Fighting Violence Against Women in Thailand

A REPORT BY
THE OFFICE OF THE NATIONAL COMMISSION ON WOMEN'S AFFAIRS
OFFICE OF THE PERMANENT SECRETARY, PRIME MINISTER'S OFFICE
MARCH 2000
On the cover, Areewan Jatuthong, 27.
Three years ago she filed charges against her husband after he attacked her face with a stick. He had started beating her two months into their marriage, and once, he burned her hand with the car lighter. She left him a few months later. He was sentenced to six years and six months in prison for the abuse.
The following report is based on interviews with activists and key individuals from the fields of criminal justice, social welfare, human rights, health and government who are involved in the effort to eliminate violence against women in Thailand. The report contains detailed accounts of women’s experiences with violence and profiles the laws and existing systems’ responses to the issue. After carefully considering the implications of displaying photographs of the women in our report who have experienced violence, we have chosen to include the photos. It is not our intention to exploit or sensationalize violence against women or to reinforce the shame many women feel. Our goal in presenting the images along with the women’s experiences is to raise awareness of the reality of these crimes.

The women who agreed to share their experiences for this report are clients at crisis centers in Bangkok. Full informed consent was obtained from them. They wanted to express that what has been done to them is unacceptable and can no longer be protected by silence. Though most of the women did not want to be recognized in the photos, they wanted the public to know their abusive experiences belong to someone. In the case of the woman brutally beaten three days earlier and whose eyes were left bruised, she wanted to show the physical damage. Although most Thai people acknowledge that violence against women, particularly domestic violence, is widespread, we believe it is easy to ignore its severity until it is personalized.

The women in our report are survivors, as are all women who have experienced abuse. We refer to them as “survivors” rather than “victims,” as most groups working on the issue have done. It is a way of empowering women and countering the shame.

We also recognize the prevalence of crimes against children. Discrimination, sexual slavery and trafficking are common problems affecting many young girls, and violence against women, in general, negatively impacts children’s development. However this report, in its brevity, focuses on the complex and distinct issues women face that we believe require a deeper understanding in order to develop effective strategies for change. Although our emphasis is on women, this report includes areas that relate to children’s issues, which are addressed in The National Plan.

We wish to acknowledge with gratitude the financial support provided by The World Bank to make this report possible. It is our hope that the report promotes greater dialogue among individuals and groups concerned about combating violence against women to further the development and implementation of plans of action. Little empirical information is available about the state of violence against women in Thailand. It is an issue that needs more in-depth study so that a more complete picture of the problem can emerge.

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The prevalence of gender-based violence as a global phenomenon is suggested by a multitude of international reports on the status of women from developing and industrialized countries. These reports indicate that violence against women occurs in several forms including intimate partner violence or wife abuse, homicide in the family, sexual harassment, sexual assault, forced prostitution and rape. The most pervasive form of violence against women is abuse by a husband or intimate male partner. Violence against women has become increasingly recognized as deserving of international concern and action.

The United Nations defines gender-based abuse as:

“Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, or coercion or arbitrary deprivations of liberty, whether occurring in public or private life.”

Besides obvious health consequences resulting from physical, psychological and sexual abuse, the World Bank in 1993 estimated that rape and domestic violence take away almost one in every five healthy years of life for women aged 15 to 44 in industrialized countries. On a per capita basis, the health burden of domestic violence is about the same for reproductive-age women in both developed and developing countries. Consequently, violence against women poses a serious obstacle to women’s development in general. When women are faced with violence, they are unable to fully participate in activities related to environmental, economic, social and political development.

“In the United States, 28% of women report at least one episode of physical violence of those, 58% report that they were beaten often or sometimes.”

“In Thailand, lifetime.”
As in many countries around the world, the issue of violence against women in Thailand was unknown in the public sphere as women suffering from abuse were tolerating their situation in silence. Perpetrators were unpunished. Public awareness of violence against women in Thailand first began in the late 1980’s when medical staff in hospitals and child-protection workers discovered links between cases of child abuse to histories of wife abuse in the family. Some extreme cases also gained media attention. NGOs committed to women’s issues broke the silence in Thai society by advocating for women and educating the public about the problem. However, most cases of violence still are not reported to authorities due to a lack of effective system response. With no reliable statistics existing, the severity and scope of the problem remains unclear. The combination of underreporting and poor statistical data has helped to limit awareness of the problem in the public sphere. The government’s policy response also has been limited because of the lack of information.

The interplay among personal, socio-cultural, structural and environmental factors that influence violence against women is illustrated by the experience of Thailand during the economic crisis. The current economic crisis has lowered incomes and raised unemployment levels, which has placed an unusually high degree of stress on families. Stress in some families at all economic levels manifests as abuse in the household.

This report explores the situation of violence against women in Thailand by documenting some women’s experiences with violence, various forms of response and strategies to combat the problem.
In late 1998, Dao* rang an apartment house doorbell. She told the pretty woman who answered she wanted to speak with her husband. When he appeared, she stood her ground. “Choose one of us,” she insisted.

Dao had only recently discovered her husband’s other life. For the previous eight years, his work as a government lawyer had located him in a northern city. She stayed behind in their suburban Bangkok home and they saw each other twice a month. (Later she learned he also had had a second family in the North.) After being shifted back to Bangkok, she had noticed different behavior. He took an apartment in the city, but refused to tell her the address or phone number. He said he needed it for when he worked late. She found hairs and perfume scents in their car. There were times when their son was sick and he refused to take him to the doctor. When a strange number appeared on the phone bill, she tracked down his apartment.

She chose to confront him there so that he couldn’t deny anything. Dej* left his girlfriend at the apartment and followed Dao to their house. “She’s nothing to me - just a thing I have for fun,” he said of his girlfriend, who lived in the apartment for which he paid the rent. “When I am bored, I will give her to my assistant.”

“He is not a gentleman,” Dao told herself. She felt disgust with what she saw as her husband’s true character. But she didn’t threaten to leave. Instead, she asked that he put their son’s name as owner of some of their property, to guarantee that he would have some financial security in the future. He refused at first but eventually agreed. Then he presented his own deal: He wanted to live with the younger woman for two more years to help her finish her university education.

“I’m the mother taking care of our child. He’s the father and wants to take care of another wife,” she thought. A few days later, she went back to the apartment to speak to the younger woman. “I have poor health. My son is not well. I have to travel by bus. He sends you by car,” Dao told her. She asked for pity and that the young woman leave Dej. A few months later, the girlfriend moved out.

Furious and hurt, Dej yelled at his wife. He didn’t come home for several days. When he returned, his anger was extreme. Dao was out. He waited. When she walked in, he asked where she had been. “Why did you leave my son alone? Are you going to have a new husband?” Then he attacked her. He held a gun to Dao’s head, yanked her head around by her hair and slammed his palm across her face several times. He rammed her head against the wall as well. “Why can’t I have so many wives?” he shouted. Their son, then nine, watched that first beating and cried.

When his anger subsided, Dej hugged Dao and apologized. “I love you,” he said. Dao thought of the other woman’s beauty and thought of herself as not worthy of him. But he seemed overly remorseful about his infidelity. She accepted his apology.
For months after that, Dao worked hard to make their family life look good. She redecorated their home. She had cosmetic surgery so that he would feel he had a “good-looking” wife. When he saw her new nose, he told her it was ugly. She was miserable. “I wanted to kill myself and my son.” She called to her boy and put a belt around his neck. Not sure what she was doing, he asked if he could finish his homework first. “I have no right to do this,” she realized and dropped into a chair sobbing.

Nothing she did made much difference. Dej drank often. He found another girlfriend. He’d stay gone for days. Sometimes he would tell Dao, “I hate you. I don’t want to touch you.” Four more times he beat her. Each time seemed worse than the last. “Dad, don’t beat Mom,” her son yelled, scared, after the second time. The third time Dej threw Dao to the ground and kicked her in the chest. Dao started throwing the TV and their son’s toys to break them, to stop the fury. He accused her of listening to jealous people and argued there was nothing wrong with having many wives.

After not seeing him for a month, Dao’s son called his father in October to ask for money for school needs. He wanted a bicycle also, and he wanted to see his father. Dao noticed changes in her son’s behavior. He often seemed angry. He quarreled more frequently with her and made gestures as if he wanted to hit her. When Dao talked to her friends about the abuse, they told her to get out. But her mother advised her to keep the family together and not to make her husband mad.

Dej went to the house after his son’s phone call. He took no bicycle. He gave no money. “This is not fair,” Dao told him. “I do the housekeeping. You leave me alone. I have no job. No income.” She asked for a divorce.

Fuming, he started punching her nose, her mouth and slamming her head against the wall. When he tried to strangle her, she fell. He kicked her. “This is it,” she thought. “He has to leave for good.” The house belonged to her, and she was not giving it up.

He agreed to the divorce but wanted custody of their son. She is fighting back in court. But she is afraid of what he might do next. “I’m afraid he’ll come back to beat me again. If he has a gun, he will shoot me.”

Before this document could be completed, Dao’s husband moved back home. She has dropped her custody suit and to avoid making him angry, she preferred her photograph not be published.

* Not their real names.
Does It Help Or Hurt The Issue?

There are laws against most instances of rape, against sexual harassment and against most forms of domestic violence. So why are women acutely apprehensive about turning to the police when they have been abused?

Firstly, the laws are ambiguous or incomplete and do not confront the complexity of gender-based violence. They are also contradictory because legally, a man can still rape his wife. Secondly, the police have not been properly trained to understand or regard the complexities. Even the specially trained women officers assigned to handle women’s cases are not adequately prepared to deal with the nature of gender-based violence. Lastly, the attitudes among the police, the prosecutors, the judges, society and even the family of abuse survivors encourage women to suffer in silence. Lack of law enforcement is considered a tremendous problem.

Despite the laws that do exist, and even the proposed amendments to revise some of the legislation, the legal perspective takes no care for women’s rights or children’s rights, argues Khun Sanphasit Koompraphant, of the Center for the Protection of Children’s Rights (CPCR). Yet, with few counseling and shelter services available, there are not many alternatives outside of the criminal justice system.

THE LAWS

- Section 295 of Thailand’s Criminal Law Code prescribes fines and imprisonment for committing “bodily harm,” defined as “whoever causes mental or physical injury to another person.” But because it does not specifically refer to violence in the home or between marital and intimate partners, it is open to interpretation. It appears to be seldom used in confronting men, and even some women, with criminal charges for acts of domestic violence.

- Fortunately, domestic violence is considered one of the 10 grounds for divorce within section 1516 of the Civil and Commercial Code on Family. Although, the woman must have evidence of the abuse, such as police or hospital reports. Too often, the women lack evidence because the police do not record incidences of domestic violence that are reported.

The Civil and Commercial Code on Family also allows a spouse to ask for “immediate measures” under section 1530, such as financial support, child custody and freezing of assets, while pursuing divorce proceedings. Oddly, the provision is hardly ever used because awareness of it appears to be extremely low, which may be from the lack of lawyers specializing in family matters.
Sexual harassment has been declared a crime in Thailand only for private sector employees. Government workers are not covered. The law makes filing a case painstaking. The 1997 legislation has been placed within the Protective Labor Law Act, but it carries Criminal Code sanctions so the sexually harassed must file complaints with the police, who then must collect evidence. The burden of proof is on the abused person. In the economic crisis era where jobs are scarce and with only a token monetary payoff, there is little incentive to make a complaint. Proceedings can take up to a year and lawyer’s fees can be costly. If the accused admits his guilt, his fine, which goes to the injured party, is reduced.

Section 276 of The Criminal Law Code states that “Whoever has sexual intercourse with a woman who is not his wife, against her will, by threatening with any means whatsoever, by doing any act of violence, by taking advantage of the woman’s inability to resist, or by causing the woman to mistake him for another person,” is guilty of a crime.

Those few words, “who is not his wife,” contradicts any policy that contends domestic violence will not be tolerated in Thailand. Respect for the rights of women cannot be attained if the country’s criminal code allows violence in the home by allowing men the right to rape their wives.

Section 1516 of the Civil and Criminal Code allows a man to sue his wife on grounds of adultery, but a woman does not have the same right. She must prove that her husband publicly accepts another woman in the role of concubine.

Section 1445 of the Civil and Commercial Code allows a man compensation from any man who has had sexual intercourse with or has raped his wife or fiancée. A woman, however, doesn’t have the same right to make a claim against another woman who had intercourse with her husband. The law ignores women’s rights and perpetuates the perception of wives as commodities.

The Prostitution Prevention and Suppression Act of 1996 decriminalizes sex work by people under age 18 and punishes male customers and parents, guardians and other agents who push children into prostitution.

The Prevention and Suppression of Trafficking in Women and Children Act of 1997, punishes those caught either in the planning process or in the act of trading in people for sexual or labor purposes both domestically and inter-country.

In general, says Khun Sanphasit of the CPCR, "The legal perspective doesn’t regard women’s rights or children’s rights as a whole."

THE PUNISHMENTS

In cases of bodily harm:

1. The police are known to impose a maximum 1,000 baht fine on partners who cause only severe bruising. The money goes to the government.
2. For causing the loss of sight, tongue, hearing, broken limb, less than 20 days hospitalization - maximum fine 4,000 baht and up to two years imprisonment.
3. For causing the loss of sight, tongue, hearing, broken limb, disfigurement, life-long illness, paralysis, mental illness, loss of baby, loss of ability to conceive, more than 20 days hospitalization - no fine and six months to 10 years imprisonment

In cases of rape, there is a fine of 8,000 to 40,000 baht and four to 20 years imprisonment. Teachers and other figures of authority who are found guilty are given another one-third of the sentence.

In cases of sexual harassment, there is up to 20,000 baht fine only. Trafficking in women or children:
In the case of trafficking children under age 15, there is a fine of 14,000 to 40,000 baht and seven to 20 years, or life, imprisonment. For trafficking of women older than 18, there is a 10,000 to 40,000 baht fine and five to 20 years in prison.

There is no counseling or rehabilitation required of any abuser. Anyone accused of a crime who admits guilt likely may have the punishment reduced by half under section 78 of the Criminal Code.

THE ATTITUDES

Spotty enforcement of the laws, contend Thai people working with women and child survivors, is encouraged by a lack of strong condemnation against gender-based violence at the national level. As there is ambiguity with the enforcement of laws, there is no reinforcement that crimes such as domestic violence are indeed crimes and unacceptable, explains Khun Charnchao Chaiyanukij, of the Thailand Criminal Law Institute. Therefore, a perpetuating attitude among law enforcers regards domestic violence as a family issue that should be resolved within the home.

Instead, the police prefer to do little enforcing and to spend more time mediating. There is a general trend to compromise domestic violence cases, and sometimes even rape cases. Says Appeals Court Judge Jarun Pakdithanagoon, noted for his concern about gender-based violence, sending husbands to jail doesn’t help the marital relationship. He also describes a societal fear that if domestic violence is treated
as wrong, most cases might end up in divorce. As for rape, "If the accused is sent to jail, it doesn't make anything better for the victim," he adds, noting that compensation appears to benefit everyone involved.

Some police believe raising the legal issue only aggravates the situation. Others try to minimize their paper work, especially knowing that many women ultimately back out of their complaint. And many women do. They are economically dependent on their husbands. They have few alternatives. They worry the children will resent them for sending their father to prison. They worry society will see them as failures. Women are made to wait long hours when filing complaints and are often blamed or treated suspiciously. If the police don't manage to talk them out of it, their families might by convincing them that it is their responsibility to keep the marriage together. Often, the women only want to frighten their husbands and have them lectured by the police.

Few cases of rape go to court in Thailand. The social stigma holds women back from revealing the abuse to the public. If a woman has a sexual history or a relationship with the rapist, her complaints are unlikely to be treated as serious.

In general, the police do not have a reputation for being sensitive to female complainants when taking down reports. Partly that may be because they have not been trained for it, as there are no Police Academy courses in gender-based violence. But even special efforts by investigators from abroad to train female police officers to handle gender-based violence cases (39 women have been trained so far) are perceived as weak. While those policewomen may be more sensitive, they still ignore the history of abuse between the complainant and the abuser and focus only on the incident.

In his Masters thesis completed last year, police captain Surasri Thepavayporn found some police stations are not the friendliest places for women. He noted that women in the cases he reviewed "were asked rude and inappropriate questions" and were "sexually and verbally abused by the inquiring officers." He concluded, "The said women felt they were humiliated and unfairly treated."

The police are only part of the problem though. Violence persists, as one lawyer with the Friends of Women (FOW) pointed out, because the laws do not address the problem. "Putting men in jail or fining them doesn't help solve the problem. It doesn't make them aware of the violence. It only makes the abuser more angry," contends Khun Yaowalack Anuphan, who in her eight years with the FOW predominantly deals with women abuse cases that the police refuse to pursue. Many of the women have given up on the system punishing their husbands and are seeking divorce.

In Thai culture, notes Judge Jarun, "People don't regard violence as a bad thing.... We start with the notion that parents have a right to punish children by beating them. What is standard beating and what is wrongly violent is a gray area."
On a rainy Wednesday afternoon, Jum and her husband, Lek, rode their motorcycle with their two-year-old daughter to their favorite snooker club. The rain continued and they stayed on. Jum watched her husband drink many beers, something he hadn’t done for quite a while. By nightfall, she was restless and wanted to take the little girl home. Lek wanted to stay. Jum and her daughter, Gunging, took a bus back.

But Jum had forgotten to get the key from Lek. Thinking he would realize what had happened, Jum waited outside the house, despite the drizzling rain. After two hours, she telephoned the snooker place and was told he wasn’t there. Minutes later she called again, certain he was ignoring her. “If she comes, I’m going to kick her,” Lek joked with his friends. Not long after, Jum angrily stormed into the bar and demanded the house key. Lek threw it at her, along with the key to the motorcycle, which, when she asked where it was parked, he teased was in the river. In no mood for his humor, she taunted him saying, “If you didn’t do it, then you’re a puppy.”

Suddenly Lek pushed Jum outside into the rain and smacked her across the face. He punched her eye. Gunging started screaming. Lek kept going, repeatedly punching Lek. “Hit me till I die. Do it, Do it,” Jum shouted. It was not the first time he had beaten her. She knew if she cried “stop,” he would only hit harder. She thought if she encouraged him, then he would stop. “I will beat you until death,” he shouted back. None of the dozen people in the open-air bar tried to restrain him.

Exhaustion stopped Lek eventually. A woman ran out of her small house to pick Jum up from the muddy ground. Looking into the bar, which her son owns, she yelled, “Why didn't you help her? Are you dogs or human beings?” The older woman took Jum into her house, gave her clean clothes and wiped away much of the blood. Someone shouted that Lek had a knife and was coming in. Finally, the others held him back.

They were all singing merrily back in the snooker club when Jum stumbled out hours later with Gunging in her arms and headed home on foot. A policeman crossed the dark street and asked where she was going. She said she wanted to report her husband. “You don't have much injury,” he assessed. “There's no point to report it. If you had more serious injury, then he might get two years in jail.” The policeman walked Jum home and pressed a 100 baht note into her hand.

Weary, Jum fell onto the bed. Around 4 a.m., Lek tumbled into the house. Heavy with alcohol, he grabbed a small stone ball from the water fountain and with it tucked into his fist, punched Jum's face several times. In the morning, when she had failed to wake up and make his breakfast, Lek stomped repeatedly on Jum, then left the house.
He returned in the afternoon and apologized. No longer full of alcohol, he was a different man. Lek was never drunk the other nine times when he beat Jum. But he was often high on yaba, a methamphetamine. The battering had started shortly after he first tried the yaba. When he lashed out at Jum, it was often when she had failed to take his side if he was angry with someone.

Now tender and cooing, he asked if she was hurt or hungry. Too pained to eat, she refused. Worried about her not eating, as if it was a sign something was wrong, he said he would hit her again if she didn't eat. “I only did a small thing to you,” he argued skeptically. “Did I hurt you that much really?” Crying, Jum said she couldn’t move. After the previous beatings, Jum, 29, had convinced herself that being four years older than Lek, she was just more mature. Each time she forgave him. This time it was too much, she realized. She said she was leaving him. In a fit, Lek took out their 2,000 baht savings and threw 500 baht at her. He told her to go and to take Gunging as well.

But then he turned and locked the door. “I apologized. What else do you want?” he pleaded. He fell to the floor and bowed upon her feet.

Later, while he was out and she was locked inside the house, Jum called a women’s shelter she had read about in a magazine to see if she would have to pay to stay there, if they would take her in. Then she fell back to sleep for the rest of the day.

Again the next morning, Lek stomped upon Jum after he discovered she had not made him breakfast. And again he was apologetic immediately afterward. That Friday evening, Lek and a friend took donations to a nearby temple. But he forgot to lock the door. Jum grabbed Gunging and ran.

The women at the shelter took her to the hospital. She had no broken bones or cuts. Both eyes were bruised and most of her face was swollen. There was a large bump on her head and a lot of bruising and some scrapes around her body. By Saturday, she was worried that Lek would be hunting for her like a “mad dog.” Jum was thinking of going home, of giving Lek one more chance. In the past, she had excused his battering because of the drugs. He had quit the drugs two months earlier. He had done a lot of things “for” her, she recalled. Feeling guilty, Jum thought it was her taunting that provoked Lek to be so violent with her. “He was adapting for me, doing what I wanted him to do. This is my fault,” she decided.

“No one is good to him but me,” she said, cradling her sleeping daughter. “We have this little girl. What about her? Maybe I should give him another chance?” After a pause, she looked into a doctor’s eyes and pleaded, “How can I be sure it won’t get worse than this time?”
Working The Frontline

Globally and traditionally, non-governmental organizations (NGOs) have been at the forefront of campaigns to address important health, social, cultural, political and human rights issues affecting communities. Issues that may be provocative and sensitive in nature, challenging attitudes, structures and systems within societies are often neglected in formal sectors. NGOs play a critical role in raising these issues in the public sphere and initiating action. Historically rooted in activism, NGOs’ unique, creative and innovative approaches have been instrumental in forming policy development and promoting positive social change.

DEVELOPMENT OF NGOS

The development of an NGO “focus on violence against women in Thailand” originates from women in academia who formed groups to discuss and address problems affecting Thai women. Over the past two decades, the action-oriented members of these groups formalized their commitment and established NGOs. Typically, these organizations envelop multiple issues faced by Thai women, such as unequal status in society and marriage, domestic violence, economic inequity, sexual harassment and other forms of discrimination. To date, there are approximately 15 NGOs in Bangkok addressing issues related to women and approximately five of these NGOs are active and also have centers in other provinces throughout Thailand.

CONFRONTING CHALLENGES

Although these NGOs have successfully established themselves throughout Thailand, the challenges they have faced and continue to face are many. Violence against women is a problem that exists in most societies due to gender inequities within social structures and cultural norms that condone males’ use of power and control over women. Besides the cultural pervasiveness of violence against women, other socio-cultural, personal and environmental factors compound the problem. Utilizing a combination of feminist and gender-based conceptual frameworks for analysis and action, NGOs’ efforts target the individual, community and policy at local, national and international levels. NGOs face challenges at these various levels, which reflects the dimensions of the problem.
On the individual level, many NGOs offer services that include crisis intervention, legal aid, shelter, hotlines, individual and family counseling, education and information on options. However, without a critical understanding of certain socio-cultural beliefs, interventions may fail. Thus, developing strategies that are culturally appropriate is imperative to community acceptance of such services. Khun Ornanong Intarajit, founder of the Hotline Center Foundation, realized that although most Thai women needed emotional and psychological support to cope with problems related to family life, traditional counseling may not have been a realistic option due to women’s reluctance to disclose their identities and experiences as well as the stigma, in Thai culture, attached to receiving mental health services. The alternative solution was to develop a center that allowed women to call by telephone, anonymously if they wish, and discuss the issues they faced. Khun Ornanong reports that over time, many of these clients develop trust and learn to express their feelings. Many of the women then enter into individual face-to-face therapy. The Foundation’s services also include marriage and family counseling, HIV/AIDS counseling training for both NGOs and government organizations, and public awareness campaigns. The Foundation uses newspapers, magazines, radio and television to educate the public. Khun Ornanong estimates the Center serves 30,000 clients a year; approximately 65 percent are women who suffer from abuse. Since the economic crisis, these figures have significantly risen.

On a community level, NGOs’ efforts are composed of public awareness campaigns and capacity building for systems that confront violence cases. Friends of Women Foundation (FOW) is dedicated to raising public awareness of the unfair treatment of women and coordinating efforts to improve the status of women in Thai society. FOW provides legal advice and social services to women who have suffered from abuse, rape, sexual harassment, the problems related to unwanted pregnancies and other forms of violence and discrimination. FOW also organizes gender-sensitivity training for various groups, such as female police investigators.

Khun Supawadee Petrat is the former the head of the FOW of the Women’s Rights Protection Center and now is Program Coordinator for the Committee for Asian Women (CAW), which is a regional NGO that addresses worker’s rights for Asian women. She believes that although Western feminism has had some influence on the development of NGOs fighting for women’s issues, certain approaches are not
feasible in Asian society. Khun Somkid Mahissaya, a staff member of FOW, suggests that NGOs opt for alternative approaches relevant to the cultural context. Khun Somkid argues that men suffer from the same patriarchal structure and ideology that suppresses women. “We need to involve men in the cause,” she says. Public-awareness campaigns attempt not to alienate men but rather include them in a dialogue to promote gender equity.

The concept that violence against women, specifically partner/spouse abuse, is a private family matter is a common attitude within the community that challenges public forms of intervention. Khun Siriporn Skrobanek, Executive Secretary of the Foundation for Women, states that many NGOs working on women's issues were initially accused of splitting up families and advocating divorce. Khun Siriporn also reports that some Western feminist approaches are confrontational and thus ineffective in educating the Thai community. "Family is a subtle institution and strategies that appeal to the social context are more effective. We need to develop a humanitarian approach and dialogue that incorporates cultural ideologies like Buddhist ideals related to compassion and human dignity to appeal to the community," explains Khun Siriporn. Foundation for Women is dedicated to safeguarding the rights of deprived groups, especially women. The Foundation provides shelter, legal assistance and also conducts research on issues affecting females, such as trafficking of women and children.

On the policy level, NGOs attempt to address laws and regulations that are insensitive to women's rights. EMPOWER, which stands for Education Means Protection of Women Engaged in Recreation, is an organization working with women in the sex industry to help them obtain basic rights, skills and access to education. EMPOWER's objective is to teach sex-workers to protect themselves, gain self-reliance and thus, be "empowered" to make their own decisions. Sex-workers in the Patpong area in Bangkok learn English, Japanese and German language in order to negotiate safe sex and their fees. EMPOWER provides HIV/AIDS prevention as well as condoms to its members. Other activities include a mobile classroom for women to learn to read and write Thai and classes for women to obtain a higher level of education. Khun Surang Janyam, head of EMPOWER, reports that sex-workers are the most vulnerable group in Thai society because there are no laws to protect them. The greatest challenge that EMPOWER faces is when a sex-worker reports an abusive incident that occurred within a sexual relationship, the woman reporting the abuse is instead arrested for prostitution. An additional challenge faced by NGOs is the issue of marital rape because the law doesn't recognize it as a crime. NGOs are advocating for revisions to family law by appealing to the Ministry of Justice to include the various forms of violence against women.

The Association for the Promotion of the Status of Women operates the largest emergency home for women and children. Since opening 20 years ago, the Association has served 40,000 women and
children who have been affected by violence, HIV/AIDS or unplanned pregnancies. Women who go to the emergency home are offered temporary shelter, education and training, youth development, daycare and a health counseling clinic. Dr. Suteera Thomson, the President of the Association, is also the co-founder of the Gender and Development Research Institute (GDRI), a separate yet integrated organization within the Association addressing policy issues that impact on women. The unique aspect of the Association is the link to GDRI, which promotes research as an important activity to addressing violence against women. To date, the Association has computerized data collection for the 40,000 women and children served. Dr. Suteera attributes the Association's success to the strong network of community commitment and other grassroots organizations that support their work. Although referrals to the emergency home from police and hospitals are significant, many women learn about the Association through popular magazines that feature women's experiences and provide information about helping services. Financial support relies heavily on public donations.

In Thailand, NGO workers explain that many women who have suffered from abuse may be less likely to report the abuse to authorities due to beliefs about the nature of family, fear, shame and lack of effective systems response. From an early age females are told, "Finai ya nam ok, Finok ya nam kao," or "the fire in the family belongs in the family; the fire outside the family stays outside." The concept of preserving the family is widely recognized in Thai culture.

Consequently, police, judicial, and health statistics may not represent an accurate picture. Due to a lack of reliable statistical evidence on the severity and scope of the problem, government's response to addressing violence against women has been limited. However, NGOs' work with women who have suffered abuse, the community's reliance on such programmes and NGOs' participation in governmental groups has provided critical data to facilitate greater awareness of the problem. NGO efforts have increased attention about violence against women and facilitated action on multiple levels. Women who suffer abuse have knowledge of and access to services that provide help. The community is gaining awareness of the problem. Currently, many NGOs' practical knowledge is viewed by government organizations as imperative to informing policy decisions. NGOs are involved with committees such as the National Committee on Family Development and Prevention of Family Violence under the National Commission on Women's Affairs and other working groups at the governmental level.

Although many NGOs participate on government subcommittees to review policies that affect women and provide direction on gender issues, NGOs indicate that the problem requires greater attention and resources. Thus, their efforts have been limited. Most NGO's receive their primary sources of financial support from international donors. NGOs' indicate that government funding and commitment is needed to expand efforts toward achieving a goal of eradicating violence against women in Thai society.
One Woman’s Experience

Dang

She had moved from her farming village five years ago, when she was 13, to live with an aunt in Bangkok and to study at night for a high school degree. During the day, Dang helped in the family mini market outside their house. Residents of the family-run apartment building next door relied on the shop for cigarettes, snacks and the telephone. A few, like Yod, would sit out front on a long wooden bench making conversation with Dang. Yod kept inviting her to the movies or to dinner. Dang always refused.

On a warm Friday evening in July, Dang sat on the bench in her pajamas talking with Yod. He sat there from 5 o’clock until 9, when Dang closed the shop. Her aunt’s family had gone visiting with friends. He asked her to his room to talk some more. She told him she was tired and going to bed. Within the following hour, the phone rang and the woman caller asked for Yod. Because it was customary, Dang ran up the two flights of stairs and knocked on the door of the one-room apartment Yod shared with a friend. A factory worker with low pay, Yod couldn’t afford much beyond the small tenement abode.

Dang told him he had a phone call. The door opened but Yod grabbed Dang and yanked her inside. Without saying anything, he pushed her onto the mattress lying on the floor. Tiny and elfin-like, Dang could not resist Yod, who was big and broad and holding down her arms.

“Don't rape me,” she begged, her voice shaking. "I will kill myself." She repeated her pleas whenever his hand slipped off her mouth. He ignored her. But he was fumbling with his violent desire, and Dang lay there as he tried futilely several times. His room was a mess and stank of stale cigarette odor. When he finally finished, he kissed her many times and warned Dang not to tell what had happened. Dang dressed and fled down the stairs crying. In her mind she panicked about getting pregnant or how her aunt would react. “Will she hit me?” she worried.

Confused and hysterical inside the store, Dang picked out the skull warning on a bottle of floor cleaner, hoping it would poison her. Crumpling in sobs on the bathroom floor, she drank some of the cleaner. Within five minutes she was vomiting. She drank more. “Why did he do this to me?” she cried. She vomited more. She continued drinking until the bottle was empty. The vomiting continued. It was on her face and body, and burning. The pain jolted her out of the despair. Dang pulled herself up and ran out of the house to a neighbor, shouting for help. The young woman was too stunned to move. Thinking of no one else, Dang told the neighbor to get Yod to take her to the hospital. After two trips by the woman, he came down and took Dang by motorcycle taxi to a nearby private hospital.

The attending nurse asked if she had money or a bank account. Yod said he was not a relative and refused to sign any forms. Dang couldn’t speak. She continued vomiting. The nurse scolded her for making a mess and after two hours of waiting, the hospital refused to treat Dang. Yod, who had stayed, took her by Tuk-Tuk to a public hospital. Then he ran off.

Unable to speak, Dang wrote her name on a paper and what she had swallowed and was sent to the general ward. No one asked her why or what had happened. She didn’t mention the rape. By now, she was vomiting blood.
Two days later, Dang told her aunt about the rape. Her aunt reported it to a nurse who spoke briefly to Dang about it but did no examination.

The aunt told Yod she knew everything and demanded he pay for Dang’s hospital care. He denied any wrongdoing. “Then why did she try to kill herself?” the aunt yelled. Yod disappeared from the tenement building after that.

Six days after the rape, a nurse finally examined Dang’s body. She noted an intrusion in the genital area and took a sample for a lab test. The following day Dang was released. At home, the vomiting continued. Dang was taken to another hospital where a doctor ordered a chest X-ray and asked why she tried suicide.

Meanwhile, Dang’s aunt reported the rape to the police. They listened to the story but never asked her to sign any paper. She left without any trace of the complaint. Dang tried futilely to obtain the hospital lab results. After two months of hearing nothing, Dang and her aunt went back to the police and since there was no record, they had to lodge the complaint again. The policeman was nice, but didn't seem too interested, as if he was bored with the routineness of her abuse. It being a factory area, many females report being raped. The police checked on the lab results, which indicated no trace of semen. Dang was told it would be three months before they could issue a warrant for Yod’s arrest.

Dang continued having trouble breathing and eating. Her esophagus, stomach, intestines and connecting tissue had been badly burned. A doctor scheduled her for surgery to cut out as much of the damaged tissues as possible. After 20 days in the hospital, she left with an enormous scar down her stomach. She regularly goes to the hospital now to dilate her esophagus.

Terrified of running from the police, Yod called Dang’s aunt and offered to marry Dang. She agreed to meet, then telephoned the police who met Yod instead and arrested him. Yod made bail. A court date was set. Yod offered 30,000 baht compensation. Dang refused. Her aunt had already paid 100,000 baht for her hospital bills. Dang heard nothing from the prosecutor. She called a women’s crisis center for help.

With a negative lab result and lack of interest on the side of the judicial system, Dang feared a trial would prove useless and Yod would get off with no punishment. She wanted to pursue it, to stand up and fight back, to be an example for other women. When his parents contacted her lawyer and counselors at the crisis center, they offered 50,000 baht. “If this was for my daughter, I would only ask 20,000 baht,” Yod’s lawyer claimed. Yod’s parents negotiated the payment while he was elsewhere. Presuming the lab results would ruin her case, Dang was encouraged to accept the offer, so that at least she would not end up empty-handed.
A One-Stop Solution

The health consequences of violence against women are often unrecognized, yet they cause chronic physical and mental health problems. These chronic health problems include physical traumas, multiple contusions, fractures, bruises, bites, as well as burns on the face, head and abdomen. In addition to direct injuries, women who suffer from abuse may experience stress-related disorders, such as gastric distress, lower back and pelvic pain, headaches, insomnia and hyperventilation. A variety of psychological and mental health symptoms, such as anxiety disorders and panic attacks, depression, sense of helplessness and declining coping skills, self-blame and lowered self-esteem, may further accompany these physical impairments. Women in abusive relationships are also more vulnerable to STDs/HIV/AIDS as they may be unable to protect themselves and negotiate safe-sex practice.

Health systems and medical professionals, particularly emergency room staff, are often the first to confront injuries and problems related to violence cases. However, without the proper mechanisms to identify and treat cases of violence, women who suffer from abuse may continue to suffer the physical and emotional effects of abuse. The result, in such cases of un-detected and untreated abuse, may be death.

ONE-STOP SERVICE CENTER

Based on the understanding that many women who suffer from abuse seek medical attention at some time in their lives, the Office of the National Commission on Women’s Affairs, with the assistance of Dr. Saisuree Chutikul, a consultant to the Office of the Permanent Secretary of the Prime Minister’s Office, and with the cooperation of the Bangkok Metropolitan Administration, initiated The One-Stop Service Center. The Center was established in 1998 and integrated within the Bangkok Metropolitan Administration’s 60 health centers, and seven city hospitals. The goal of the Center is to meet the health, emotional and social needs of women who suffer abuse when they seek help at a hospital or health center.

The One-Stop Service Center team is composed of an internist, pediatrician, OB/GYN, psychiatrist, social workers, forensic expert, surgeon, and nurses. The team provides necessary medical, psychological/emotional and social services to women who report abuse. Dr. Pattra Kurathong, the Deputy Director of Vajira Hospital and Chief of the One-Stop Service Center states, that the strength of such an integrated health system is that it provides easy access to various services within one location. Most women who have experienced abuse may be reluctant to seek additional help to medical care, as they lack a sense of self-esteem due to a history of on-going emotional and physical abuse. The Center facilitates access to helping services as well as provides a safe environment for women to understand their options and make decisions about their situation with a health staff member.
The One-Stop Service Center treats approximately 40 to 50 women per month who have experienced physical and emotional abuse and rape. Women who go to an emergency room and admit they have been abused are then accompanied by clerks to the One-Stop Service team. The woman does not need to queue up, and her case is given priority. Once doctors conduct the examination, specific services are then suggested, and she is offered medical treatment for injuries, counseling, shelter referrals, and/or help to report the abuse to police. Dr. Suntana Charoenkul, an OB/GYN and a team member, describes the process of treatment in cases of rape. "The woman is given a medical examination, forensic work-up, health counseling, HIV testing, and additional supportive counseling. She may also be assisted in filing a police report. In some cases of abuse, social workers will also link the women to an NGO that provides shelter or further supportive services." Cases of rape amount to 20 percent of the monthly average.

**BARRIERS TO PROVIDING CARE**

The One-Stop Service Center attempts to provide a holistic approach to dealing with violence against women. However, several barriers exist in providing effective intervention. Dr. Pattra reports that although women tend to report the abuse to doctors and hospital staff, they are often reluctant to report the abuse to police. She states that this is primarily due to their financial dependence on the abuser. Reporting the abuse may result in an arrest and incarceration, thus loss of the primary breadwinner in the household. In such cases, the abuse continues and the woman returns to the hospital seeking medical care several times during the course of the abusive relationship.

Khun Somphorn Chungsiriwat, one of the three social workers at the One-Stop Service Center in Vajira Hospital, reports that the greatest obstacle to providing effective care is limited resources. Khun Somphorn states that all of the One-Stop Service team members must manage their regular duties with the larger system in addition to providing services for the women who have experienced abuse. This becomes a difficult task, as most cases of abuse require a significant time commitment and follow-up. Social workers are generally responsible for a majority of the follow-up activities after medical care.

Another challenge is that the One-Stop Service team is only available during business hours, which begin at 8 a.m. and end by 4 p.m. Many women in need of help come to the emergency room after these hours. Although they receive medical care, other important services, such as counseling and transport to NGOs, are not available. These women are usually asked to return to the Center during business hours, possibly the next morning. However, returning home may not be a viable option as it may place the woman in danger of more abuse. Khun Somphorn estimates that only approximately 10 percent of these women return for supportive psychological and/or social services.
Finally, as the Center relies heavily on other systems such as NGOs to provide shelter, and/or on-going social, legal and emotional services, proper coordination with these systems is imperative for effective care. Again, the issue of limited resources affects responses in coordination activities. For example, many NGOs are short-staffed and unable to provide transportation for women seeking shelter. Coordination efforts must be more effective for systems to function in the manner in which they are proscribed.

As suggested by a significant number of violence cases seen monthly at the One-Stop Service Center, women who suffer from violence utilize medical services. Health professionals are in a unique position to respond effectively to the needs of women who seek help. Most importantly, the reliance and trust women have on health systems and staff creates opportunities to develop appropriate interventions as well as prevention programmers. Most of the challenges and barriers to providing effective care within the One-Stop Service Center seem to be structural in nature. Modifying certain aspects of the current structure that creates obstacles to effective care, such as staffing, operating hours and coordination with other helping systems, may facilitate more efficacy on the part of the One-Stop Service team.

Although the One-Stop Service team conducts intensive interviews with women who disclose the violence in their lives, the general population of women seeking help from medical systems may also benefit from in-take interviews that include questions about abuse in the family. Early detection of violence can prevent the situation from reaching severe levels.

The implications in providing effective care are that women are connected to a specialized follow-up system that meets their long-term care needs and they do not require additional visits to the Center unless they are seeking further medical attention. If the proper linkages and referrals are made, they may prove to be adequate as many women require such services as counseling, legal advise or shelter that are within the domain of most NGOs. Prevention activities are also important as the trust and reliance the community places on health systems defines a level of acceptance of messages from health professionals.
ONE WOMAN’S EXPERIENCE

Conversations with policemen, a prosecutor and even a judge regarding the prosecution of the young man who had attacked Nuj, leaving her blind in one eye, achieved only to diminish her self-worth. “I felt like they were saying, ‘Oh, you’re a woman and you lost an eye. But you’re a housewife, it’s not much of a loss.’”

Till now, Nuj, who actually runs a business selling gold, still does not know why her husband’s nephew attacked her during his mother’s funeral. Her husband’s family had been quarreling for years over inherited properties. The woman who died had been a good friend to Nuj, though they hadn’t spoken for a year because of their husbands’ fighting about a debt. Nuj had lived with the woman and her husband and had trained with them to deal in gold. After she married a younger brother of the husband, they moved to her home province and opened their own gold shop.

At the funeral, as Nuj sat on her knees praying, her husband’s nephew, then 19, came toward her swinging a long piece of wood. She didn’t see him till it was too late. The wood hit her head sideways. She fell to the floor unconscious.

Nuj’s husband went to the police around 11 p.m. the night of the attack. He was told, "This family again? Come back tomorrow morning. It's too late tonight." The nephew has supposedly disappeared. He has never been arrested.

Six months after the attack, Nuj approached an investigating officer. "We have no budget to catch this guy. If you're in a hurry, you have to pay yourself," he claimed. He asked for 10,000 baht for expenses and a bonus when the nephew was caught. Three months later, Nuj called for an update. "There's nothing. You should come talk again," the officer said. She knew he wanted more money. She never went.

She spoke to a prosecutor. He said there was not enough evidence to make a strong case. He suggested she ask the boy's father for financial compensation and close the issue. Nuj persisted with a trial against the nephew’s family for compensation.

"In court I had to take off my glasses," explained Nuj. "The judge looked into my face and said, ‘You look okay.’ He said my injury was not too serious and that I was asking for too much money. All his words discouraged me. I felt very low and that I had no worth at all." Referring to the nephew, she still wonders why he attacked her. "I think he thought if he hit a man, he would know it would be more serious. But against a woman, no one would really care."

Nuj makes a vigil of attending conferences about violence against women, where she doesn’t hesitate to challenge government officials. "My husband says I have to accept my country. But I can’t. The system and the attitudes toward victims and toward women have to change."
GOVERNMENT POLICY

Moving In The Right Direction

Since the late 1980’s when it signed the UN Convention on the Elimination of Discrimination Against Women, the Thai Government has recognized abuse of women and children as a social problem. Currently, the Government admits the situation has become rampant.

It has not come easily to this conclusion. But over time and with increasing sources of information at hand, policy has slowly been shaped to provide better protection for women and children against violence. Many favorable trends have emerged that have positively affected the lives of Thai women and children. Most notably, the rights and status of women and children are being given greater prominence and recognition in a wide range of legislative provisions, although it is still regarded as insufficient by various groups.

According to Khunying Supatra Masdit, Minister attached to the Prime Minister’s Office and the Vice-Chairperson of the NCWA, the Government recognizes that the problem of violence against women and children is a “great obstacle” in the development of the country. “The problem not only impacts on its victims, but it also causes socio-economic damage to the country." Khunying Supatra also has said that in addition to government and NGO efforts in the campaign to stop the violence, communities, families and individuals must also work toward prevention of violence and changing values. "Convincing men to participate in the campaign should not be overlooked."

The 1997 Constitution created several possible opportunities to install mechanisms to protect the rights of women and children at the national level, including the unprecedented clause requiring Thailand to establish the National Human Rights Committee, which has singled out the rights of women and children as a particular priority of that unit.

The National Commission on Women’s Affairs (NCWA) has just released a National Plan for the Elimination of Violence Against Women and Children. It is the process of Cabinet approval. The plan speaks to the need for greater prevention by promoting the family as a necessary and integral part of society. It also calls for extensive counseling services needed at all economic levels and throughout the country, law reform, better data collection and understanding of the issues.
As of 1999, the NCWA has established that every November would be declared Anti-Violence Against Women and Children Month to raise awareness. With NGOs, the NCWA is working to modify existing laws as well as police procedures within The Criminal Code. The Commission also initiated the One-Stop Service Center in seven Bangkok hospitals and 60 health centers. With the Mekong Regional Law Center, the NCWA is working to improve the protection and safe recovery of victims of cross-border trafficking. Though prostitution remains illegal, there has been a shift in heavy punishment from female sex workers to the clients, the pimps, the establishments that make it available and even to the parents who push their children into the business and other organized networks. Sex with children under age 18 now carries stiffer penalties.

One glaring concern is the current rape law, which in effect, allows men to rape their wives. Or rather, “forced sex with a legal wife” is not considered rape. However, the Government through the Cabinet has approved in principle that this law will be changed.

There are 10 government crisis centers in the country, but they operate with limited budgets. The Department of Social Welfare provides some funding to care services, though on a case-by-case basis.

With the governments of Britain and Australia, the Police Department has been training women to work specifically with female victims of violence. Currently there are only 39 women assigned to various police stations. Within the country there are four police stations with a special unit for the protection of women and children. The Committee on Women, Youth and Elderly of the Senate with the cooperation of the Royal Thai Police Department has established a commanding unit called the Division for the Protection of Children and Women under the Royal Thai Police Department.

Summarizing the situation, a Thai law researcher observes that any progress in the area of domestic violence is owing to the personalities of a few women crusaders rather than widespread recognition among authorities that there is a problem in Thai homes. Nearly all individuals interviewed for this report emphasized the need for legal reforms. Despite the progress made in policy to date, there also remains a need for stronger condemnation from the Government that domestic violence and other crimes against women are public concerns and are as serious as any other crime.
The proposed National Plan by the Office of the National Commission on Women’s Affairs was recently formulated to provide a framework to end violence against women and children. The National Plan was developed through a process of consultation and collaboration with a multi-sector team of individuals involved in addressing the issue. The Plan outlines general objectives, policies at the national level and six-sub sector plans. The NCWA expects the ideas outlined in the National Plan will guide each line agency and ministry to devise its own plan of response relevant to its resources and capacity.

The NCWA strongly recommends further research and study of the nature, frequency and consequences of family violence, rape, including marital rape, and other gender-based crimes. Research that examines models of intervention and prevention effective in Thailand is also a priority. In addition, the NCWA encourages analysis of violence and the women detained within institutions and prisons and against women domestic workers, women with disabilities and women in the workplace and in educational institutions.

**OBJECTIVES:**

1. To create policies and mechanisms at all levels for the prevention and intervention of violence against children and women.
2. To strengthen both government organizations (GOs) and NGOs by building capacity of personnel.
3. To disseminate information and knowledge of the problem to the public, particularly children and youth, and raise awareness about their rights and help them to develop skills in problem-solving and conflict resolution.
4. To promote individual and community participation in the prevention and intervention of violence against children, women, the elderly and the disadvantaged groups.
5. To establish a network and multi-disciplinary team to address the problem at all levels.
DRAFT POLICIES OF THE NATIONAL PLAN ON THE ELIMINATION OF VIOLENCE AGAINST CHILDREN AND WOMEN:

1. The Government must stress the importance of the problem and continuously promote the protection of children and women in families and society. It should promote the development of individuals, families and communities to bring about gender equality and peace as well as the reform of protection laws.

2. The Government must help, financially and/or technically, the children and women who are survivors of violence by supporting all GOs and NGOs involved in the care, remedy and rehabilitation of women and children who have been physically and mentally abused, and providing assistance for shelter and the law process. Any organization or agency that ignores this responsibility should be punished.

3. GOs must promote and support all citizens, particularly women, to participate in the prevention of violence and the care of survivors in their community as well as other areas up to the national level.

4. GOs must promote and support the development of the body of knowledge, personnel and information systems in order to have effective response mechanisms that work toward maintaining stable and secure families.

5. GOs must promote the integration of plans, budgets and cooperation for programs focused on the prevention and care of children and women, who are victims of violence.

6. GOs must support works to reduce factors contributing to violence against children and women.

7. GOs must support Information, Education and Communication (IEC) programs on child rights, women's rights and human rights and foster a sense of protection of those rights.
SIX SUB-SECTORS OF THE NATIONAL PLAN:

1. PLAN ON PREVENTION AND PROMOTION
   Proposed recommendations include:
   - GOs, NGO workers, witnesses, or others who fail to take action when a violent incident occurs should face legal and social punishments.
   - Promote responsible media that respects survivors' rights and protects their confidentiality.
   - Censor controls on media, programming and advertising that reinforces or normalizes violence.
   - Promote and support the elimination of sexism and other forms of discrimination.
   - Provide child welfare and day-care for high-risk children.

2. PLAN ON LAWS
   Proposed recommendations include:
   - Enact alternative punishments to imprisonment, such as community service work and/or a minimum of nine months of rehabilitation.
   - Reform criminal justice procedures to be gender-sensitive and respect issues of confidentiality.
   - Promote enforcement of law on bodily harm.
   - Enact laws to punish parents or family members who fail to report any knowledge of violence against children and others in the household.
   - Authorize police to remove children from abusive parental custody.
   - Provide funding support to existing safe houses, increase the development of additional safe houses and provide economic assistance to the clients.
   - Enact a law to compensate survivors of violence; funds provided by the Government or perpetrators.
   - Promote public awareness of violence laws and survivors' rights under the laws.

3. PLAN ON PROTECTION AND WELFARE
   Proposed recommendations include:
   - Develop manuals to guide work related to legal, social and medical response services.
   - Build capacity of legal, medical, social personnel.
   - Support GOs and NGOs to work free of political influence in the protection of women and children.
   - Integrate pre-marital, marital and family counseling services into existing district level organizations.
   - Create community centers for shelter, counseling and other referrals.
4. PLAN ON EDUCATION AND RESEARCH

Proposed recommendations include:

- Integrate issues on women, child and human rights, gender roles, family education, self-defense, life skills, and sex education into curriculum at all levels, including non-formal education and media.
- Support social research on violence.
- Develop indicators for monitoring effectiveness and follow-up of interventions related to violence programming.
- Support academic study on changing cultural attitudes and values and use findings to develop policies and planning.
- Educate media, particularly radio telephone counselors, on the dynamics of violence, human rights and gender.
- Enforce the elimination of corporal punishment in schools and monitor teacher compliance.

5. PLAN ON DEVELOPMENT OF MECHANISMS, COORDINATION AND INTEGRATION

Proposed recommendations include:

- Create a coordinating body responsible for the prevention and implementation of activities on violence at the national level and practical level.
- Provide counseling services available and accessible to all, in both urban and rural areas.
- Establish standards of quality assurance in all services rendered by GOs and NGOs.
- Organize a forum for exchanging knowledge and experiences from academic research and service activity.
- Promote and support people networks, especially at the village level, for surveillance, protection and care.
- Establish a special unit that functions as a One-Stop Service within the judicial system and employ gender-sensitive personnel to represent and care for survivors.

6. PLAN ON MONITORING, EVALUATION AND INFORMATION SYSTEMS

Proposed recommendations include:

- Establish an information center on violence at central and peripheral levels that will be a resource for statistics, data collection and dissemination.
- Monitor and evaluate services.
- Report findings of monitoring and evaluation activities to the information center and utilize them for policy formulation and program planning.
The following ideas are additional suggestions and recommendations that emerged from discussions and meetings with key individuals who were interviewed for this report.

CRIMINAL JUSTICE

- Amend the definition of rape to include forced sex with anyone, including within marriage.
- Improve the investigation process and prosecution procedures to encourage victims to exercise their legal rights and impose penalties on abusers.
- Enact a service establishment law and a witness protection law.
- A legal officer within the Labor Ministry should be the one to receive sexual harassment complaints, investigate and mediate a resolution within six months rather than involving the police.
- Broaden gender-sensitivity training to reach all judges and law enforcers and improve the internal guidelines observed by the court to bring them more in line with principles of the new acts.

NGO SECTOR

- Recognize impacts of violence, such as Battered Women’s Syndrome and the health burden, on society and on development.
- Improve collaboration between NGOs and GOs to develop gender-sensitive laws with social protections.
- Recognize other forms of violence against women, such as marital rape, incest, etc.
- Address the causes and consequences of violence against women using both legal and social measures.
HEALTH SECTOR

☐ Integrate Domestic Violence (DV) Coordinators or student advocates to assist women in health systems during non-working hours of One-Stop Service Center.
☐ Provide internships in health settings for Public Health and Social Work Masters’ students.
☐ Broaden gender-sensitivity training to reach all health professionals and adopt new protocols for dealing with women who experience abuse, in addition to the training for One-Stop Service Center.
☐ Move away from reliance on self-reported cases of violence to standardized interviewing procedures in health and hospital settings for all patients to incorporate identification of abuse cases.

EDUCATION SECTOR

☐ Develop gender-sensitive materials, texts, toys, etc., for dissemination to the public.
☐ Train teachers in peer mediation and conflict resolution.
☐ Organize classes for boys and girls to develop an egalitarian approach to marriage and parenting, such as sharing chores, resources and respect for each other. Emphasize that a husband is a partner, not an owner or an employer.

Notes:
1 In Strauss and Gelles (1986), study of a national sample of married or cohabiting couples.
2 In Rakes (1990), study of a representative sample of 612 married women in Kissi District.
3 In Hoffman et al. (1994), study of a representative sample of 619 husbands with at least one child residing in Bangkok.
Women-Centered NGOs

Association for the Promotion of the Status of Women 929-2222
Committee on Asian Women 930-5635
EMPOWER 236-9272, 266-8019
Foundation on Women 433-5149, 435-1246
Friends of Women Foundation 270-0928, 279-7158
Gender and Development Research Institute 929-2087
Hotline Center Foundation 277-8811, 277-7699, 276-2950

One-Stop Service Centers

Central Hospital 221-6141-60
Taksin Hospital 437-0116-30
Charoen Krung Pracharak 289-1153-8, 292-1848-52
Abbot Taveesak Chutinadharo 429-3575-8
Nong Chok 543-1150, 543-1307, 543-2089
Lat Krabang BMA 326-7232
Vajira Hospital 243-0151, 243-0220-39