World Bank.

¹³ World Bank. 2020. [Lao PDR Gender-based Violence Institutional Mapping Report](#). World Bank, page 13.

¹⁴ CARE. 2020. [CARE Rapid Gender Analysis COVID-19 – Lao People’s Democratic Republic](#).

¹⁵ Barnes. 2012. Study on the perceptions and attitudes of young women on issues related to violence against women and girls in Lao PDR and Thailand: [Summary Report](#), UN Women ROAP.

¹⁶ Mauney. 2018. Gender Based Violence in CARE’s Remote Ethnic Target Communities, CARE.

¹⁷ National Commission for the Advancement of Women, Lao PDR, 2015. Lao National Survey on Women’s Health and Life Experiences 2014 - A Study on Violence against Women, [Summary report](#), page 8.

showed improvements in people's perceptions, as only 29.5% of women and 16.2% of men reported that violence is justified when women do not conform to traditional gender roles.¹⁸

The Government of Lao PDR launched a violence against children survey in 2018. This survey included attitudes towards violence and the role of gender.¹⁹ The findings demonstrated high levels of acceptability of violence against women among adolescents and older children (see box below). The Government has also committed to a second National Survey on Women's Health and Life Experiences as part of the second National Plan of Action on the Prevention and Elimination of Violence against Women (2021-25).

Violence against children survey – Key findings attitudes towards violence:

Among 18 to 24 year olds:

- 60.8% of females believe it is acceptable for a husband to beat his wife under one or more circumstances, compared to 37.6% of males.
- 82.5% of females and 75.4% of males believe that a woman should tolerate violence to keep her family together.

Among 13 to 17 year olds:

- 53.3% of females and 41.7% of males believe it is acceptable for a husband to beat his wife under one or more circumstances.
- 77.4% of females and 74.5% of males believe that a woman should tolerate violence to keep her family together.

This current study aims to contribute to the existing evidence base by exploring in further detail the perceptions and beliefs of men in relation to GBV. It seeks to examine the gendered norms within the household and the community which contribute to high levels of violence, in order to inform strategic and practical interventions to engage men and boys in the prevention of GBV.

¹⁸ Lao PDR Social Indicator Survey, 2012 and 2017.

¹⁹ National Commission for Mothers and Children, Lao Statistics Bureau and UNICEF Lao PDR. 2016. [National Violence against Children Survey in Lao PDR](#), Preliminary Report. Lao PDR: National Commission for Mothers and Children.

Findings and Analysis

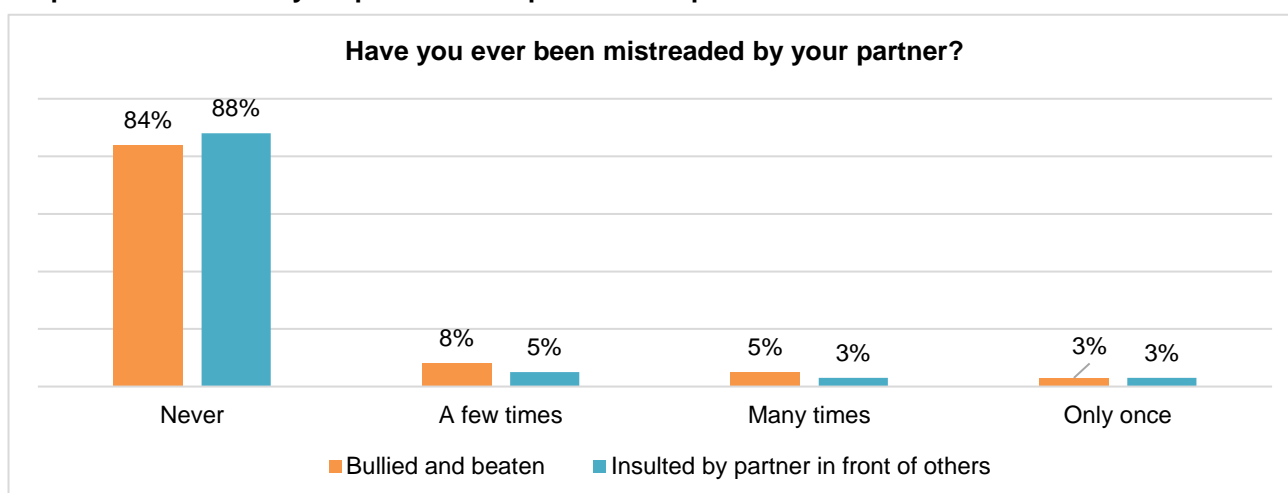
Prevalence of GBV

The main purpose of this study was to explore the drivers and reinforcing factors related to GBV in Lao PDR. Hence, this study has only taken a light-touch approach to understanding the prevalence of GBV.

This study found that 16% of female participants had experienced some form of GBV (bullying, beating), with 8% of women experiencing this a few times and 3% of women experiencing this many times. In addition, 11% of female participants reported that they had experienced verbal violence (being insulted by their partner in front of others). This corresponds roughly to other, more thorough studies of GBV prevalence, which are referenced in the literature review in the preceding section.

This study also found that 40% of women with disabilities had experienced GBV. This reflects global findings, such as by UNFPA, which estimates that 40 to 68% of young women with disabilities experience sexual violence before the age of 18.²⁰

Graph 4: Female survey respondents' responses to experiences of different forms of GBV



When disaggregated by ethnicity for those participants that reported having experienced “many times” being bullied or beaten, the highest percentage was reported by participants from the Taidam community (100%), followed by Laos (86%), Hmong (80%), Khmu and Lahou (66%), and Lantan (0%). However, the small numbers of participants from different ethnic groups (e.g., there were only 4 participants from the Taidam community) must be kept in mind, as these may not be representative samples.

Level of Awareness of GBV

This study sought to understand men’s awareness of GBV in the community including the different forms violence can take and the consequences of this violence.

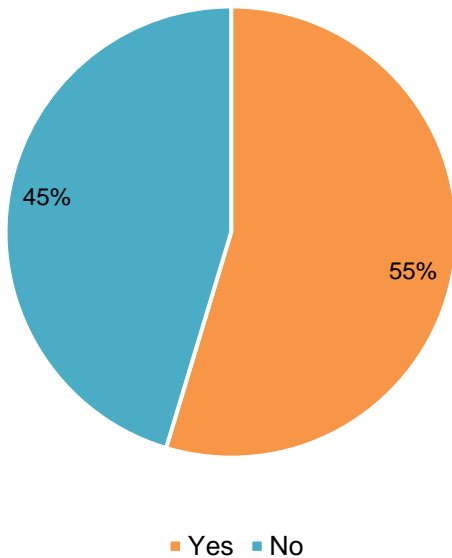
²⁰ United Nations Population Fund. 2018. [Women and Young Persons with Disabilities](#). New York: UNFPA.

Awareness of gender-based violence

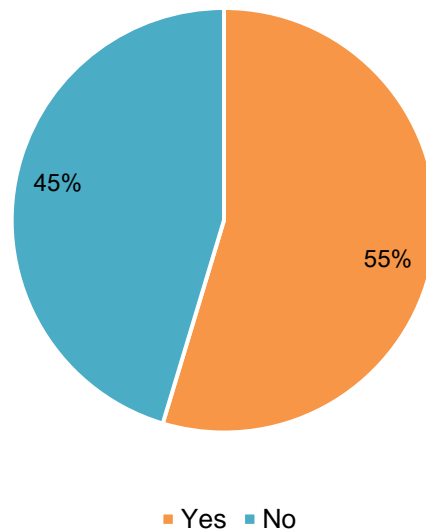
Over half of the men responding to the survey indicated they had been exposed to information about violence against women on the television or radio and had also joined activities relating to violence against women in their community or workplace. This indicates there is some awareness across communities of the existence of violence against women.

Graph 5: Male survey respondents' exposure to information about GBV

Have you ever heard any promotion or announcement on TV or radio about violence against women?



Have you ever joined activities related to ending violence against women? (village group meeting, rally, etc)



Survey results also demonstrated that both men and women believe in abstract ideas of gender equality. 95% of men and 90% of women responded that they believed that men and women should be treated the same way. The extent to which this is reflected in attitudes and practices will be explored in the next section. However, this understanding of gender equality, even at an abstract level, should provide a useful entry point for policies and programmes to address GBV.

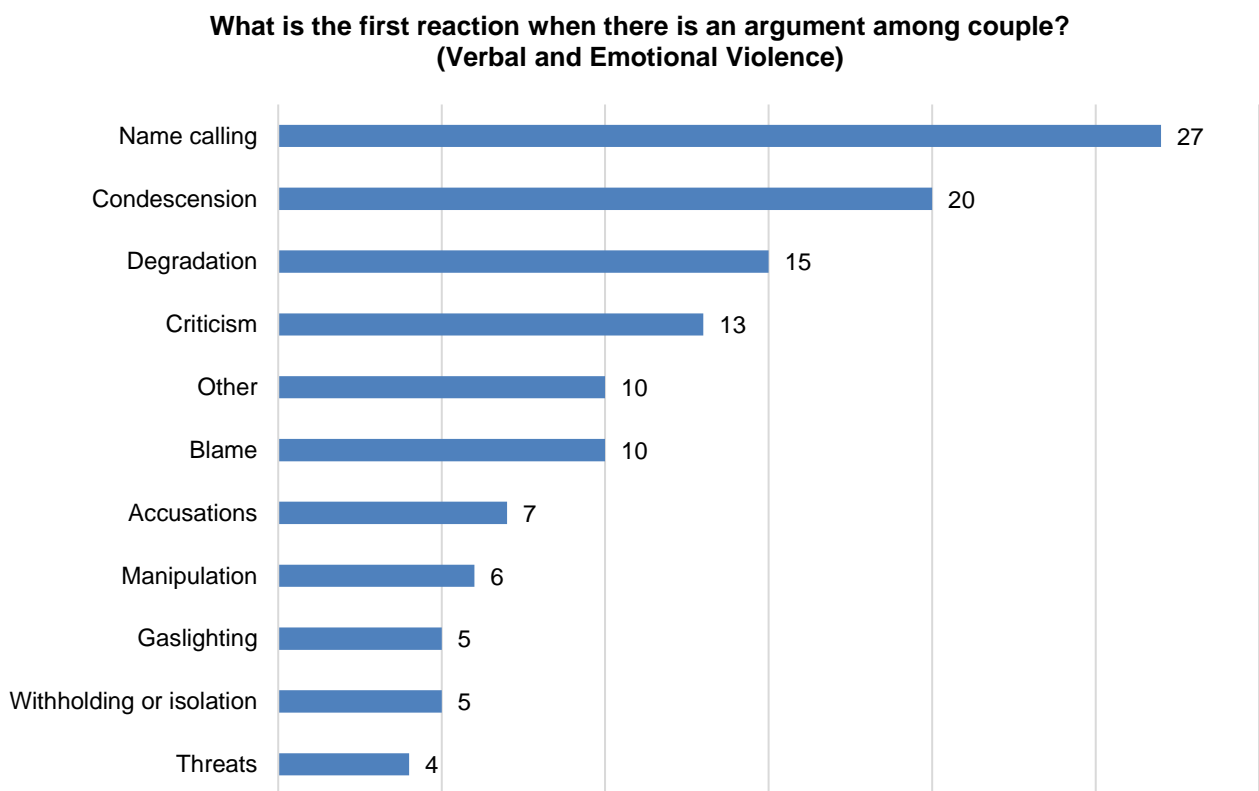
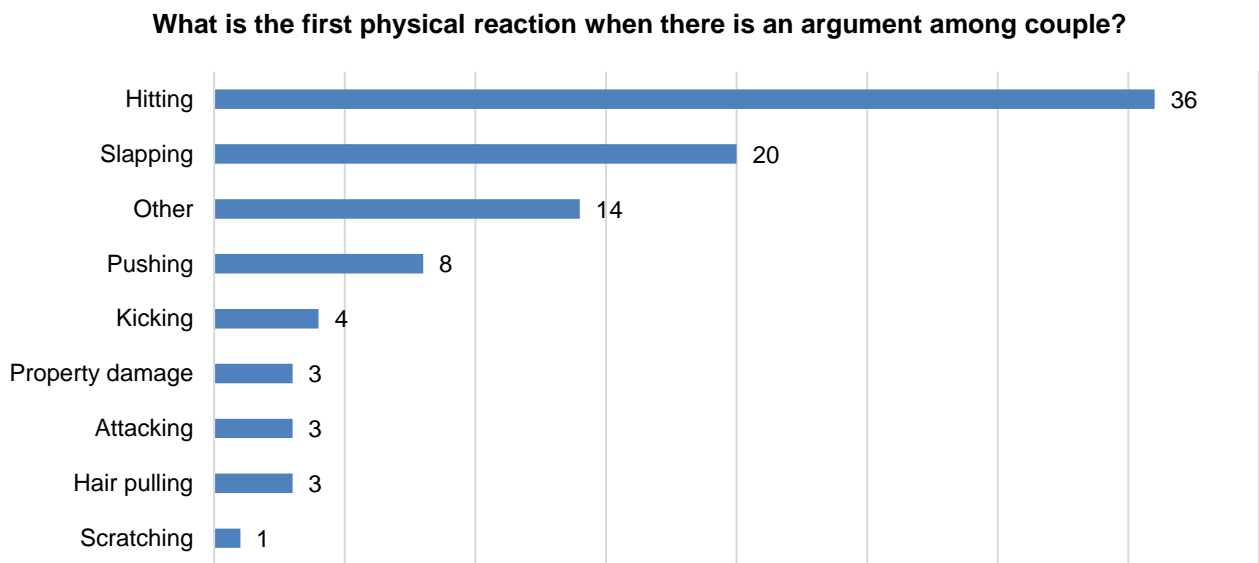
Key informants were asked whether they had witnessed or heard about sexual violence in the community. The majority of interviewees noted that violence was a problem. As one key informant described, “*Some men hit their wives, sometimes there is also sexual violence or even adults who sexually assault children. There is also group sexual assault, but parents do not dare to report it.*”

In addition to sexual violence, interviewees referred to physical and emotional violence. Several individuals identified other forms of violence including child labour, early marriage, women being trafficked to work in bars and violence online. The focus group discussions also focussed on the most common form of each type of violence and participants were asked what was likely to be the first reaction when there is an argument between a couple. Hitting (39%) followed by slapping (22%) were identified as the most common form of physical violence. Name-calling (22%) or being condescending (16%) were identified as the most common form of emotional violence. The most common reaction in terms of economic violence²¹ was described as ‘exploiting

²¹ Economic violence involves making or attempting to make a person financially dependent by maintaining total control over financial resources, withholding access to money, and/or forbidding attendance at school or employment - UN Women, [Types of violence against women and girls](#).

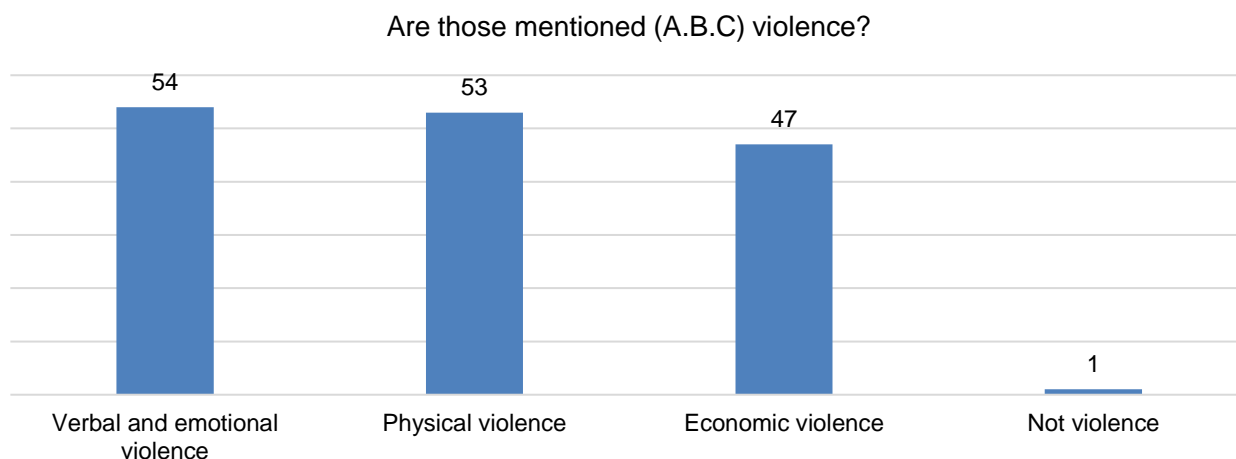
the economic situation' (64%) including damaging property and stealing money or property, followed by restricting use of property and money (11%).

Graph 6: Men's focus group discussions on common forms of violence



Participants in the focus group discussions were also asked if they saw these different reactions as violence. Only approximately one third of participants identified the physical, emotional/verbal and economic reactions as violence. This supports the finding that there are varying understandings of GBV according to the form of violence and the explanation for the behaviour.

Graph 7: Men's focus group discussions recognising different forms of violence



There is some indication that emotional violence is seen as less severe than other forms of violence. For example, 41% of participants in focus group discussions expected the husband would respond with emotional violence when his wife returned home late in the hypothetical scenario. Two participants noted that family members would think the husband had done the wrong thing if he responded with physical violence to his wife but the right thing if he only scolded her.

Some key informants suggested that GBV was decreasing in the community. A number of key informant interviewees commented that tasks were more equally shared between men and women and there had been improvements in gender equality. It was also noted by some key informants that violence against women had decreased in their communities:

“Before, there was the physical and mental assault on women and children. But at the moment, many families are well aware of family law and this assault is becoming less. It’s really good for everyone.”

Nonetheless, this observation of decrease in GBV was not reflected in the survey or focus group discussions.

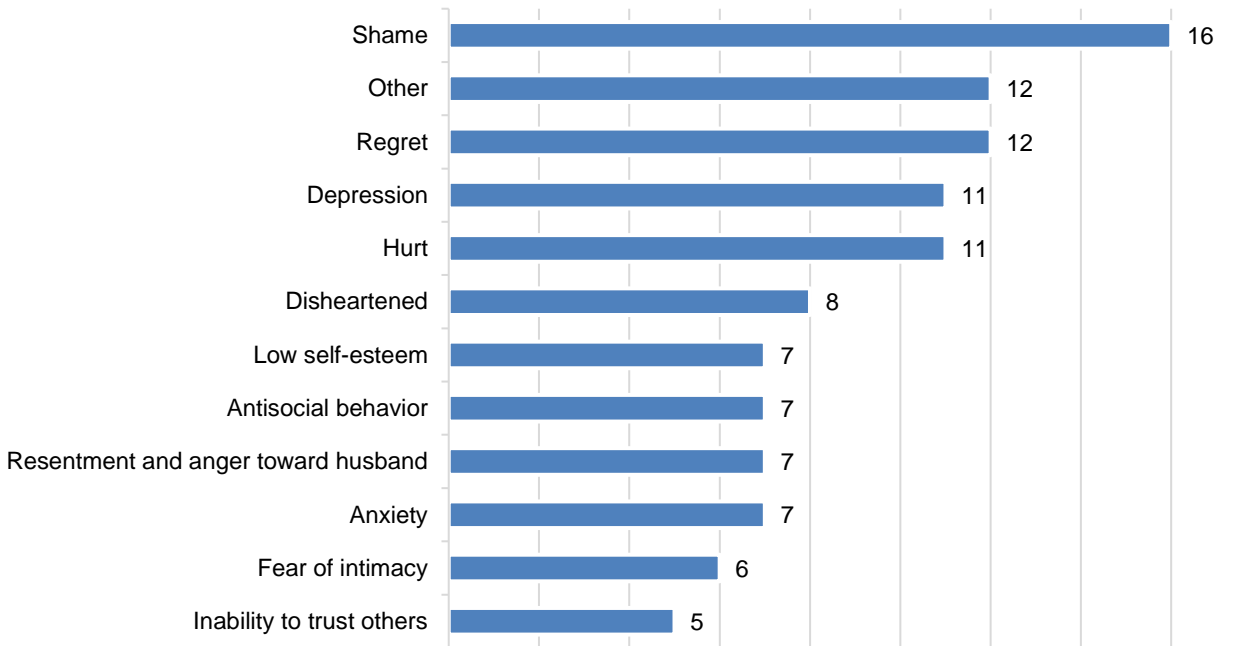
The causes and consequences of gender-based violence

Key informant interviewees were also asked about why men commit violence against women. Many interviewees referred to inequality, power imbalance between men and women, and traditional male dominance. A lack of understanding of violence and gender equality was also identified by a number of interviewees as contributing to the problem. As one interviewee explained, *“People do not know that their action is sexual assault. They didn’t go to school or receive information about assault.”* Others linked the perpetration of violence with stereotypical characteristics such as men being impatient, jealous and aggressive, or behaviour such as using drugs and alcohol.

Focus groups discussions explored participants’ understanding of the consequences of violence for women. Significantly, participants recognised there were emotional, physical, and economic consequences. A wide range of emotional consequences were identified (see graph below). This suggests there is some understanding of the psychological impacts of violence and that this impact may be common among women in the community. However, some of the impacts identified such as shame and regret indicate that stigma continues to be attached to being a victim / survivor of GBV for women.

Graph 8: Men’s focus group discussions on consequences of violence on women

What are the emotional consequences of violence to wives?



Physical injuries (66%) were the most common form of physical consequence identified but participants also noted women took time off daily activities (14%), were hospitalised (5%) and feared for their lives (5%). Poverty was identified as the most common consequence of economic violence (66%) as well as wanting to flee home (31%).

Patriarchal norms and other factors related to men’s awareness and perpetration of GBV in Lao PDR

This study sought to understand the patriarchal norms and other factors which are related to men’s awareness and perpetration of GBV in Lao PDR. This section considers why social norms are important and what previous research has revealed about patriarchal norms at the individual, community, and societal levels in Lao PDR. It then looks in detail at the findings of this research, drawing on key informant interviews, men’s and women’s surveys, and focus group discussions.

Why do social norms matter?

Social norms are informal rules of behaviour that influence what individuals do, what a collective group thinks or feels, and their beliefs about the behaviour and attitudes of others.²² In this way, social norms can either drive processes of change towards gender equality and the prevention of GBV or act as a barrier to progress.

In circumstances where GBV is prevalent, evidence suggests that social norms underpin this behaviour, such as social norms on gender roles, unequal power relations, and the wider acceptability of violence. These norms can all contribute to shared expectations around men’s use of violence.²³ Norms around masculinity can also

²² Adapted from Britt, Charla. 2021. USAID Women’s Economic Empowerment Community of Practice Advancing Women’s Economic Empowerment: Social Norms Landscaping Study. Banyan Global.

²³ Alexander-Scott, M. Bell, E. and Holden, J. 2016. [DFID Guidance Note: Shifting Social Norms to Tackle Violence Against Women and Girls \(VAWG\)](#). London: VAWG Helpdesk

justify violence and impose restrictions on women's lives including their mobility, access to employment, education and economic resources, and on how women behave, dress and socialise.

Global tools for preventing violence against women such as the RESPECT Framework have identified risk factors for GBV to include: harmful gender norms which uphold male privilege and limit women's autonomy; high levels of inequality in relationships / male -controlled relationships; and attitudes condoning violence, among other factors.²⁴

What do we know about social norms and GBV in Lao PDR?



Men are engaging in discussion on gender-based violence.

In Lao PDR, existing evidence suggests that high levels of acceptance of GBV in certain circumstances, and particularly in intimate partner relationships, is a symptom of discriminatory beliefs and patriarchal social norms which perpetuate traditional gender roles and the subordination of women.

The CEDAW Committee noted in its 2018 Concluding Observations of Lao PDR its concern about “the persistence of discriminatory gender stereotypes regarding the roles and responsibilities of women and men in the family and in society, which contribute to the perpetuation of harmful practices, such as

child marriage, and the high levels of gender-based violence against women and girls, including domestic violence.”²⁵ Similarly, a 2021 USAID landscape report²⁶ noted that key informants consistently referenced social norms as a constraint to gender equality and women's empowerment.²⁶

Studies which have examined attitudes towards GBV in Lao PDR have all demonstrated the existence of patriarchal gender norms. For example, the 2012 study conducted by the UN Women Regional Office for Asia and the Pacific found that young people identified and perpetuated the belief that women are subordinate to men, and that a ‘good’ man exerts his power, including potentially through violence.²⁷ Similar attitudes were also evidence in the Lao PDR Violence Against Women Prevalence Study, the Lao PDR Social Indicator Survey (LSIS), and the violence against children survey. In an earlier study, 35.4% of male respondents also indicated they did not like the idea of letting their wives work outside the house.²⁸

Notably, a key outcome for the second Lao DPR National Plan of Action on Preventing and Eliminating Violence against Women 2021-25 (NPAVAW) is to improve the attitudes and behaviours of families, communities, workplaces and societies towards violence against women to increase the support for prevention. The NPAVAW aims to improve social attitudes and standards that support gender equality by 50% and to increase social attitudes that do not see violence as an acceptable means of disciplining women by 30%.

²⁴ UN Women and WHO. 2019. The [Respect framework: preventing VAW](#).

²⁵ CEDAW Committee. 2018. Concluding Observations: Lao PDR, [CEDAW/C/LAO/CO/8-9 CUSO/GDG](#)

²⁶ Britt, Charla. 2021. USAID Women's Economic Empowerment Community of Practice Advancing Women's Economic Empowerment: Social Norms Landscaping Study. Banyan Global.

²⁷ Barnes (2012) Study on the perceptions and attitudes of young women on issues related to violence against women and girls in Lao PDR and Thailand: Summary Report, UN Women ROAP.

²⁸ Ayuwat (2018) Influential Factors Among Male Population Associated with the Economic Violence Against Women in Laos.

What did this study tell us about patriarchal norms?

Drawing on the methodology of the UN Multi-Country Study on Men and Violence, this research study adapted the Gender-Equitable Men (GEM) Scale to explore attitudes towards gender norms. A series of gender-related statements were read out to both male and female survey respondents and they were asked whether they strongly agree, agree, disagree, or strongly disagree with the statements. Notably, given that attitudes towards gender norms are not always consistent or static, these can be difficult to measure with a quantitative survey. However, the results provide an indication of the existence of patriarchal gender norms, which were also evident in previous research.

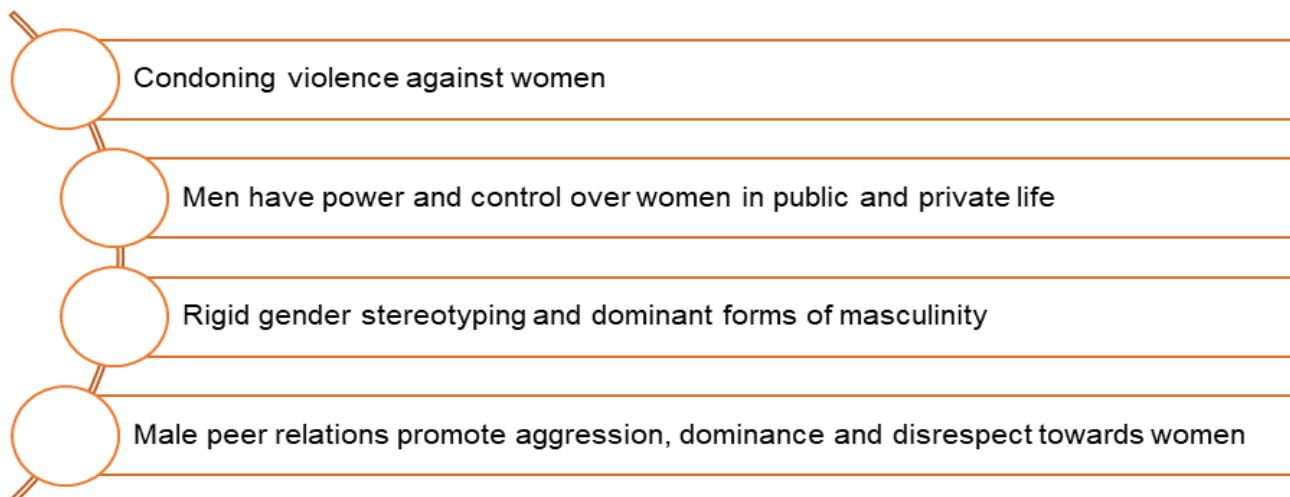
The focus group discussions explored gender norms using a hypothetical story (see box below). The groups then discussed different expectations in relation to the husband's behaviour from family and peers, potential reactions if the husband did not act in this way, and the distinction between actions in public and private. The key informant interviews also explored individual and community attitudes and behaviours in relation to GBV.

Hypothetical scenario discussed in focus groups:

Noy is married to Ka and they have 2 children aged 7 and 9 together. Noy takes care of the house, doing farm work, and taking good care of children. One day, she was asked by her friends to help in farm work that is quite far from her house while children were at school, so she came back home very late and she could not prepare dinner for anyone. Ka was very angry at her for neglecting her household work. Hence, they start fighting verbally.

In the section above on 'Gender-based Violence in Laos PDR', four factors which consistently drive violence against women were outlined. The results of this study demonstrate the existence of patriarchal norms which support each of these drivers of violence. This section, drawing on the findings from the surveys, focus group discussions, and key informant interviews, discusses each of these drivers in turn.

Figure 2: The drivers of gender-based violence



Driver #1: Condoning violence against women

“There is still a lot of social violence in the district, but everyone thinks it’s normal, especially violence within the family.” - Key informant interview²⁹

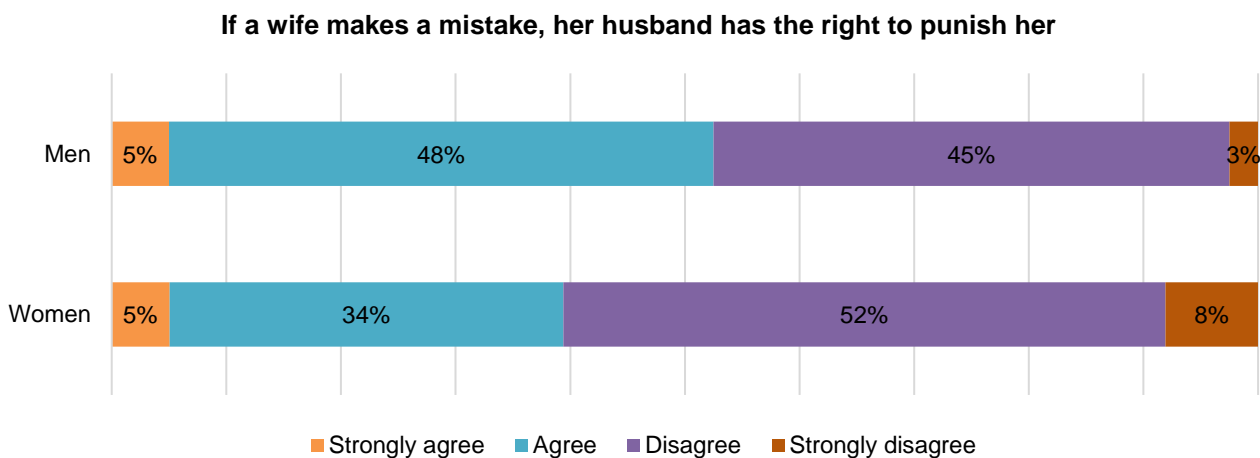
When individuals, communities, and societies support or condone violence against women, levels of violence are higher, victims are less likely to receive support, and men who support these beliefs are most likely to perpetrate GBV.³⁰ The survey sought to explore the extent to which men and women condone gender-based violence within the household and the community.

Acceptance of violence in some circumstances

The majority of both male and female respondents disagreed with the statement that sometimes a woman deserves to be beaten (72.5% and 75% respectively). However, responses to further survey questions revealed that a large proportion of both men and women believe that in certain circumstances gender-based violence, and particularly intimate partner violence, is acceptable.

For example, more than half of the men agreed that if a wife makes a mistake, her husband has a right to punish her (see graph below). Women were slightly less likely to agree with this statement (40% of women agreeing or strongly agreeing). This finding reflects other research in Laos which has demonstrated that there is tolerance of violence against women, particularly within the household, in circumstances where women are not conforming to restrictive gender roles.³¹

Graph 9: Participants’ responses to intimate partner violence under a particular circumstance



Almost two-thirds of men agreed (60%) or strongly agreed (5%) that a woman should endure violence to keep her family together. Almost half of female respondents also agreed or strongly agreed with this statement (34% and 10% respectively).

The survey also revealed the belief that forced sex between husband and wife is acceptable behaviour. More than half of the women surveyed believed a woman cannot refuse to have sex with her husband (42% agreed

²⁹ Key Informant Interview, KII-ODX-20-C1-07, District Health Officer.

³⁰ Heise. (2011). What works to prevent partner violence. An Evidence Overview.

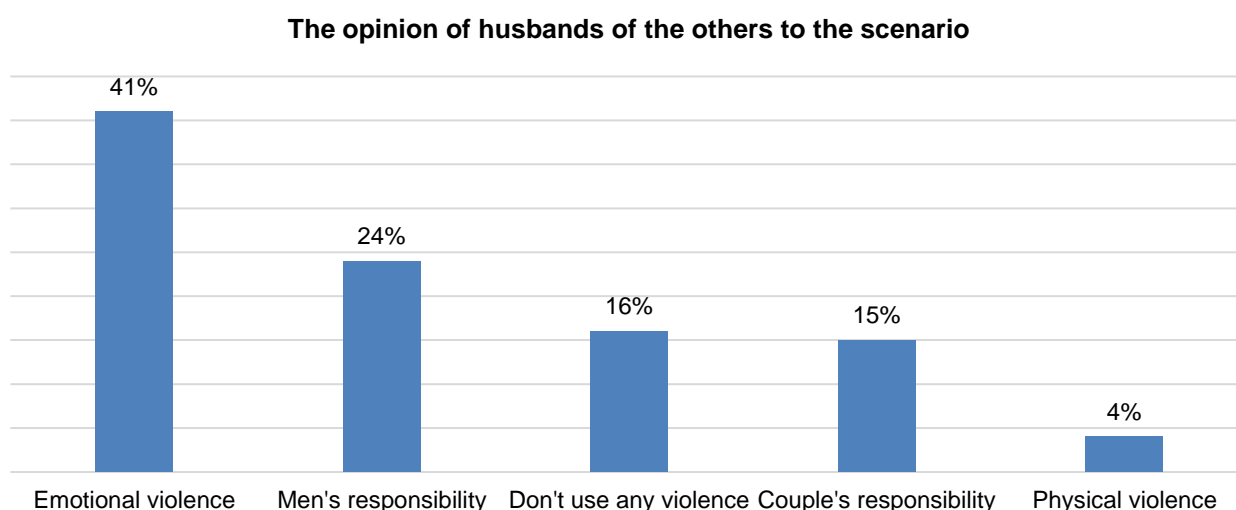
³¹ See for example, National Commission for the Advancement of Women, Lao PDR, 2015. Lao National Survey on Women’s Health and Life Experiences 2014 - A Study on Violence against Women, [Summary report](#), page 8, Lao PDR Social Indicator Survey, 2012 and 2017, Government of Lao PDR. 2018. ³¹ Barnes. 2012. Study on the perceptions and attitudes of young women on issues related to violence against women and girls in Lao PDR and Thailand: [Summary Report](#), UN Women ROAP.

and 10% strongly agreed). 55% of men also agreed with this statement. Further, more than half of the women agreed (46% agree and 6% strongly agree) that if women do not physically fight back, it would not be rape. 52.5% of men also agreed or strongly agreed with this statement. 68% of women also agreed or strongly agreed that their partner expects that she will accept when he wants to have sex. This finding is in line with previous research in Laos which found that many young men and women believe that a woman cannot refuse sex with her husband without a good reason.³² The connection between a woman refusing have sex with her husband and violence was also highlighted by some key informants. For example, one described:

“We have seen in the past some cases where his wife refused to have sex with her husband and her husband became aggressive creating an assault on his wife. He thought his wife fell in love with someone else. Men like to create this event and insult women and others.”³³

The focus groups, using the hypothetical scenario, discussed what would most husbands be expected to do in a situation where their wife arrives home late and does not prepare dinner. 41% of focus group participants responded that emotional violence would be an acceptable response and 4% thought that physical violence would be an expected response. 15% thought that the couple should work together to resolve the issue and a further 16% thought that violence should not be used.

Graph 10: Focus group discussions on acceptable responses by other men



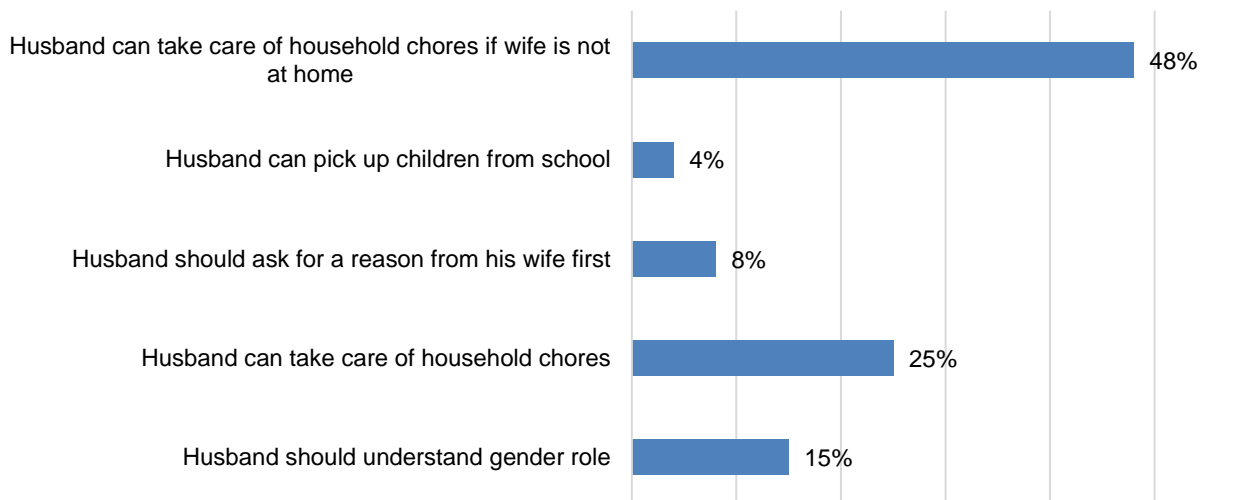
However, almost one quarter of participants thought that the man should take responsibility rather than blaming his wife. Almost three quarters of those participants who believed the husband should take responsibility stated that the husband could take care of household chores, rather than his wife. This demonstrates a growing awareness of men's responsibility to share household chores, at least in theory.

³² Barnes. 2012. Study on the perceptions and attitudes of young women on issues related to violence against women and girls in Lao PDR and Thailand: [Summary Report](#), UN Women ROAP.

³³ Key Informant interview, KII-PSL-06-A1-06

Graph 11: Focus group discussions on the husband's responsibility

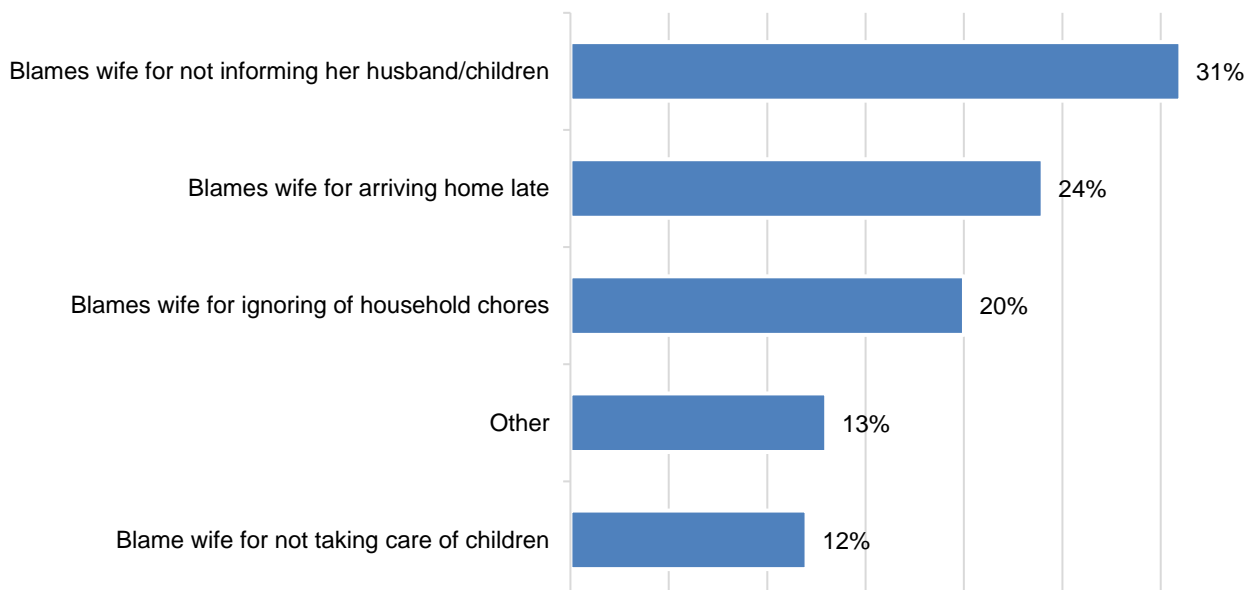
The opinion of husbands of the others to the scenario



While it is encouraging that 55% of focus group participants stated that the husband should not respond with violence to his wife's behaviour, significantly, 45% of participants *expected* the husband would respond with violence. This again supports the finding that in certain circumstances, violence is seen as acceptable. The participants who indicated the husband would be expected to use emotional violence, saw this as acceptable behaviour because the woman had failed to conform to her gendered role of performing domestic chores (20%) or taking care of the children (12%) or because she had not informed her husband (31%) or simply because she was late returning home (24%). This highlights the community expectation that a woman does not have freedom of movement unless she has sought the permission of her husband.

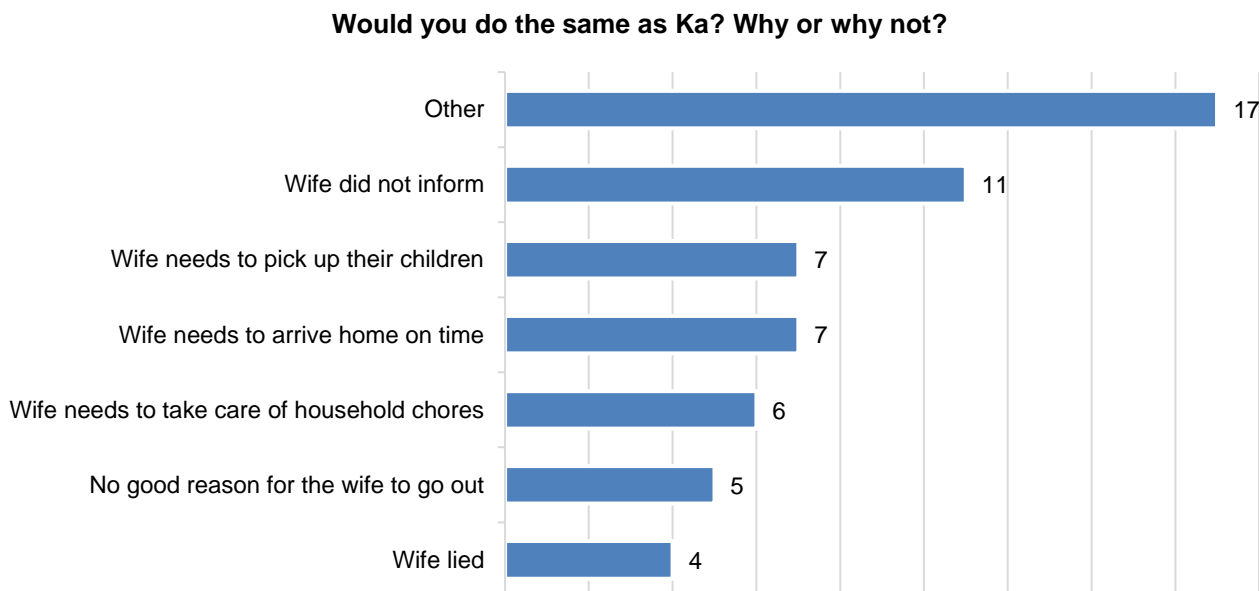
Graph 12: Focus group discussions on the acceptability of the use of emotional violence

The opinion of husbands on acceptable responses in the scenario



Focus group participants were also asked whether they would behave the same way as the husband in the scenario. 40% responded that they would behave the same way and scold their wife. This reaction was linked to the woman’s failure to conform to her gendered role, such as failing to perform household duties, caring for children, arriving home late and informing her husband of her whereabouts (see below).

Graph 13: Focus group discussions on participants own responses to the same scenario



Shift blame for the violence from the perpetrator to the victim

This acceptance of intimate partner violence in certain circumstances also saw participants in the study shifting the blame for the violence from the perpetrator to the survivor. For example, some focus group discussions saw scolding as justifiable because the wife had done something wrong. When discussing the reaction of friends to the husband’s behaviour, 11% of participants responded that a friend would think the wife did the wrong thing including because she did not perform her household and caring duties (22%) and did not inform her husband (22%).

Responses also suggested that violence may be dismissed or downplayed for women who breach socially accepted roles or identities. For example, the survey explored attitudes towards women who worked in specific occupations. Men were asked if women who work at entertainment venues such as karaoke bars and massage parlours are honourable women. 55% of men disagreed with this statement and 7.5% totally disagreed. 54% of women also disagreed with this statement. While this did not directly address acceptance of violence against these groups, it does suggest that violence is more likely to be downplayed or dismissed against women who are not conforming to the stereotype of an ‘honourable’ woman.

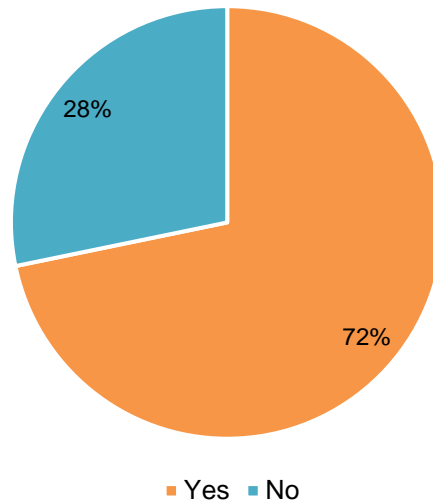
Violence is a private matter

This study also highlights the firmly held belief that violence is a private matter. Significantly, almost half of the women surveyed either agreed (39%) or strongly agreed (10%) that what happens within the household should remain private. Men were even more likely to agree with this (50% agree and 20% strongly agree). Similarly, 72% of focus group participants agreed that Ka’s behaviour (scolding his wife for arriving home late) would be different in public. The reasons for this response (see graph below) demonstrate the belief that quarrelling and violence are a private matter and to behave this way in public is not viewed as acceptable. This could provide

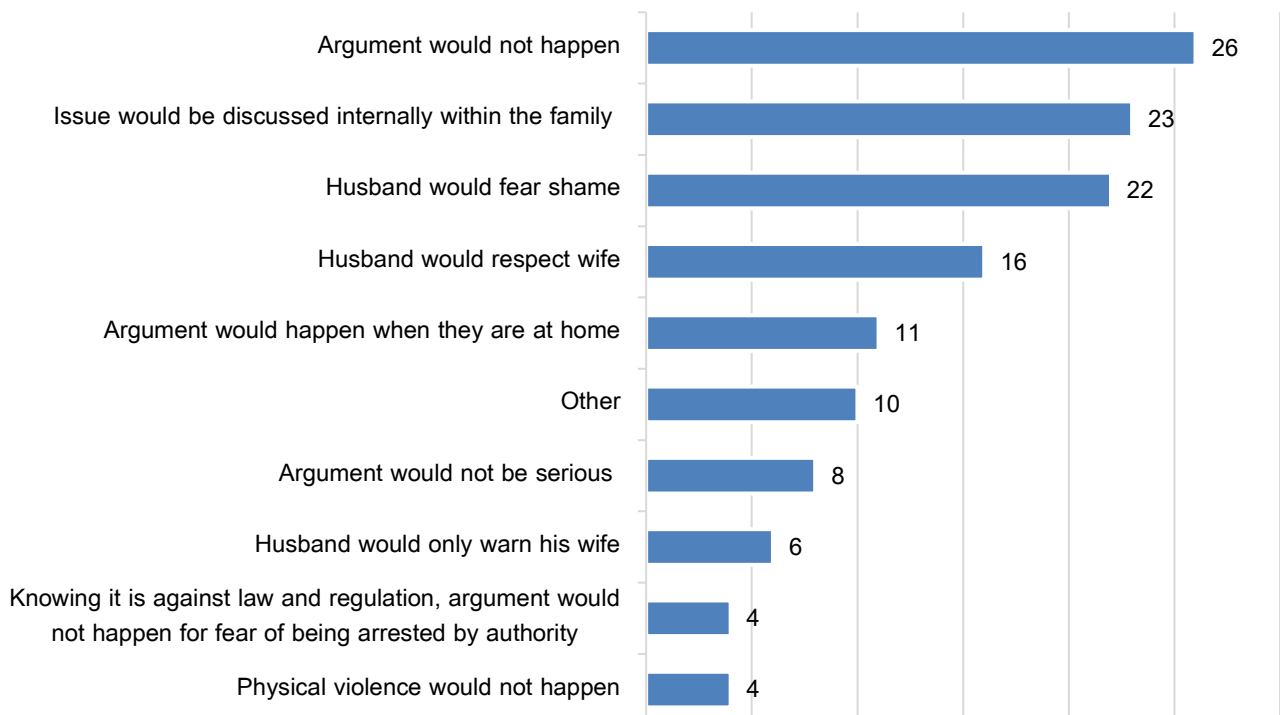
a potential entry point to engage with perpetrators as to why behaviour which is unacceptable in public is accepted within the household.

Graph 14: Focus group discussions on the occurrence of violence in public

Would the situation change if it happened in a public place?



How would the situation change if it happened in a public place?

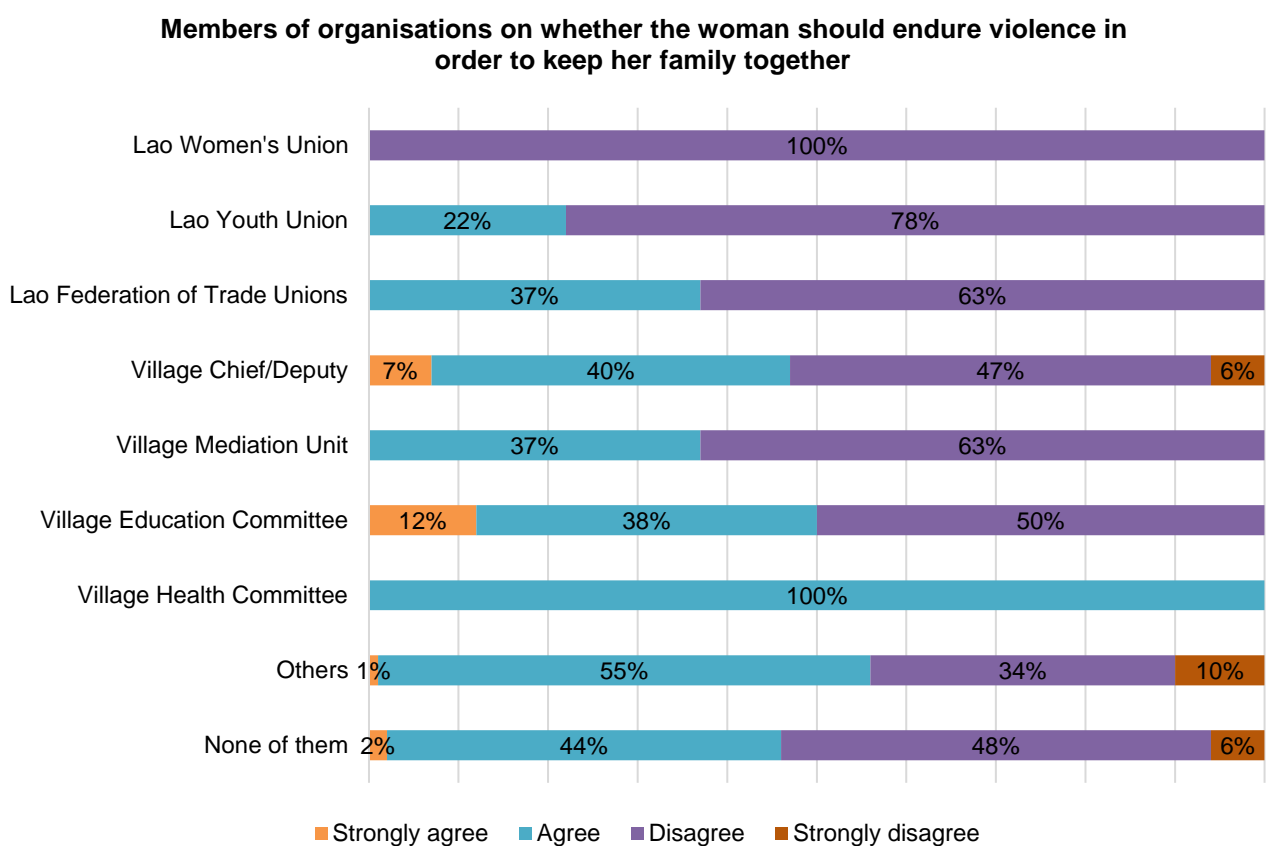


This community expectation that violence is a ‘private matter’ can lead to violence being condoned or even reinforced because it is viewed as something which should be resolved within the family unit without the interference of the State. The CEDAW Committee noted with concern “the persistent, although not mandatory, use of alternative forms of dispute resolution, in particular village mediation units, for domestic and sexual

violence cases.”³⁴ Research by CARE in remote ethnic communities also found that when violence was reported, it was typically reported to the village chief or village mediation unit, who were mediating cases of GBV with no training and “using the same processes they would for mediating conflicts over ownership of animals or stolen property.”³⁵ This focus on untrained mediation and resolving violence within the family impacts on how seriously the community views GBV and the support and justice available for survivors of violence.

Significantly, 100% of survey participants who identified as being members of a Village Health Committee agreed that a woman should endure violence to keep her family together. More than a third of the Village Mediation Unit also agreed with this statement. This is potentially problematic as these individuals will be involved in mediating violent situations and ensuring women receive healthcare support but may influence women to remain in a violent situation for the sake of her family.

Graph 15: The views of members of different community organisations on GBV within the home



Driver #2: Men have power and control over women in public and private life

“There is always the problem of women being looked down on. Men dominate women, we found everywhere.”
 - Key informant interview³⁶

³⁴ CEDAW Committee (2018) Concluding Observations: Lao PDR, [CEDAW/C/LAO/CO/8-9 CUSO/GDG](#)

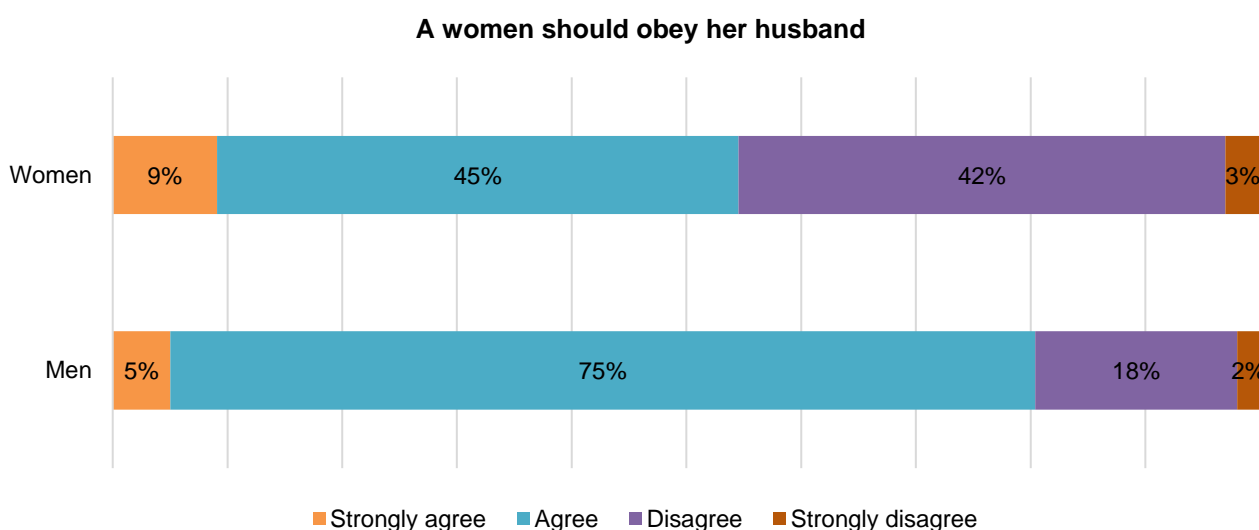
³⁵ Maoney. 2018. Gender Based Violence in CARE’s Remote Ethnic Target Communities, CARE.

³⁶ Key Informant interview, KII-LNT-13-B1-06.

Violence is more common in relationships in which men control decision making and limit women’s social and financial autonomy.³⁷ Male perpetrators of violence often report a sense of ownership of female partners and more rigid ideas as to how females should behave in a relationship. These actions of control and dominance send the message that women have a lower social value and less power and are therefore legitimate targets of violence.³⁸

The survey included a number of questions which explored controlling behaviour within intimate partner relationships including decision making, control of women’s mobility and attitudes reinforcing the subordinate role of women. 75% of male respondents agreed and 5% strongly agreed that a woman should obey her husband. Over half of the women surveyed also agreed with this statement (45% agreed and 9% strongly agreed). As one key informant noted, “Most women must obey the orders of their husband, even if they are reluctant.”³⁹

Graph 16: Participants’ views on the norm that women should obey their husbands



Taking into account the ethnicity of respondents, men who identified as Ahka, Lao and Khmu were disproportionately more likely to agree with this statement (see graph below). 84% of male respondents identifying as Ahka and 82% of respondents identifying as Lao agreed or strongly agreed that women should obey their husbands. Notably, men identifying as Lahou were more likely to disagree (56%) than agree (42%) with this statement.

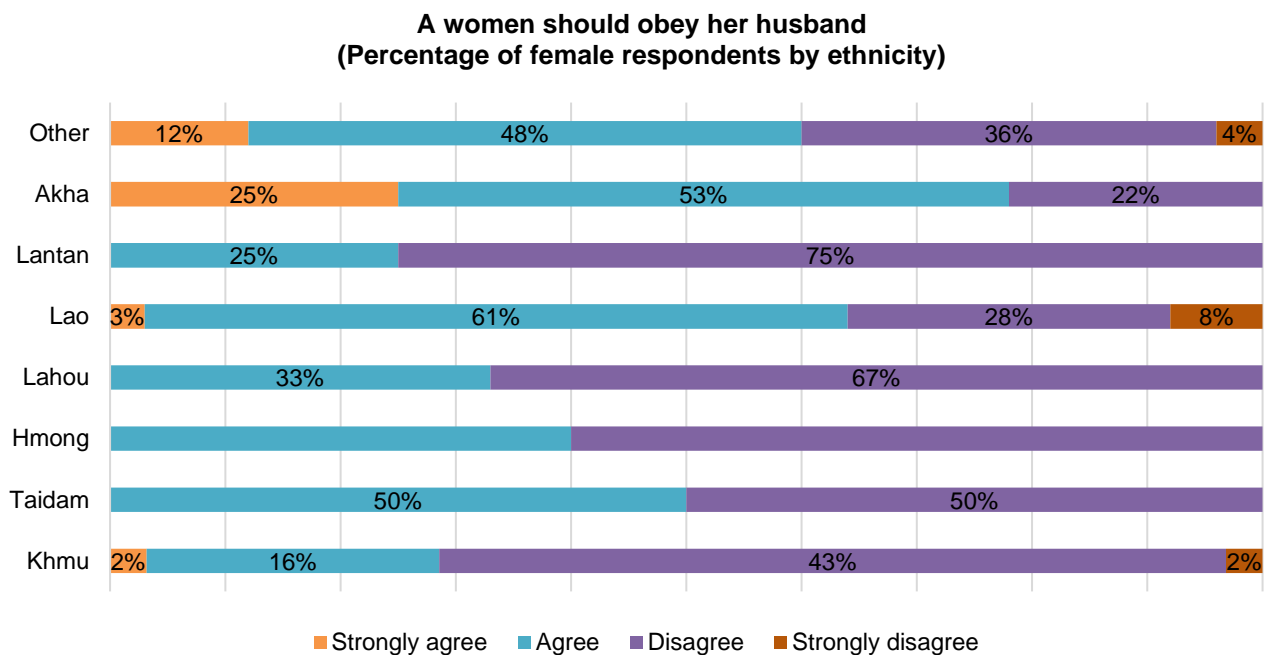
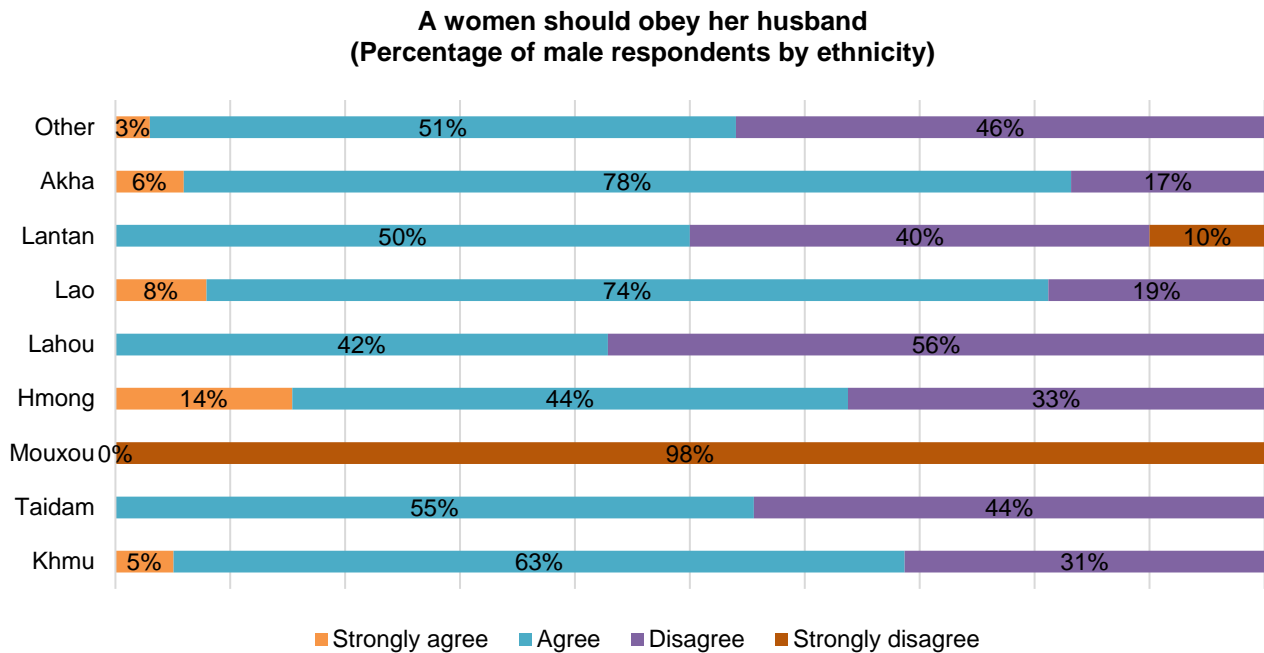
Female respondents from Lao and Ahka ethnic groups were more likely to agree or strongly agree with the statement that a woman should obey her husband (see graph below). However, women across ethnic groups were more likely to disagree with this statement than male respondents. For example, 75% of women identifying as Lantan, 60% of women identifying as Hmong and 67% of women identifying as Lahou disagreed with the statement. This is encouraging and may provide an entry point for engaging with different ethnic communities on the drivers of GBV.

³⁷ See, for example, Kaukinen C., & Powers, R. (2015) The role of economic factors on women’s risk for intimate partner violence: A cross-national comparison of Canada and the United States. *Violence Against Women*, 21(2), 229–248, True, J. (2012). The political economy of violence against women. Oxford University Press; Vyas, S., & Watts, C. (2009). How does economic empowerment affect women’s risk of intimate partner violence in low and middle income countries? A systematic review of published evidence. *Journal of International Development*, 21(5), 577–602.

³⁸ See discussion in Our Watch. [Change the story: A shared framework for the primary prevention of violence against women in Australia](#) (second edition). Our Watch, Melbourne, 2021, pages 39-40.

³⁹ Key Informant Interview, District Health Officer, KII-LNT-14-C1-02.

Graph 17: Male (top) and female (below) participants' views on the norm that women should obey their husbands by ethnicity

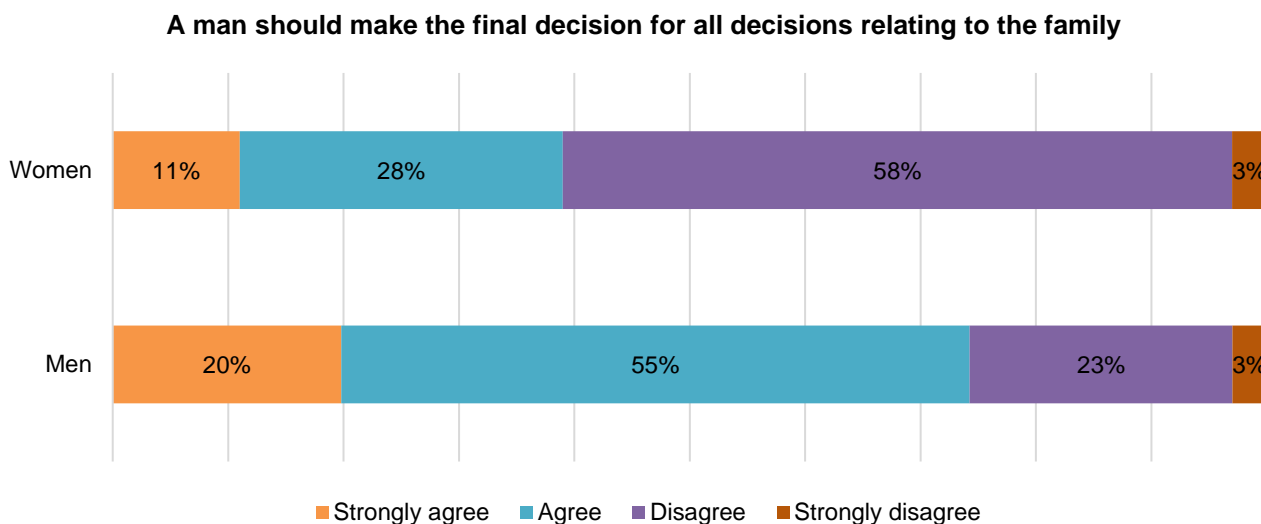


Almost a third of women surveyed indicated that their partner decided who they could spend time with and 32% agreed or strongly agreed that their partner believed if they wore attractive clothes, they were trying to attract other men. 35% of men indicated that they were the type of person who decided who their partner could spend time with and over half stated that they like to know where their partner is all the time (47.5% agree and 5% strongly agree). This attitude was also evident in the focus group discussions, with participants agreeing that the wife should be scolded because she did not inform her husband of her whereabouts and that she would be late arriving home.

This suggests the behaviour of a substantial proportion of women, in terms of social contact and what they wear, is controlled by their partner. Isolating women from support networks such as friends and family is a common form of coercive control.

The survey also examined decision making power within the household. 39% of women agreed or strongly agreed that a man should make the final decision for all decisions relating to the family. Men were even more likely to support this statement (55% agree and 20% strongly agree).

Graph 18: Participants' views on family decision making



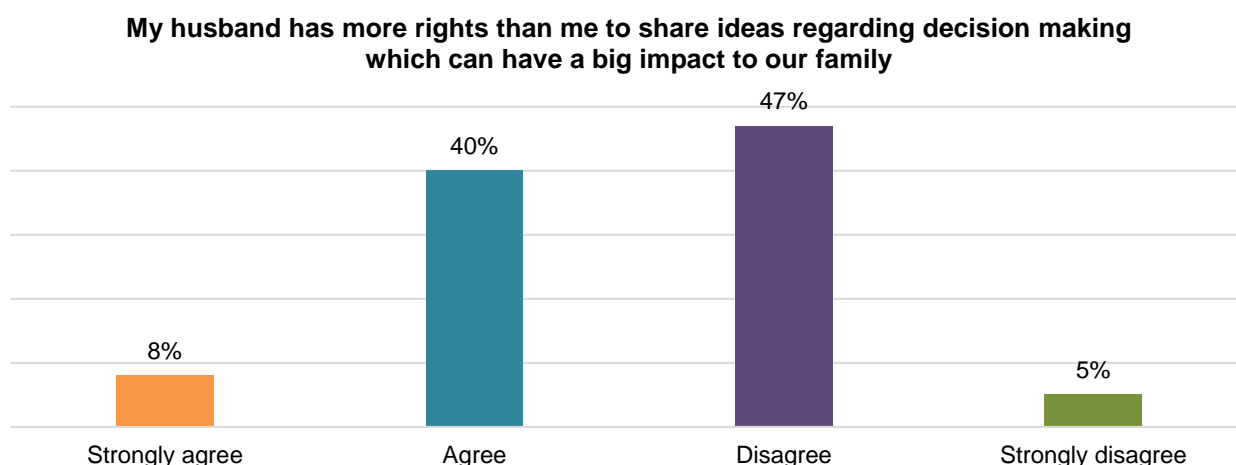
Interestingly, despite this perception that men should make the final decisions in the family, when participants were asked who made decisions in relation to certain aspects of family life, the majority of decisions were described as being made jointly. For example, 71% of female respondents indicated decisions were made jointly in relation to children’s education, 65% of respondents reported joint decision making in relation to food and clothing, and 75% of women stated decisions in relation to expensive investments (such as purchasing a car or a house) were joint decisions. The results from the men’s survey were similar (75%, 70%, and 80% respectively).

Although a majority of survey participants described household decisions as being made jointly, almost half of the women surveyed believed that their husband/partner had more rights than they did to share ideas regarding decision making, which impacted their family. 40% of women agreed and 8% strongly agreed with this statement. Significantly, 60% of men also agreed or strongly agreed with this statement. When considering the ethnicity of respondents, 78% of men identifying as Ahka, 77% of men identifying as Hmong and 70% of men identifying as Lahou agreed or strongly agreed with this statement. Among the highest responses from female respondents, 80% of women identifying as Hmong, 75% of women identifying as Taidam and 71% of women identifying as Ahka also agreed or strongly agreed.

These responses suggest the perception of joint decisions in the household may not be translating into joint decision-making power. This was supported by a key informant interviewee who stated that although family property is owned jointly and decisions must be made jointly, the role of head of the family always remains with the man. Another key informant described how *“men are the leader and the head of household. Lao society keeps men’s role as leaders and promotes men to have more power in decision making.”*⁴⁰

⁴⁰ Key informant interview, KII-VTE-2022-08-19

Graph 19: Women participants' responses on household decision making



Importantly, decisions in relation to women's health were also predominantly described as being made jointly, with 72.5% of men and 66% of women indicating these decisions were made jointly. Only 15% of women responded that they made the final decision in relation to their own health. This suggests women lack autonomy in relation to their own healthcare and control over their own bodies. 28% of women also indicated that their partner would get angry with them if they want to use a condom and 68% of women agreed (58%) or strongly agreed (10%) that their partner would expect them to accept when they wanted to have sex. This highlights how many women do not feel they have control over their own reproductive health and rights.

Driver #3: Rigid gender stereotypes and dominant forms of masculinity

"Between men and women, in most cases, the man is considered the one with the most power, he is the head of the family. Women work more on household chores." - Key Informant Interview⁴¹

There is now a global body of evidence demonstrating that levels of men's violence against women are significantly higher in societies where there are more rigid distinctions between the gender roles of men and women and where dominant forms of masculinities are rigidly adhered to.⁴² The survey explored gender roles within the household such as how the division of domestic duties were managed.

Rigid gender roles

Although 81% of women and 97.5% of men agree or strongly agree that a man should share household chores with a woman such as washing dishes, cleaning, and cooking, this was not reflected in the allocation of household duties. More than a third of men indicated their wife normally did the cooking (37.5%), the cleaning (32.5%), and the washing (45%). While a significant proportion of female survey participants indicated they did all or most cooking (36%), all or most of the cleaning (53%) and all or most of the washing (55%).

Significantly, childcare seemed to be more equitably shared between husband and wife, with 52% of women and 75% of men indicating this task was shared equally. Taking into account the ethnic identity of respondents, men identifying as Lantan and Lahou were less likely to respond that childcare was equally shared (50% and 28% respectively). Women identifying as Hmong, Khmu, Lantan and Lao were also less likely to state that childcare was equally shared (20%, 33%, 25% and 50% respectively). There were also notable differences

⁴¹ Key Informant Interview, KII-LNT-13-B1-06.

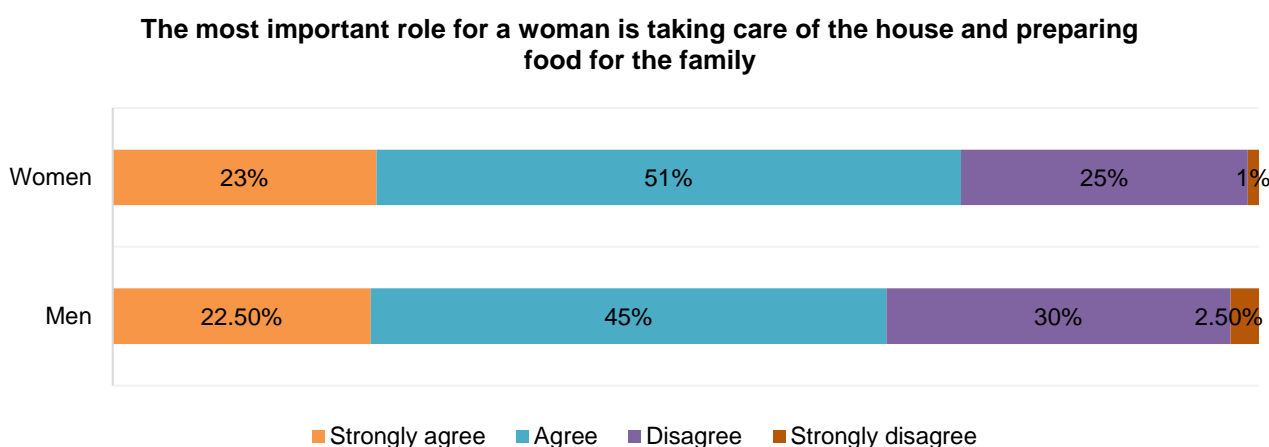
⁴² Flood, M., & Pease, B. 2006. The factors influencing community attitudes in relation to violence against women: A critical review of the literature. Victorian Health Promotion Foundation; United Nations. (1979). Convention on the Elimination of All Forms of Discrimination against Women, Article 5A.

between the opinions of men and women within some ethnic groupings. For example, of those respondents identifying as Ahka, 91% of male respondents and 60% of female respondents, indicated childcare was shared equally.

Notwithstanding the actual division of household tasks, there is a perception that domestic duties are a woman’s role. 51% of women agree and 23% totally agree that a woman’s most important role is taking care of the household and preparing food for her family. Over two-thirds of men agreed with this statement (45% agree and 22.5% strongly agree).

This illustrates that a gendered division of labour still exists in Laos, with women and girls generally expected to be responsible for household tasks. This reflects the gendered norm that men believe that they should be the primary breadwinner and head of the household, and women should be responsible for domestic work.

Graph 20: Participants’ responses on the gendered division of labour in the home



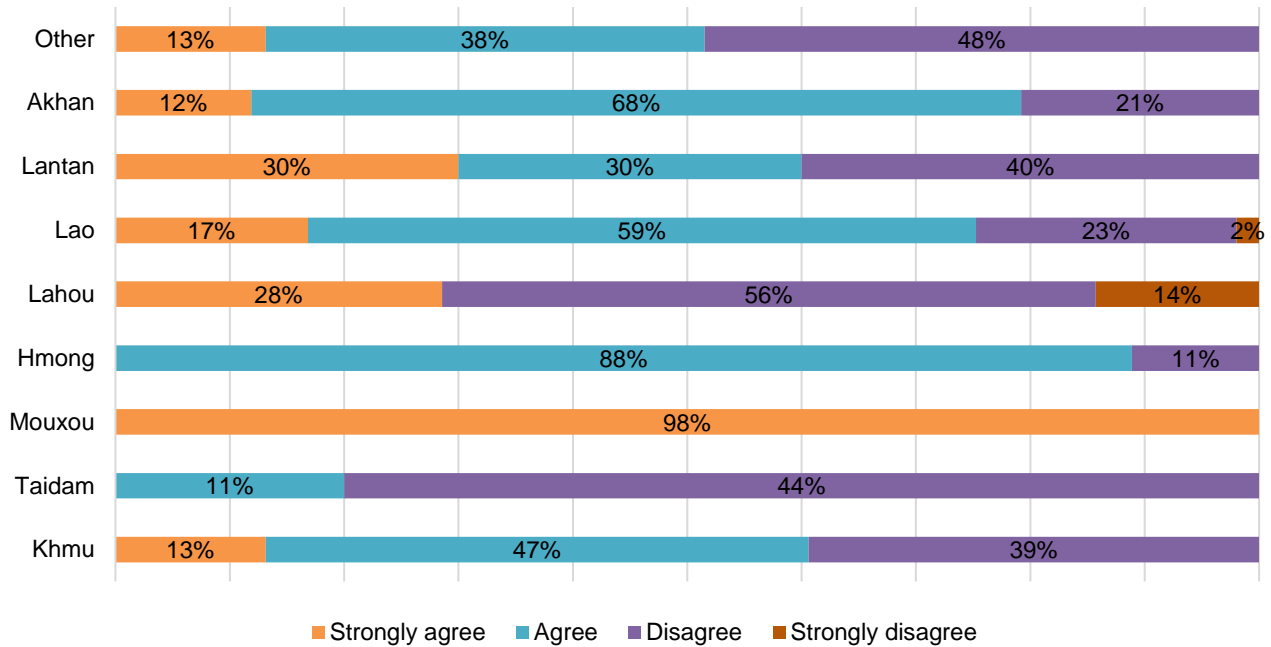
Taking into account the ethnicity of respondents, male respondents across almost all ethnic groups were more likely to agree or strongly agree with the statement that the most important role for a woman is taking care of the house and preparing food for the family. For example, 80% of men identifying as Ahka and 76% of men identifying as Lao agreed or strongly agreed with this statement. However, 56% of male respondents identifying as Lahou, 40% of men identifying as Lantan and 39% of men identifying as Khmu disagreed with this statement, and 14% of men from Lahou strongly disagreed. While this still leaves a significant proportion of men supporting this statement, it is encouraging to see indications of a less rigid approach to gender roles among some ethnic groups.

Women across all ethnic groups were more likely to agree or strongly agree with this statement. No female respondents identifying as Lahou disagreed with this statement and a notable percentage of women across all ethnic groupings strongly agreed with the statement (except women identifying as Lantan where 75% agreed but no women strongly agreed). For example, 50% of women identifying as Taidam, 40% of women identifying as Hmong and one third of women identifying as Lahou strongly agreed that a woman’s role was to take care of the house and prepare food for the family.

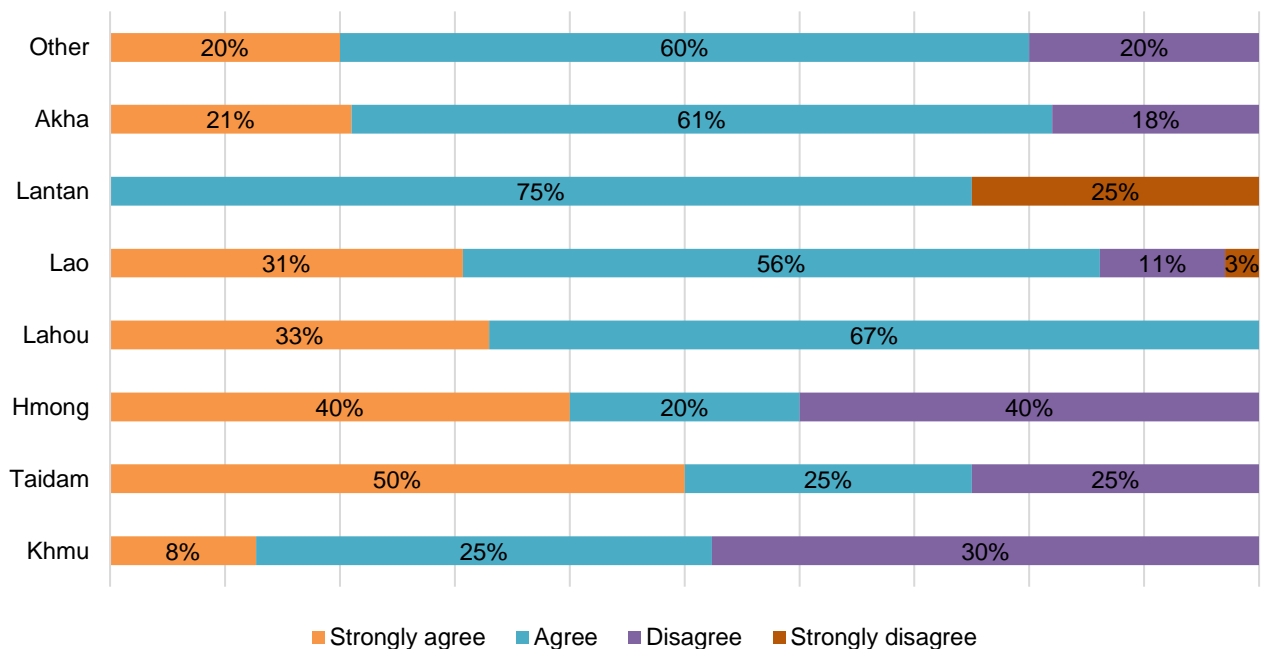
While the small numbers of participants in this study from certain ethnic groups must be kept in mind, these results suggest targeted strategies for different ethnic groupings to address strongly held beliefs in relation to the subordination of women should be explored in more detail. For example, messaging which emphasises the high value placed on women’s role in the family could provide a lever for elevating women’s status.

Graph 21: Male (above) and female (below) participants' responses on the gendered division of labour in the home by ethnicity

The most important role for a woman is taking care of the house and preparing food for the family (Percentage of male respondents by ethnicity)



The most important role for a woman is taking care of the house and preparing food for the family (Percentage of female respondents by ethnicity)



These rigid gender roles were also evident in focus group discussions with participants who expected the husband to respond with emotional or physical violence seeing this behaviour as justified because the woman had failed to conform to her gendered role of performing domestic chores (20%) or taking care of the children (12%). 11% of focus group participants responded that a friend would think the wife did the wrong thing by

returning home late and not preparing the dinner, on the basis that she did not perform her household and caring duties (22%) and did not inform her husband (22%).

During key informant interviews, several interviewees noted that rural areas, particularly remote villages, tend to take a more traditional approach to gender roles in the household and community. For example, one interviewee stated, *“In some villages men and women have equal rights, especially villages in town. On the other hand, in the remote villages, women do not. Women work harder than men.”*⁴³ Another interviewee described how, *“Men are dominant whereas women must take care of children and cooking in rural areas. For example, if a man is tired from work, but the meal is not ready yet, it may cause violence.”*⁴⁴ Some interviewees also believed that violence against women was more acceptable within some ethnic minority communities due to more traditional approaches to gender roles.

However, there is some indication of growing awareness of men’s responsibility to assist with household chores. Almost one quarter of focus group participants thought that the man should take responsibility rather than blaming his wife, including through taking care of household duties. This suggests an entry point for discussion around gendered roles and GBV. Similarly, Lao traditions of respect and harmony also provide a lever for discussing household dynamics and how domestic labour can be shared more equitably. As a key informant described, *“Most of the proverbs of the community are respect for each other. Gender equality and living together in an equitable way corresponds to that tradition.”*⁴⁵

Dominant forms of masculinity

Socially dominant forms of masculinity are upheld and promoted not only by individuals but also by social systems and structures. There is a strong correlation between violence against women and forms of masculinity that are associated with control, dominance, and aggression.⁴⁶ This study revealed a number of characteristics and behaviours that men are expected to support and conform to in Lao society. For example, 65% of men agreed with the statement, “to be a man you need to be a strict person”. Findings also reveal societal expectations that men are dominant as head of the household in the family unit leading to power imbalance. As one key informant stated, *“Some men think they are the head of the family or stronger than their wives, so they are not afraid of their wives and don’t respect their wives.”*⁴⁷ Another described how *“men are educated from generation to generation or from an early age to become the important axis to lead the family. So, they think they have more power, that they can be violent without being afraid of anything.”*⁴⁸

The behaviours and attitudes described throughout this section, including acceptance of controlling behaviour and discipline of women if they are seen as doing something wrong, demonstrate the existence of these socially dominant forms of masculinity. Notably, more than half of male survey respondents (57.5%) agreed that they would be embarrassed if their son had a same-sex relationship. This discriminatory attitude is reflective of ideas around gender roles and forms of masculinity within the community. Women survey respondents were less likely to agree with this statement (33% agree and 3% totally agree).

Men who are reflective of dominant forms of masculinity will often be promoted and provided with responsibility within the community. Interestingly, 80% of those who identified as a village chief agreed with the statement that men should make the final decision in the household. All of those who identified as being a member of a Village Education Committee also agreed or strongly agreed with this statement, together with 59% of those who were members of a Village Mediation Unit.

⁴³ Key informant interview, KII-SNK-28-13.

⁴⁴ Key informant interview, KII-VTE-2022-08-19

⁴⁵ Key informant interview, KII-PSL-05-A1-05

⁴⁶ See discussion in Our Watch. 2021. [Change the story: A shared framework for the primary prevention of violence against women in Australia](#) (second edition). Our Watch: Melbourne.

⁴⁷ Key informant interview, KII-PSL-04-A1-04

⁴⁸ Key informant interview, KII-ODX-18-C1-05

Graph 22: The belief of members of community organisation on household decision making



Support for ideals of dominant masculinity has implications for acceptance of GBV. Worryingly, all survey participants who identified as being members of the Village Health Committee, 60% of those who were village chiefs, and 41% of those who were members of the Village Mediation Committee agreed that if a woman does not fight back physically, it is not rape.

Graph 23: Members of community organisations on sexual violence



Driver #4: Male peer relations that promote aggression, dominance, and disrespect towards women

Male peer relationships which promote aggression, dominance, and disrespect towards women can be associated with violence against women.⁴⁹ The dynamics of peer relationships was not explored in depth in this study, but the focus group discussions did examine the reaction of the husband's friends to his behaviour in the hypothetical scenario. 14% of participants indicated the husband did the right thing quarrelling with his wife. Notably, 36% of these participants responded that their friend would think the husband did the right thing because he did not use violence. This demonstrates emotional violence is less likely to be viewed as a form of violence within peer groups. Other participants agreed that a friend would think the husband did the right thing scolding his wife for a number of reasons including ignoring chores and not informing him of her whereabouts. 11% of participants responded that a friend would think the wife did the wrong thing including because she did not perform her household and caring duties (22%) and did not inform her husband (22%). However, significantly, more than 40% of participants indicated the husband's friends would not agree with his actions (husband did the wrong thing (34%) and wife did the right thing (6%)).

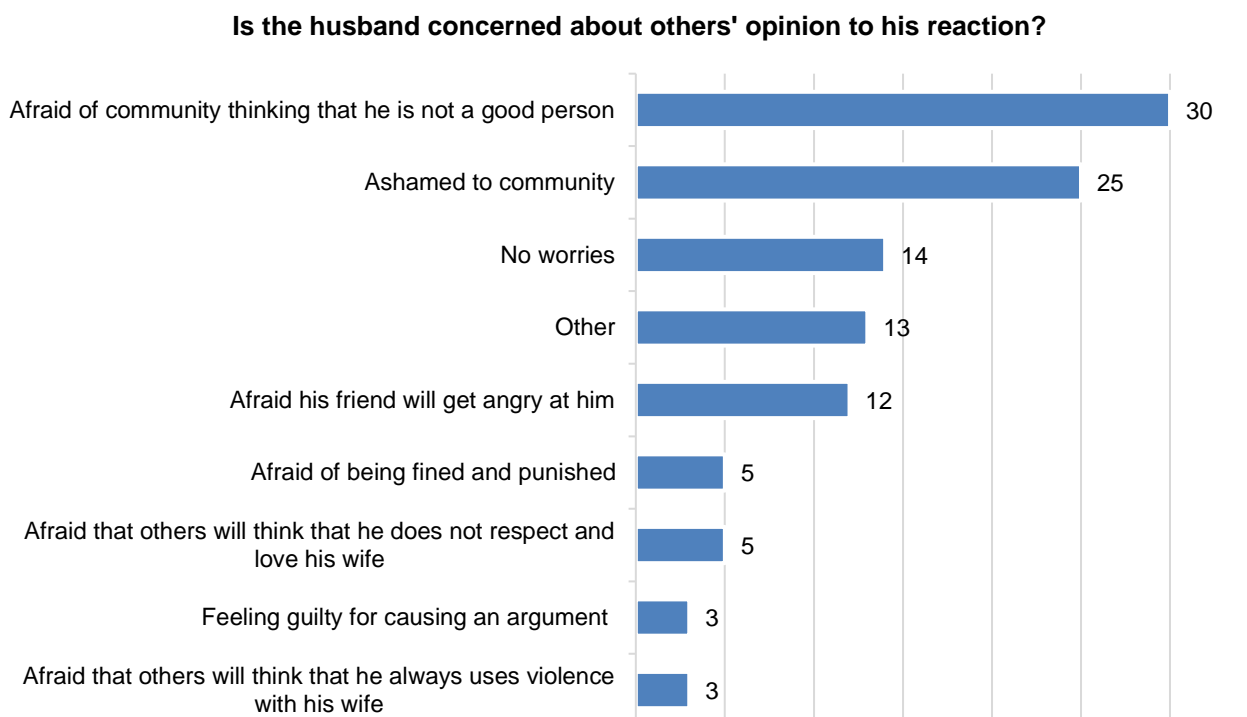
Graph 24: Focus group discussion on the views of male peers



Focus group participants also suggested that Ka would be concerned about what others thought of his actions. This suggests there is regard for peer and community expectations which shapes behaviour. It also indicates that when violence is perpetrated there will be pressure for this to remain a private matter, with men fearing community and peer reactions.

⁴⁹ Willie, T. & Khondkaryan, E. & Callands, T. & Kershaw, T. 2018. "Think Like a Man": How Sexual Cultural Scripting and Masculinity Influence Changes in Men's Use of Intimate Partner Violence. *American Journal of Community Psychology*.

Graph 25: Focus group discussion on the views of male peers



Other reinforcing factors

In addition to the drivers of gender-based violence, there are also factors which can contribute to or reinforce the wider context of gender inequality and therefore exacerbate GBV and its impacts. There are a number of reinforcing factors, including factors that weaken pro-social behaviour. Pro-social behaviour is behaviour that is intended to benefit others and society as a whole, such as behaviour that shows respect and care for women. Factors which have been shown to weaken this behaviour, and therefore exacerbate GBV, include poverty, isolation, alcohol, gambling, and natural disasters and crises (such as the COVID-19 pandemic).⁵⁰

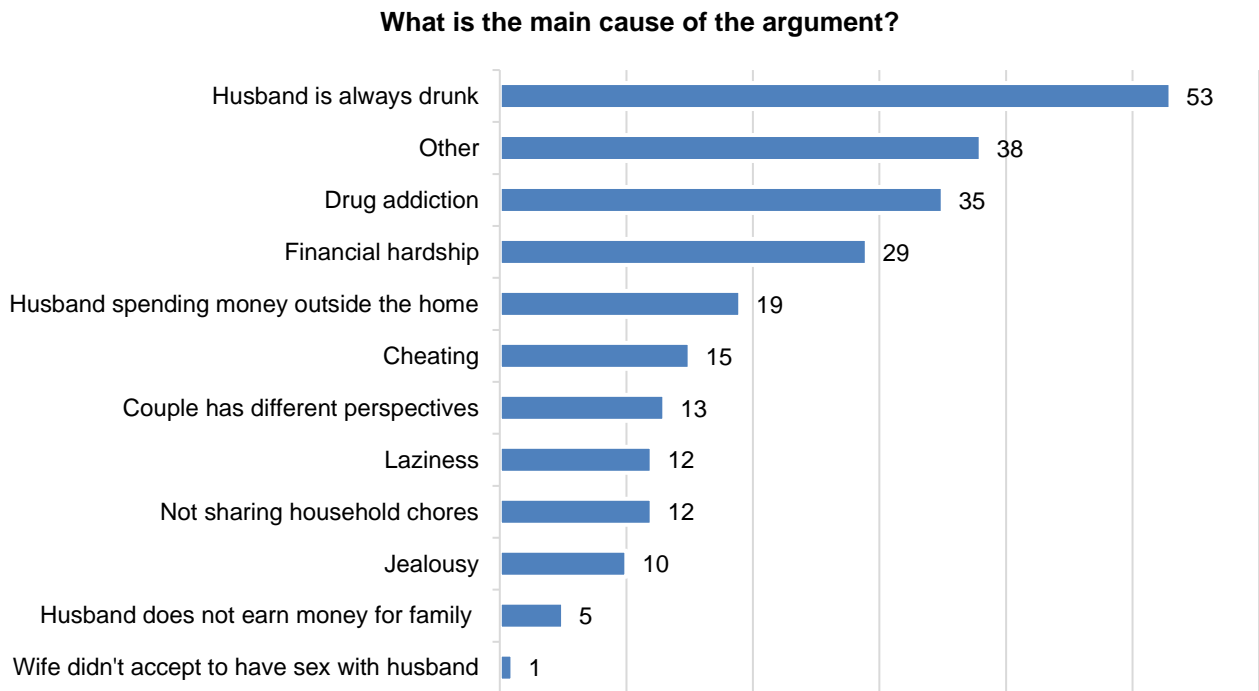


Women are writing their action plan and share with their husbands to reduce violence in the family.

Focus group participants were asked about the main cause of domestic arguments in their community. Excessive use of drugs (14%) and alcohol (19%) were identified by a large number of participants, as well as financial hardship (12%), laziness (5%) and cheating (8%) and jealousy (6%).

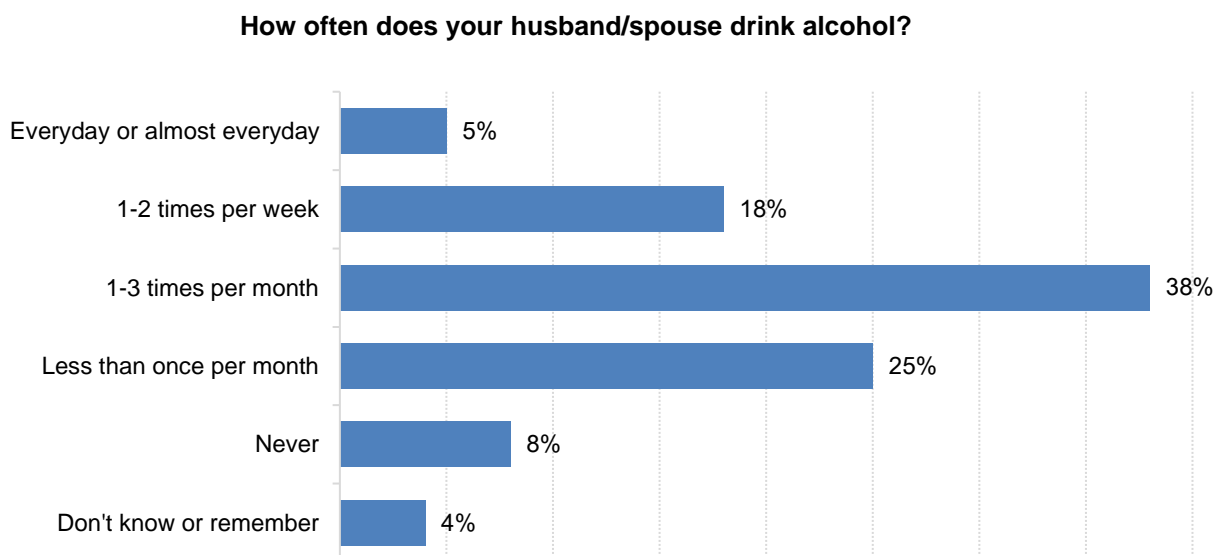
⁵⁰ See for example, Laslett, A., Graham, K., Wilson, I., Kuntsche, S., Fulu, E., Jewkes, R., & Taft, A. 2021. Does drinking modify the relationship between men’s gender-inequitable attitudes and their perpetration of intimate partner violence? A meta-analysis of surveys of men from seven countries in the Asia Pacific region.

Graph 26: Focus group discussion on reinforcing factors

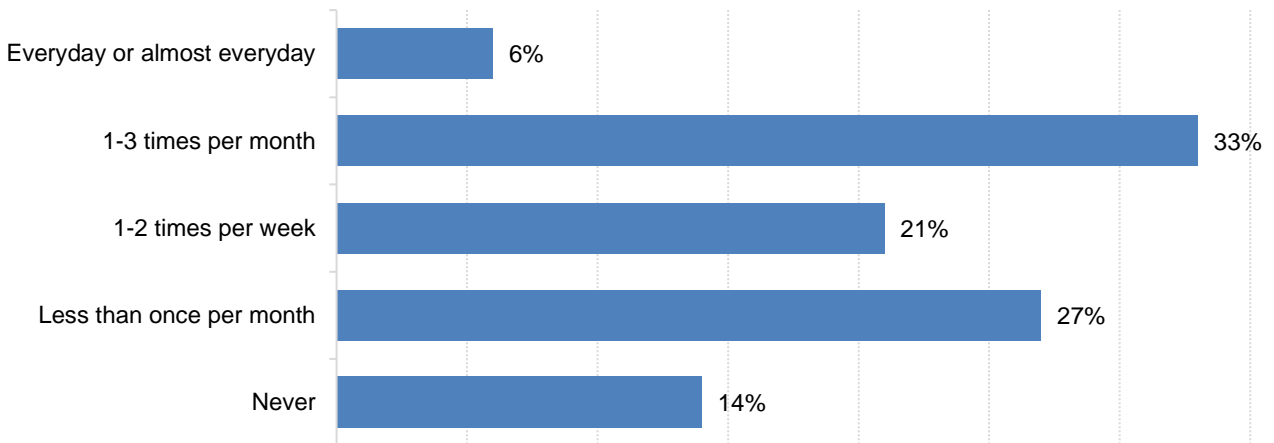


Key informants also noted the impacts of alcohol and drug-use. As one key informant described, “*There are many young married couples who have separated or divorced through violence caused by narcotics, gambling, and family economic problems.*” For female participants, one in five participants indicated their partners were intoxicated once a week or more.

Graph 27: Female participants’ experiences of their partner’s alcohol consumption



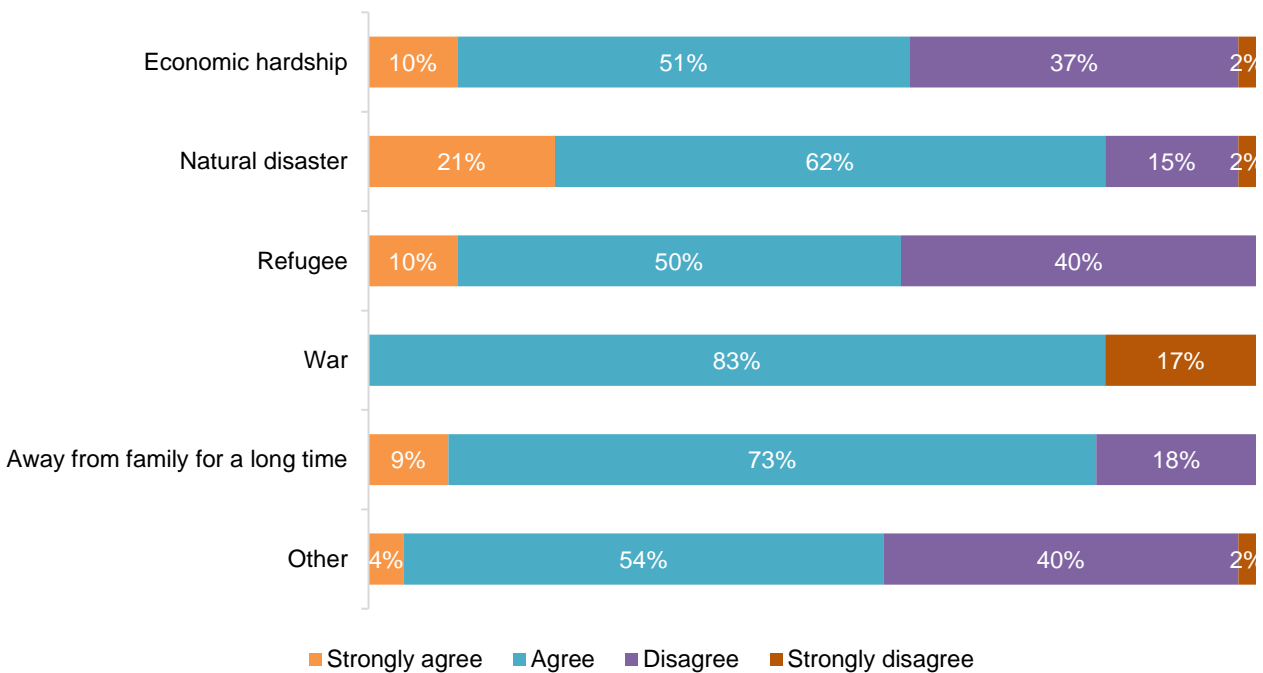
How often have you seen your husband/spouse drunk in the past 12 months?



The survey data also revealed that 83% of men who indicated that they had experienced war agreed with the statement that men should make the final decision in a household, 73% of men who had been away from their family for a long time and 62% of men who had experienced natural disaster also agreed.

Graph 28: Men’s experience of adversity on household decision making

Men who experienced adversity on whether men should make the final decision



Interestingly men who had been away from their family for a long time as well as those who had been refugees were less likely to agree with the statement that women should endure violence to keep the family together. More than half of the men who had been affected by war or natural disaster agreed with this statement. These men were also more likely to agree with the statement that if a woman does not fight physically, it will not be rape. This suggests that the gendered impacts of war and natural disaster impact on, and perhaps normalise, violence against women for these participants.

Legal Literacy on GBV

In Lao PDR, the 2014 *Law on Preventing and Combatting Violence against Women and Children* prohibits different forms of violence, including physical, psychological, sexual and economic violence.⁵¹ Furthermore, specific forms of violence are prohibited under the *Penal Code* (updated 2019) such as rape, domestic violence, and sexual harassment. The 2013 *Labour Law* provides some protection against sexual harassment, and the 1990 *Family Law* prohibits underage and/or forced marriages. The Government of Lao PDR ratified the Second NAPVAW which outlines actions to address and prevent violence against women and girls, including through the provision of social and health services, legal systems, policing, training, and advocacy.

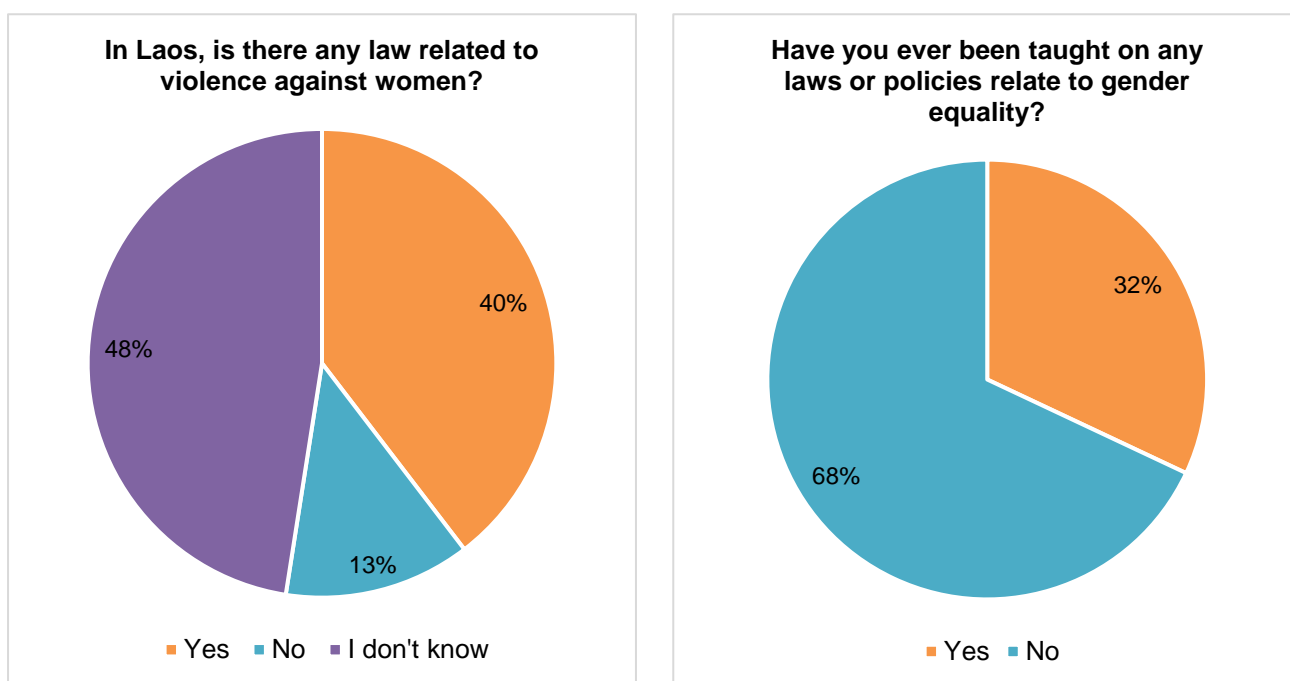
Knowledge of the Law

Despite the range of laws against GBV, this study found that almost half of all men did not have knowledge of these laws, and that 13% of men mistakenly believed that Laos did not have any laws related to violence against women. Just under half (40%) of men were aware that there were laws prohibiting GBV, which corresponds roughly to the number of men who reported having received teaching on these laws and policies (32%). However, two-thirds of respondents (67%) reported that they have never been taught the laws or policies related to GBV.

Due to the low legal literacy rate, most men (86%) were unable to answer whether they believed the current laws were suitable. Most men (86%) were also unable to answer when questioned about the importance of these laws. This indicates that an important intervention to increasing the legal literacy among men on GBV-related laws is the dissemination of accessible information on these laws, what they mean, and to whom they apply.

The survey also found that 60% of women were aware of GBV-related laws, 29% were unsure, and 12% believed that there were no laws prohibiting GBV.

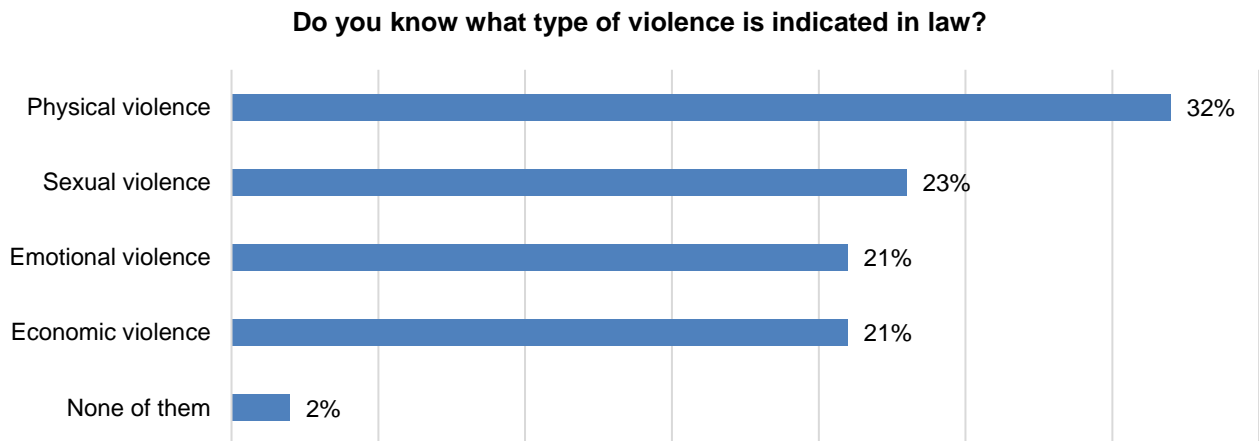
Graph 29: Men's understanding of the existence of laws against GBV in Lao PDR



⁵¹ [Law on Preventing and Combatting Violence against Women and Children 2014](#)

When questioned on the types of violence that men believed were prohibited under the law, the following were identified in descending order: (i) physical violence (32%); (ii) sexual violence (23%); and, emotional violence and socio-economic violence (both 21%). This does reflect the legislation in Laos, in which physical and sexual violence are prohibited the most broadly across different laws.

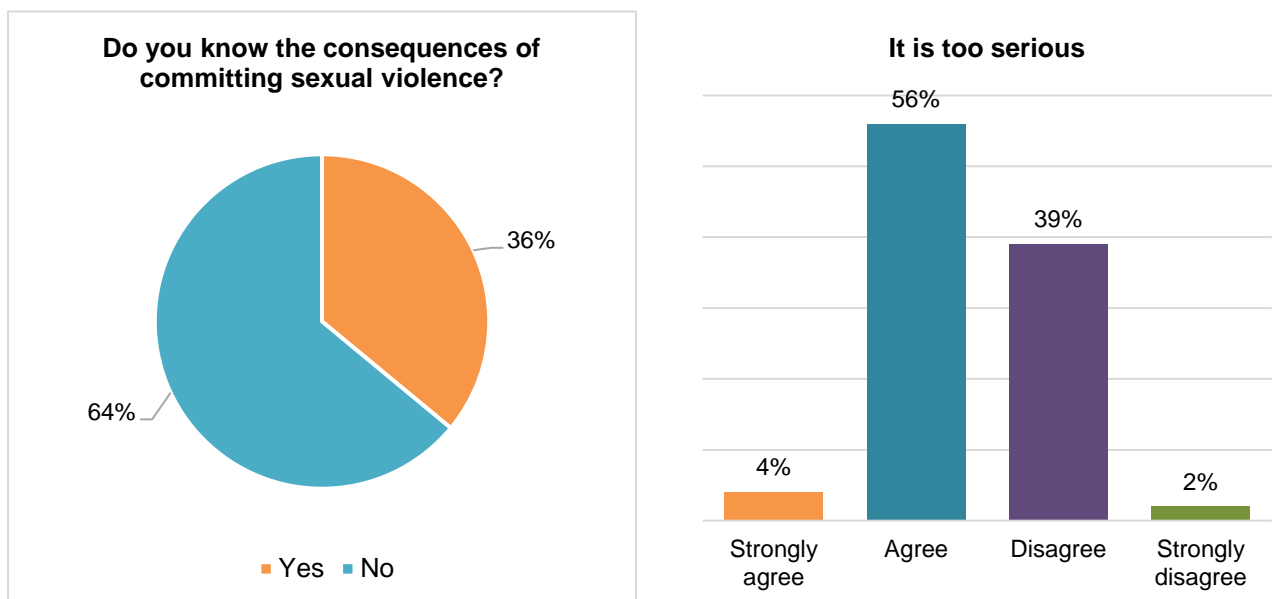
Graph 30: Men’s understanding on the types of GBV prohibited under the law in Lao PDR



Under the updated *Penal Code*, rape is punishable by 4 to 6 years imprisonment and a fine of 5-30 million Kip (Art. 248). In addition, under Article 252, marital rape is punishable by 3 months to 1 year imprisonment (and up to 5 years if causing serious injury) and fines from 500,000 to 3 million Kip. Rape of minors (12 to 15 years) is also punishable by 1 to 3 years imprisonment and a fine of 3-5 million Kip (Art. 250). Despite the punishments set in the law, the level of prosecution and conviction is low.

In regard to understanding the punishment for sexual violence, most men (64%) were unaware of the consequences. However, for those that did understand the consequences, most men (almost 60%) agreed or totally agreed that the consequences were too severe.

Graph 31: Men’s views on laws regarding sexual violence in Lao PDR



Perceptions on the Effectiveness of the Law

In the focus group discussions, some men (10%) believed that laws may prevent violence from occurring, and 43% believed these laws may contribute to decreasing violence. A small percentage (4%) believe that these laws would not have an impact, and a significant number of respondents (40%) were unable to answer this question.

Although only a small percentage (7%) of male community members in focus group discussions nominated laws and regulations as a way to prevent GBV, most (two-thirds) of community leaders interviewed suggested that better understanding and enforcement of laws would be one of the best measures to prevent

GBV. One community leader reflected that *“we always thought that if the laws are well explained at the village level, the situation could be calmer.”* Another community leader suggested that *“there are various methods to stop violence against women. But providing knowledge on the law on gender equality, and appropriate and on time punishment and prosecution of perpetrators would be a sustainable solution.”* Community leaders believed that greater knowledge of the law among men, younger people (as the next generation), and older people (to address traditional cultural beliefs) was important, as well as awareness raising on the law across district, provincial, and village levels.

Responding to and Preventing GBV

This study also sought to understand participants’ knowledge and perspective in relation to responding to and preventing GBV.

Key informants were asked about the existence of support for women experiencing GBV. A range of organisations were identified as providing services for survivors of GBV including the village, district and provincial women’s union, village authority, village security, police, prosecuting attorney, community organisations, and the courts. One informant noted in their province that the women’s union provided counselling services and an emergency hotline. Health offices and hospitals were also identified. These were seen as playing an important role in prevention but having less capacity and training in responding to GBV. Parents were also mentioned as a source of support. One key informant noted that services were difficult to access in rural areas and the most accessible source of support would be the local village authority. This was seen as problematic given the focus on upholding village traditions / social standards by local authorities which is unlikely to support the rights of survivors.⁵²



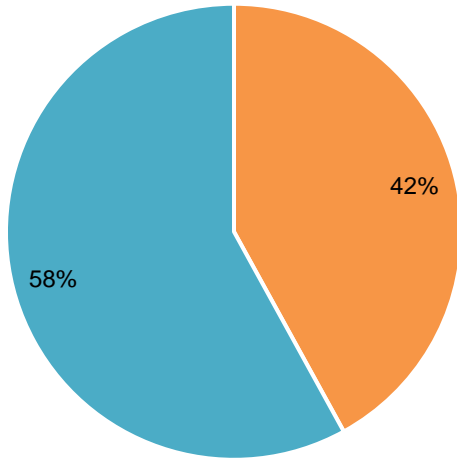
A couple after attending a workshop on Gender Equality in the Relationship

58% of participants in the men’s survey responded that they knew of a method to support women experiencing GBV. However, the survey did not elaborate on what these methods were. This result demonstrates that a large proportion (more than 40% of male participants) do not know of any support available for women experiencing GBV. In the women’s survey, only 27% of participants said that they knew of a method of support. One third did not know and a further 40% did not respond to this question. This suggests there is a need to increase women’s awareness of available support services.

⁵² Key informant interview, KII-LNT-13-B1-06.

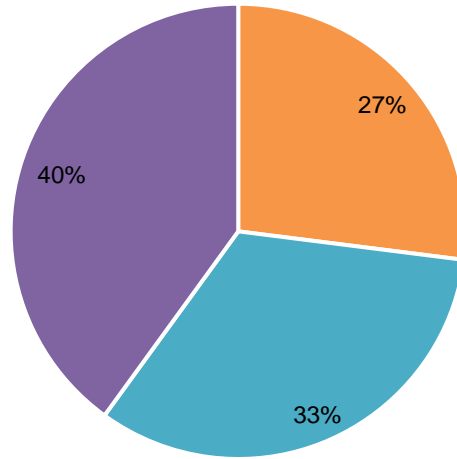
Graph 32: Men (left) and women (right) participants knowledge of support services for GBV

Men on whether they know any methods to support women who have experienced GBV



■ Yes ■ No

Women on whether they know any methods to support women who have experienced GBV



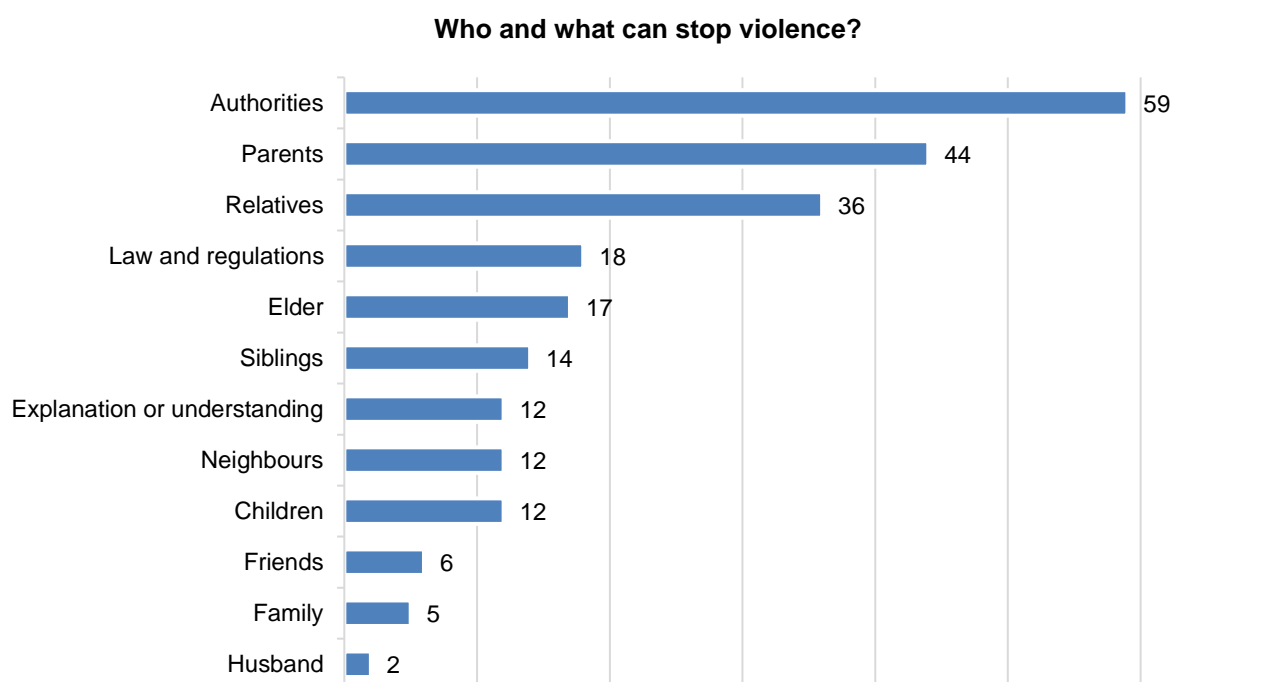
■ Yes ■ No ■ No response

Understanding of the laws to address GBV and responses provided under the law were discussed in the previous section. However, access to justice remains limited. One key informant noted that a woman was unlikely to support prosecution of her husband because of a fear of disturbing the culture and her community, particularly when she does not know the law on violence.⁵³ Many of the responses by key informants indicated the first step would be to educate the perpetrator, and then, in more 'serious cases', prosecution and imprisonment may apply. Fines and divorce were also noted as potential consequences.

During the focus group discussions, male participants spoke about who and what could stop violence among couples. Almost one in four participants identified authorities as being able to stop intimate partner violence. Family members including parents (identified by 18% of participants), siblings (6%) and relatives (15%) were also seen as key to stopping violence. Law and regulations were identified by 7% and increased understanding by 5% of participants as being able to stop violence. These results indicate the important role of authorities and the need to ensure these village-level bodies are taking a survivor-centred and rights-based approach to GBV. In addition, the fact that such a high number of participants described the extended family as being able to stop violence highlights the continued focus on intimate partner violence as a family matter. It underlines the need for education about the laws in relation to GBV and gender equality more broadly, and the importance of ensuring survivors know where to access support.

⁵³ Key informant interview, KII-LNT-13-B1-06

Graph 33: Participants' views on who and what can stop violence



Key informants identified a number of strategies to respond to and prevent GBV. These included:

- **Educating community members to increase understanding of gender equality, inequitable gender roles, GBV, and the impacts of GBV for women and the community.**

Key informants suggested that education was needed to challenge inequitable gender roles and to address forms of masculinity that are associated with control, dominance, and aggression. As one key informant remarked, “Men should be made aware so that they do not think that men always dominate women. The husband should support his wife, respect each other.”⁵⁴ Another stated that “men have to change their perspectives to women, such as women are weak and unable to protect themselves. Men have to know women’s rights [...] accept decision making by women, listen to women’s issues and try to find solutions, and promote gender equality.”⁵⁵

A number of priority groups were identified to target in education programmes and campaigns:

- **Young people** – shaping attitudes at a young age was seen as crucial by a number of key informants.
- **Older people** – the older generation was seen as more likely to believe in traditional gender roles and practices and therefore perpetuate them.
- **Male leaders** – education about gender equality and GBV was identified as important among male leaders, including high ranking government officials and village authorities / chiefs because of their power and influence within the community. A key informant explained “there are many leaders who have power but lack knowledge.”
- **Rural areas** – were noted as lacking awareness raising activities in relation to GBV and gender equality including the laws relating to GBV. It was suggested by one key informant that community radio may be a good avenue to reach the community at the village level.

⁵⁴ Key informant interview, KII-SNK-23-09

⁵⁵ Key informant interview, KII-VTE-2022-08-22

A number of strategies were proposed including creating an awareness network, advertising on radio, television and in social media, and organising events in daily life such as an opera scene related to GBV. A national gender equality campaign which involved men and was led by high profile leaders was also suggested.

- **Inclusion of gender equality and GBV in the school curriculum**

It was proposed that awareness raising with young children was crucial to change gender roles and attitudes towards violence. One proposal was the inclusion of gender equality, positive relationships and addressing GBV in the school curriculum.

- **Government resourcing and prioritisation**

Key informants also recognised the need for government implementation mechanisms and resourcing including establishing a national committee for promoting gender equality and allocating budget specifically to support programmes to address GBV at all levels. It was also proposed that greater human resources were required including recruiting a dedicated female staff member in the Women's Protection Project to work on promoting women's participation in justice at the district, provincial, and village levels.

- **Disseminating information on the laws preventing GBV and enforcement of the law**

Key informants emphasised the importance of disseminating information about the laws relating to GBV and the punishment for perpetrators under the law. It was suggested village level regulations could be created. However, it is not recommended to create informal justice processes that may undermine the formal justice process. The importance of enforcement of the law was also noted and the need to support the capacity of law enforcement. As one key informant described, "*the authorities have defined the law well, but enforcement at the district and community levels remains weak.*"⁵⁶

- **Making men part of the solution**

Key informants were asked about actions which could be taken by men in the community. There was agreement that including men in raising awareness and changing attitudes towards GBV was important. Several key informants noted that as men were the main perpetrators of GBV, they need to be involved in the solution. As one key informant described, "*Men must understand and change their behaviour for gender equality.*"⁵⁷

Suggestions included involving men in the community in creating communications materials, leading community activities related to addressing GBV, and making announcements to promote gender equality through the village loudspeakers once a week. The importance of men acting as role models was highlighted. As one key informant stated, "*We hope to see a male leader who is conscious and seriously promoting gender equality and setting it as the main priority.*"

- **Bystander intervention**

The role of everyone in the community – both men and women – was noted as key to changing attitudes and behaviours. This includes third parties challenging discriminatory attitudes and perpetrators of violence. As one key informant commented, "*a third person can help to dissuade violence and prevent severe violence.*"

⁵⁶ Key informant interview, KII-SNK--21-08

⁵⁷ Key informant interview, KII-LNT-13-B1-06

- **Positive relationships between intimate partners**

Key informants also emphasised the importance of cultivating a positive relationship between intimate partners which is based on respect and equality. Examples given included sharing household chores, respecting decision making by women, and only having one wife / husband. Gender equality training for couples was also recommended as a possible action.

- **Responding to the needs of survivors of GBV**

The needs of survivors of violence were also recognised by some key informants including provision of safe accommodation, resourcing for support services and equipment, money to enable survivors to travel to hospital, and programmes to support women to be financially independent including skills development.⁵⁸

⁵⁸ Key informant interview, KII-ODX-18-C1-05

Conclusions

“Men must understand and change their behaviour for gender equality.”⁵⁹

This study commissioned by UNDP aimed to contribute to the existing evidence base by exploring the perceptions and beliefs of men in relation to GBV in Lao PDR in order to inform their support to the Government in preventing and responding to GBV. Drawing on key informant interviews, men’s and women’s survey, and focus group discussions, it examined the gendered norms within the household and the community which contribute to acceptance of violence in Vientiane, Phongsaly, Oudomxay, and Savannakhet Provinces.

This study did not set out to measure the prevalence of GBV. However, data which was collected revealed prevalence rates which roughly correspond to other, more thorough, studies of GBV in Laos.

This study sought to understand men’s awareness of GBV in the community including the different forms violence can take and the consequences of this violence to gain insight into the deterrents that could prevent violence from occurring in the first place. Findings suggest that both men and women understand abstract ideas of gender equality with 95% of men and 90% of women responding that they believed that men and women should be treated the same way. There was also evidence that community members have been exposed to information about GBV, with at least some awareness of the existence of violence against women. Responses also demonstrated some understanding of the causes and consequences for women of GBV. However, only some forms of GBV were readily identified as violence. For example, there was some indication that emotional violence is seen as less severe than other forms of violence.

A central focus of this research study was to examine the patriarchal norms and other factors which are related to men’s awareness and perpetration of GBV in Lao PDR in order to better understand and identify key areas for advocacy work. The results of the study demonstrate the existence of patriarchal norms which support the four drivers of violence against women:

Condoning violence

- A large proportion of both men and women believe that in certain circumstances gender-based violence, and particularly intimate partner violence, is acceptable such as if a woman makes a mistake, fails to perform her domestic chores, does not inform her husband of her whereabouts, or if she refuses to have sex with her husband.
- It was also a commonly held belief that a woman should endure violence if necessary, to keep her family together and that violence is a private matter which should remain within the household.

Men have power and control over women in public and private life

- The survey explored controlling behaviour within intimate partner relationships. This revealed a perception that woman should obey her husband and should not refuse to have sex with her husband.
- Responses also suggested the behaviour of a substantial proportion of women, in terms of social contact and what they wear, is controlled by their partner.
- The survey revealed that three quarters of men believed that men should have the final say in making household decisions. Almost half of the women surveyed also believed that their husband/partner had more rights than they did to share ideas regarding decision making, which impacted on their family.
- Despite this finding, when participants were asked who made decisions in relation to certain aspects of family life, most decisions were described as being made jointly. However, this did not reflect the reality

⁵⁹ Key informant interview, KII-LNT-13-B1-06

of decisions made and notably, also included decisions in relation to women's health, highlighting many women may not have control over their own reproductive health and rights.

Rigid gender stereotypes and dominant forms of masculinity

- There was a consensus that men and women should share household tasks. In practice though, evidence suggested that women still undertake a disproportionate share of domestic chores, except for childcare which appeared to be shared more equally.
- Notwithstanding the actual division of household tasks, there is a perception that domestic duties are a woman's role, with two-thirds of men agreeing that a woman's most important role is taking care of the household and preparing food for her family.
- A failure to perform domestic chores or childcare was viewed by some participants as justification for violence.
- Socially dominant forms of masculinity of privilege, control, dominance, and subordination of women, such as men being the head of the household, were also evident in the study findings.

Male peer relations promote aggression, dominance, and disrespect towards women

- The dynamics of peer relationships were not explored in depth in this study, but the focus group discussions suggested peer and community expectations do shape behaviour.
- Responses also indicated that emotional violence is less likely to be viewed as a form of violence within peer groups.

The study also explored other factors such as poverty, alcohol, drug-use and natural disasters and crises, which can contribute to or reinforce the wider context of gender inequality and, therefore, exacerbate GBV and its impacts. Interestingly, the study demonstrated that men who had experienced war and natural disasters were more likely to agree that women should endure violence to keep the family together and that if a woman does not fight physically, it will not be rape. Drugs and alcohol were also seen as having a detrimental impact on positive relationships between intimate partners.

This research study also explored the legal literacy of participants. Despite the range of laws against GBV, this study found that almost half of all men did not have knowledge of these laws. Due to the low legal literacy rate, most men were unable to answer whether they believed the current laws were suitable. In regard to understanding the punishment for sexual violence, most men (64%) were unaware of the consequences. However, for those that did understand the consequences, most men agreed or totally agreed that the consequences were too severe.

Finally, the study sought to examine participants' knowledge and perspective in relation to responding to and preventing GBV. More than 40% of male survey participants did not know of any method of support for women experiencing violence. During the focus group discussions, male participants discussed who and what could stop violence among couples. Authorities and family members were identified as having an important role in preventing violence and the need to ensure these village-level bodies are taking a survivor-centred and rights-based approach to GBV. Key informants suggested a number of strategies to respond to and prevent GBV and these proposals have informed the recommendations in this report.

Recommendations

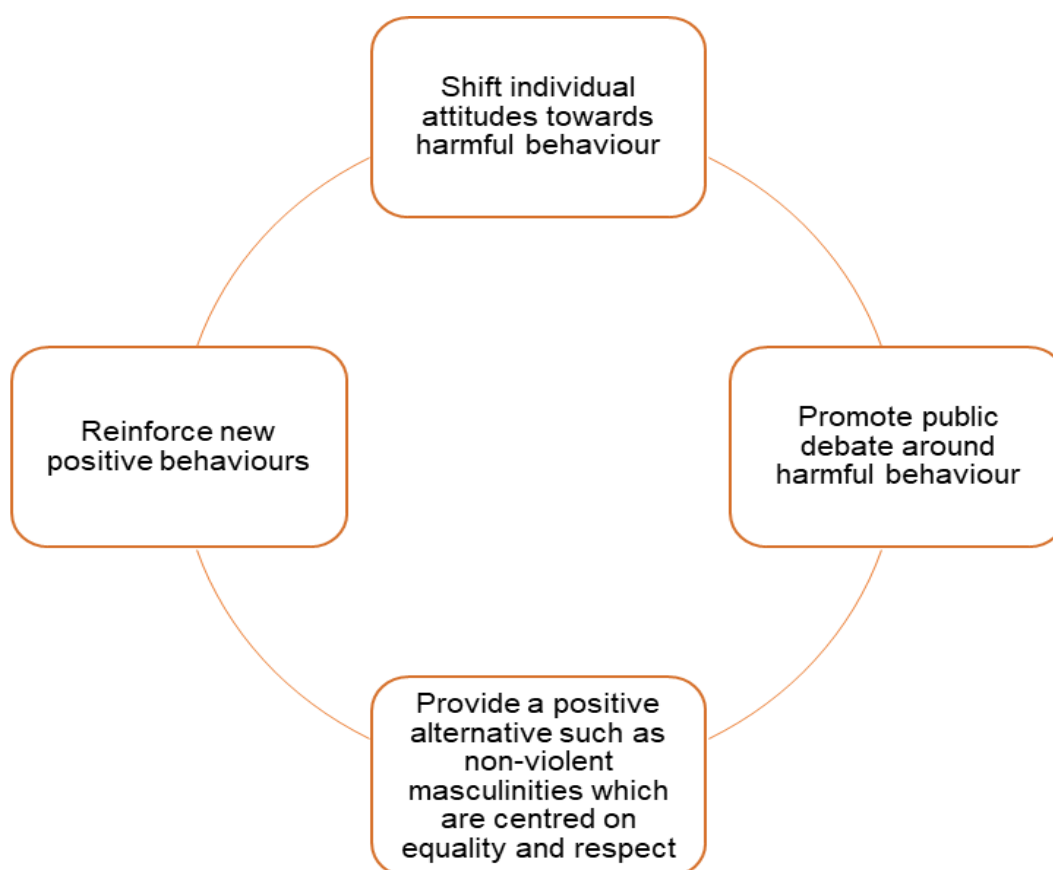
The results of this study indicate the importance of understanding male attitudes and perceptions in relation to GBV and how these patriarchal norms contribute to acceptance of violence against women. These insights can inform interventions to engage men and boys in the prevention of GBV and efforts to shift patriarchal norms across all levels of Lao society.

This section sets out a framework for shifting patriarchal social norms which could be integrated into programmes and policies. It then outlines recommendations for practical actions to be taken across government and by local and international development actors.

A framework for shifting patriarchal social norms

Changing social norms is a complex and long-term process. However, there is a growing evidence base as to approaches which may work to shift harmful social norms.⁶⁰ Understanding this framework and integrating it into programmes and policies is integral to long term change.

Figure 3: Framework for shifting social norms



Shift individual attitudes towards the harmful behaviour

- Address misconceptions such as certain types of violence not being viewed as violence.

⁶⁰ This section draws on Alexander-Scott, M. Bell, E. and Holden, J. 2016. DFID Guidance Note: Shifting Social Norms to Tackle Violence Against Women and Girls (VAWG). London: VAWG Helpdesk.

- Provide examples of the harm caused by GBV (such as the mental and physical consequences for women and children).
- Raise awareness of the contradiction with other norms such as the traditional beliefs in Lao related to respect and equality and the laws relating to GBV.
- Reframe the issue in a new way such as the positive impact of men sharing household duties and childcare.
- Highlight differences in opinions, such as the survey results demonstrating the high levels of belief in gender equality and the fact that most of male and female respondents disagreed with the statement that sometimes a woman deserves to be beaten.

Promote public debate around the harmful behaviour

- Ensure individuals can see and hear from others in the community who may be changing their opinions towards GBV. This could include village leaders, religious leaders, and other male role models.
- Provide opportunities for communities to change together through discussing and reflecting on messages such as in community workshops, group discussions, and mass media such as radio call-in shows.

Provide a positive alternative

- Programmes should provide alternatives to harmful norms. This can make change easier and will make it harder for harmful behaviours to return. For example, non-violent masculinities which are centred on equality and respect or behaviour such as opting for non-violent conflict resolution and being an engaged and supportive father.
- The benefits of the new behaviour should be clearly demonstrated so that people feel they will gain something from shifting to the new norm. For example, the messaging that couples who share household tasks and treat each other with respect are happier.
- The new behaviour should be highly visible such as through repeated messaging across multiple forms of media including radio, television, social media, and during community events.

Reinforce new positive behaviours and norms

- Create rewards such as the esteem and sense of belonging to a group for GBV prevention endorsed by aspirational role models and ambassadors.
- Provide opportunities to practice new behaviour such as programs in schools, sporting programs or peer groups.

Changing the social norms stemming from gender inequality that lead to acceptance of GBV requires long term commitment and coordination across all levels of government and international and national development actors, together with community ownership and mobilisation.

Recommendations for all levels of Government:

Policy reform and coherence:

- Ensure priority actions under the Second National Plan of Action on Preventing and Elimination of Violence Against Women (2021-2025) (NPAVAW), and new policy initiatives such as the three Standard Operating Procedures endorsed in 2022,⁶¹ integrate a prevention approach to address the

⁶¹ Standard Operating Procedures for Coordination, Governance of Coordination and Referral Pathways for Women and Girls Subject to Violence; Standard Operating Procedure for the Social Sector: Protection and Support for Women and Girls Subject to Violence in Lao PDR; and Standard Operating Procedures for Health Facility Response to Violence Against Women.

drivers of GBV including discriminatory beliefs and patriarchal social norms, and engage men in implementation.

- Establish and implement an institutional system including ensuring systematic training/capacity development for duty bearers (including legal and justice actors and law enforcement authorities) on survivor-centred mediation and justice responses, gender equality, GBV, positive masculinities as well as the harmful effect of social norms and toxic masculinity. This should include first responders (such as village leaders and village mediation units) and prioritise the actions in the NPAVAW to build the capacity of VMU members.
- Review the decree on Village Mediation Committees to ensure that the village mediation process prioritises survivor rights over family and community harmony.

Communicating for change:

- Address low legal literacy by disseminating information about laws in relation to GBV in an easily understandable manner in ethnic languages at the community level, through community radio, television, social media, and community events.
- Engage with development actors, including during the 16 days of activism, for a national awareness campaign on GBV, featuring male positive role models to leverage peer relations to promote positive masculinities, and with targeted communication strategies to reach different demographics and rural areas. The development of the national campaign can draw on the results of this survey to ensure messaging targets existing harmful patriarchal norms and should also include the campaign activities outlined in the NPAVAW.
- Create a GBV prevention awareness network, of individuals, organisations and government focal points, at national, provincial, and local levels, with both women and men receiving training and support to advocate and organise community activities in support of the national campaign.
- Ensure that actions in the NPAVAW relating to strengthening the capacity of mass media to address GBV also include training and engagement on the importance of challenging gender roles and promoting non-violent masculinities which are centred on equality and respect such as the benefits of being an engaged and supportive father.

Address data gaps:

- In partnership with the Lao Statistic Bureau, ensure the next LSIS, Census or National Survey on VAW also identifies gaps in GBV data collection and bottlenecks in reporting. Invest in more regular and innovative methods for data collection on social norm change to track change over time.
- Establish a technical GBV data working group to support all levels of government and service providers to respond to the data gaps identified and to manage, collect and analyse GBV data, including data on social norm change and intersectional data to better understand experiences of marginalised groups, including LGBTIQ+ people and Persons with disabilities, in relation to GBV.

Government resourcing and prioritisation:

- Conduct a costing exercise to determine resources needed to provide quality holistic care to survivors and to ensure budget allocation to support GBV interventions including roll-out of the SOP for the Social, Health, and Justice Sectors and actions across sectors in the NPAVAW.
- Provide support to women's rights organisations that have a track-record in challenging discriminatory social norms, such as by enabling access to leadership and decision-making spaces, supporting evidence-based community programming, and creating spaces for the exchange of knowledge and ideas.

Reform across different sectors:

- Prioritise the establishment and national coordination of a high-level steering committee of key ministries across sectors that respond to GBV,⁶² and ensure committee members receive training on gender equality, GBV and positive masculinities.
- Engage with development actors including educational institutions to develop materials and training, curriculum and learning tools to support the integration of gender equality, positive relationships, conflict resolution, and non-violent communication skills education into the school curriculum at primary and secondary levels, and provide gender sensitive teacher training to address stereotypes or harmful gender norms in teaching practices.

Recommendations for international and local development actors:

- Convene a meeting of the GBV Taskforce to specifically consider the findings and recommendations of this study and how this can inform their advocacy agenda and programme design and monitoring and evaluation.
- Support and partner with local community organisations, particularly women's organisations, to advocate for implementation of the priority actions under the NPAVAW, including resourcing and monitoring of impact.
- Support and monitor the roll-out of the SOPs across provinces, including whether there is alignment with prevention efforts and engagement with local community organisations.
- Resource and partner with community organisations to train village leaders, mediation units and other village committee members in gender equality, the drivers of GBV, and survivor-centred responses to violence.
- Facilitate spaces such as community meetings and events to support the proposed national campaign activities, to discuss the results of this survey, and to generate community interest and ownership in GBV prevention.
- Work with male role models and local leaders to promote positive, healthy and caring ways to be a man, using entry points identified in this survey such as a growing awareness of men's responsibilities to assist with household chores and childcare.
- Implement positive relationships programs with couples at the community level.
- Support programs in schools (at all levels), sporting programs or peer groups which promote gender equality and positive masculinities associated with equality and respect.
- Ensure men are involved with designing communications materials and activities to promote positive masculinities and ensure that they are relatable and pre-empt backlash against feminist movements.

⁶² Provided for under the Standard Operating Procedures for Coordination, Governance of Coordination and Referral Pathways for Women and Girls Subject to Violence.

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