

Distr.: General  
18 April 2023

English

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## **Economic Commission for Europe**

Conference of European Statisticians

### **Group of Experts on Gender Statistics**

Geneva, Switzerland, 10-12 May 2023

Item E of the provisional agenda

**Measuring violence against women**

## **Gender Statistics in Turkmenistan in the light of Survey on the Health and Status of a Woman in the Family**

**Note by the United Nations Population Fund\***

### *Abstract*

Turkmenistan conducted its first-ever national survey on the prevalence of violence against women in families in 2020 and published its results in 2022. The sample survey titled “Health and Status of a Woman in the Family in Turkmenistan” was the first national experience in collecting data and analysing the problem of domestic violence against women based on the interviews with women aged 18-59 years in all regions of the country. Conducting this survey is an important step for Turkmenistan, both in terms of researching the issue and in terms of developing national statistical capacity to conduct sociological surveys based on the international methodological standards and also follow up on the CEDAW recommendations.

The survey provided important data on violence against women by an intimate partner in domestic settings from the perspectives of socio-demographic factors associated with violence against women, regional differences, demographic and behavioural characteristics of an intimate partner, forms of violence, violence by other persons, impact of violence on woman’s health and well-being of children, coping strategies, and some others. The survey revealed that 12% of women in Turkmenistan, aged 18-59, have been subjected to physical and/or sexual violence by an intimate partner, that is,

\*Prepared by Mr. Dovran Yamatov, UNFPA Country Office in Turkmenistan

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every eighth woman in the country who is or was in a marriage or relationship, has such an experience.

The survey played an important role in assessing the gender-based violence situation in the country and contributing to the development of national gender equality policy and measures. The survey developed a range of recommendations to eliminate all forms of violence against women and advance the national statistical capacity to continue the collection and analysis of data on the frequency, prevalence and characteristics of gender-based violence in and outside the family.

This paper presents a summary of the work done regarding the survey, its importance for the development of national gender statistics, main results and recommendations.

## I. Introduction

1. Turkmenistan is an upper-middle-income country with an emerging market economy mainly driven by hydrocarbon revenues. The population size is estimated to be around 6.2 million<sup>1</sup>. Territorially, the country consists of five provinces (velayats) and the capital city of Ashgabat.
2. Turkmenistan is steadily progressing towards producing comprehensive and quality gender statistics. A Sample Survey “Health and Status of a Woman in the Family in Turkmenistan” (Survey)<sup>2</sup> is the first-ever research to measure the prevalence of violence against women in families. For many years, the country did not have methodologically sound and comparable data on violence against women making the phenomenon invisible and difficult to address leaving thousands of women vulnerable and unprotected against violence including physical, sexual, psychological and economic.
3. Turkmenistan has acceded to the Convention on the Elimination of All Forms of Discrimination against Women in 1996 (CEDAW) and its Optional Protocol in 2009. Since then, the concern on the absence of statistical data on violence against women in Turkmenistan was in the focus of the CEDAW Committee recommendations. The Committee was calling the country “to conclude, without delay, a survey on the prevalence of gender-based violence against women” and “to regularly collect, analyze and publish statistical data on incidents of all forms of gender-based violence against women, disaggregated by sex, age, ethnicity, geographical location and the relationship between the victim and the perpetrator”<sup>3</sup>.
4. The country joined the global community commitments in eliminating gender-based violence against women (GBV) such as International Conference on Population and Development (ICPD, 1994), IV World Conference on Status of Women (Beijing, 1995), Sustainable Development Goals (SDGs, 2015) and Nairobi Summit ICPD+25 (Nairobi, 2019). Generating and using disaggregated statistics for monitoring the promises towards those commitments remain highly important.
5. Within the framework of policy response to its international commitments to promote gender equality, Turkmenistan developed two National Action Plans on Gender Equality in Turkmenistan (NAPGE) covering the periods of 2015-2020 and 2021-2025. Addressing GBV issues and generating relevant statistics were among the important aspects to promote gender equality in Turkmenistan in addition to legislation, reproductive health and rights, participation, education and employment opportunities and

<sup>1</sup> World Population Dashboard, Turkmenistan <https://www.unfpa.org/data/world-population/TM>

<sup>2</sup> A National Sample Survey “Health and Status of a Woman in the Family in Turkmenistan” <https://turkmenistan.unfpa.org/en/publications>

<sup>3</sup> Committee on the Elimination of Discrimination against Women. Concluding observations on the fifth periodic report of Turkmenistan, 2018 <https://www.ohchr.org/en/documents/concluding-observations/cedawctkmco5-committee-elimination-discrimination-against-women>

others. The commitment to hold a survey on domestic violence against women was made under the first NAPGE 2015-2020<sup>4</sup>, while the second NAPGE 2021-2025, the ongoing one, is more about follow up actions in addressing GBV.

6. The ongoing NAPGE 2021-2025 consists of seven strategic focus areas. The 4<sup>th</sup> focus area “Response to gender-based violence against women and girls” and the 7<sup>th</sup> area “Strengthening institutional mechanisms to support gender equality” envisage strategic actions to collect and publish statistics on gender-based violence (action 4.6) and to increase the capacity of civil servants to collect gender-sensitive statistics (action 7.4)<sup>5</sup>.
7. The sample survey “Health and Status of a Woman in the Family in Turkmenistan” is an important step for Turkmenistan, both in terms of researching the issue and in terms of developing national capacity to conduct sociological surveys based on the international methodological standards. The Survey was conducted with the technical guidance and support of the United Nations Population Fund (UNFPA). The Survey was made possible because of funding from the Government of Turkmenistan and international partners such as UNFPA, the European Union and the British Embassy in Turkmenistan.
8. Since it was the first experience of the country in conducting such a sensitive research, an extended time frame was reserved to identify the methodology, learn best practices, build national capacity. Chronologically, the first steps under the Survey were initiated in 2014 with the first discussions at different levels for the need to collect data on domestic violence against women to understand the level of phenomenon in the country, followed by the quest for and study of methodology to ensure international comparability, adapting the questionnaire to the local context, learning best international practices (2015-2018). The listing and sampling exercises were completed in 2019, while the field data collection was conducted from February 25 to April 1, 2020. The collected data was processed and analyzed in 2020-2021. The final report of the Survey was approved by the Government of Turkmenistan and published in 2022. The Report could be found here <https://turkmenistan.unfpa.org/en/publications>.

## II. Survey objectives, methodology and key results

### A. Objectives

9. While the Survey’s key goals were to (1) identify and analyse the main characteristics of the situation with violence against women in Turkmenistan and (2) develop recommendations for state and non-profit organizations working for responding to domestic violence and other types of violence against women, it pursued specific objectives as outlined below:
  - i) Study the prevalence of violence against women at the national and regional levels;
  - ii) Study the prevalence and characteristics of various forms of violence (physical, sexual, psychological and economic) and controlling behaviour by an intimate partner;
  - iii) Identify high risk groups and potential socio-demographic factors that increase the risk of domestic violence;
  - iv) Explore the possible impact of domestic violence on women's health and children's well-being;
  - v) Identify strategies that victims of violence use to get protection and support, as well as study what kind of support they receive from various state and non-profit organizations.

<sup>4</sup> National Action Plan on Gender Equality in Turkmenistan for 2015-2020 (2015)

<sup>5</sup> National Action Plan on Gender Equality in Turkmenistan for 2021-2025 (2020)

## B. Methodology

10. The methodology of World Health Organization for the International Study on Violence and Women's Health (2005)<sup>6</sup> was employed for the purposes of the Survey. The questionnaire was adapted to the country context and cultural requirements. Along with general conceptual framework, the survey used key international terms and operational definitions necessary to assess the situation on domestic violence.
11. To coordinate the Survey, a devoted national Working Group was established consisting of representatives of the Ministry of Health and Medical Industry of Turkmenistan, Ministry of Labour and Social Protection of Turkmenistan, Ministry of Internal Affairs of Turkmenistan, Institute of State, Law and Democracy of Turkmenistan, the State Statistics Committee of Turkmenistan and the Women's Union of Turkmenistan. The work of the Working Group at all stages of the survey was technically guided by UNFPA.
12. The survey paper questionnaire consists of 11 sections covering topics corresponding to the key research questions. Individual, face-to-face interviews (respondent and interviewer) were used for data collection. Only answers to the questions were recorded and no personal data was requested to ensure the anonymity and safety of the respondents. The Survey respondents were women aged 18-59 in households in five velayats (Ahal, Balkan, Dashoguz, Lebap, Mary) and the capital city of Ashgabat.
13. While adapting the Survey questionnaire the Working Group was challenged with aligning some terminology with the local language and cultural context. For instance, the term "intimate partner", when directly translated to Turkmen, sounded rude and inappropriate. The option of husband/partner was suggested instead of using the term intimate partner in the questionnaire. For the term "husband" the Turkmen language suggests two options "adamsy" and "är", whereas the latter has more masculine and power connotation. Given that fact, the option of "adamsy" was used in the questionnaire to make it friendlier. Taking care of language and consequently the response rate, these types of language subtleties were thoroughly examined to ensure the questions sound appropriate, comfortable and understandable for respondents. The questionnaire was prepared in Turkmen and Russian languages to meet the language preferences of respondents.
14. Since Survey covers sensitive topics of family relations and reproductive health through the prism of violence, it was important to take into account the risk of refusals. Therefore, the identification and proper training of interviewers were especially important. In order to minimize the risks of non-response, it was decided to use a new approach to the selection of interviewers. Given the high level of trust in doctors in the Turkmen society, it was decided to engage women working in the health sector, in particular family doctors and doctors specializing in reproductive health, as interviewers.
15. Interviewers received comprehensive one-week training that included four components: (i) basis knowledge about domestic violence; (ii) international experience in conducting surveys on GBV; (iii) survey questionnaire and instructions; (iv) ethical and safety standards. The training also included practical exercise with visiting households in select urban and rural areas, interviewing women and filling in the questionnaire. Within the same exercise the Survey questionnaire was tested to ensure all questions are understandable by respondents.
16. The rational sample size for the Survey was determined to be 3,596 households. This size was determined to be enough considering such factors as households that may not have target women aged 18-59, refusals to participate, households with absent inhabitants.
17. Out of 3,596 households selected, 3,496 households were identified as occupied. Consent to participate in the Survey was obtained in 3,348 households. The number of households with at least one eligible woman (aged 18-59) was 2,989. Only one target woman was interviewed in each household. In situations where there were several eligible women in a household, one woman was

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<sup>6</sup> WHO Multi-country study on women's health and domestic violence against women, 2005, WHO <https://apps.who.int/iris/handle/10665/43309>

randomly selected using the Kish method. As a result, 2,961 women were successfully interviewed. The proportion of respondents interviewed was 99.1% of the total number of selected women.

18. The survey data were analysed within the Ecological Framework for gender-based violence determinants<sup>7</sup> and gender analysis of domestic violence against inequalities in accessing economic and social resources and opportunities, gender roles and stereotypes. The Ecological Model is widely used to analyse the set of factors that reinforce violence against women. The model considers the cumulative effect of individual factors, characteristics of the social environment and factors that shape the reproduction of gender inequality in society. Such analysis provides a better understanding of why violence occurs in certain families, why the prevalence of violence is higher in certain regions, and which population groups are more at risk of violence.

### C. Key results

19. While the recent WHO's estimate states that globally 27% of ever-married/partnered women have been subjected to physical and/or sexual violence from a current or former husband or intimate partner at least once in their lifetime (since the age of 15)<sup>8</sup>, the Survey in Turkmenistan revealed that 12% of women aged 18-59 years have been subjected to physical and/or sexual violence by a spouse or partner (current or former), that is, every eighth woman in the country (Figure 1). The 12% prevalence rate of Turkmenistan is below the average rate for the region of Europe, Central Asia and the South Caucasus.
20. National intimate partner violence prevalence rate (IPV) is comparable to the European Region that makes 25% (WHO, 2013)<sup>9</sup>, as well as data from several countries in Central Asia and the South Caucasus. The results for Turkmenistan are closer to the results obtained in Kazakhstan (16.5%)<sup>10</sup>, and in the South Caucasus (Azerbaijan - 14%, Armenia - 8%)<sup>11</sup>, than the situation in Kyrgyzstan (26.6%) and Tajikistan (26.4%).
21. Data on current violence reveals a similar trend. In Turkmenistan, 3.4% of ever-married or in relationship women reported experiencing physical and/or sexual violence by a spouse/partner in the past 12 months. The level of current violence is close to the results obtained in Kazakhstan (4.7%) and Armenia (4%), and significantly lower than the data identified in Kyrgyzstan (17.1%) and Tajikistan (19%).

<sup>7</sup> Ecological Framework <https://www.endvawnow.org/en/articles/1509-the-ecological-framework.html>

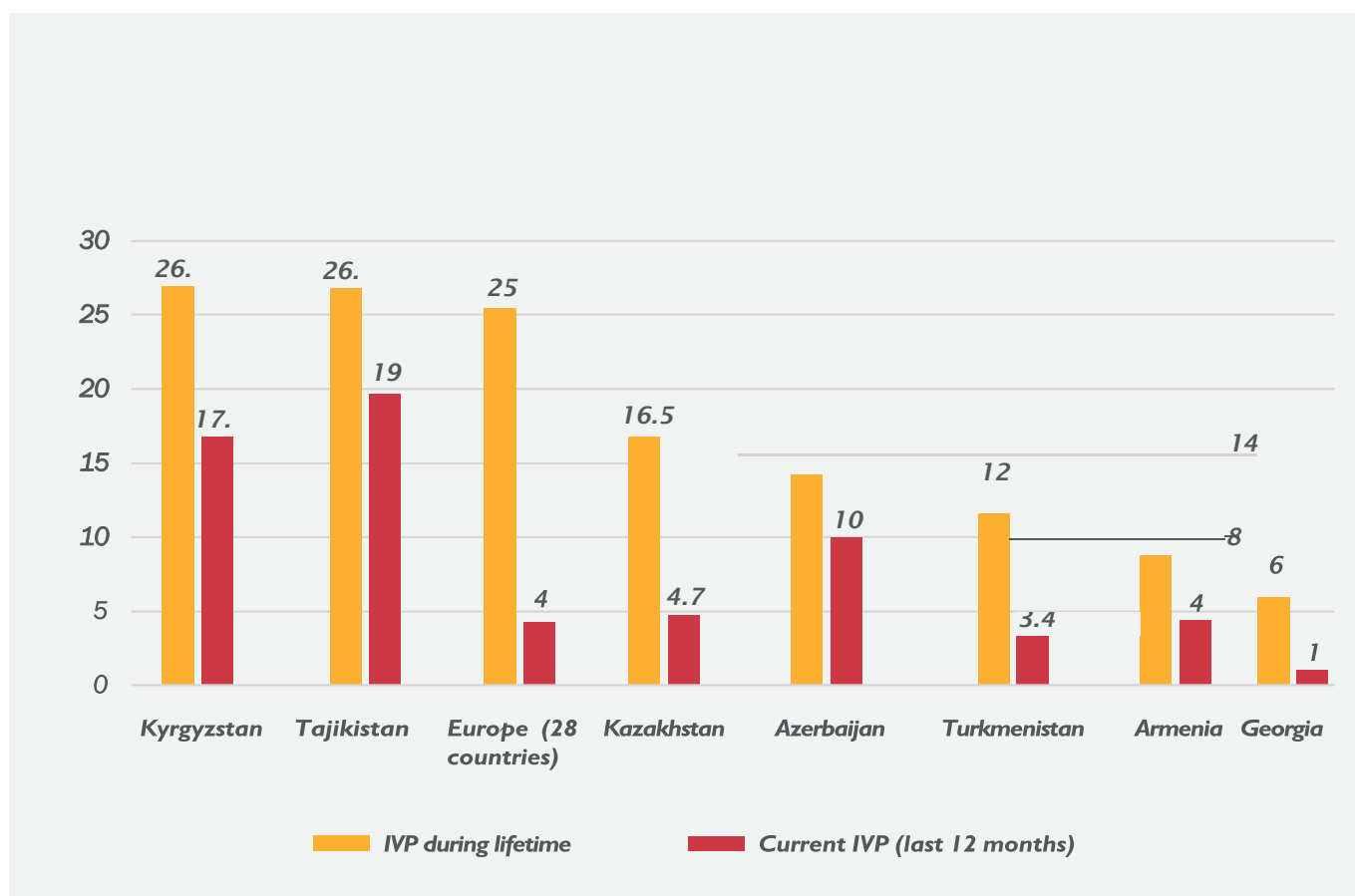
<sup>8</sup> Violence against women prevalence estimates, 2018: global, regional and national prevalence estimates for intimate partner violence against women and global and regional prevalence estimates for non-partner sexual violence against women. Geneva: World Health Organization; 2021. Licence: CC BY-NC-SA 3.0 IGO. <https://www.who.int/publications/i/item/9789240022256>

<sup>9</sup> Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence, WHO, 2013 <https://www.who.int/publications/i/item/9789241564625>

<sup>10</sup> Sample survey on violence against women in Kazakhstan, 2017 [chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://kazakhstan.unfpa.org/sites/default/files/pub-pdf/Kazakhstan%20VAW%20report\\_final%2031-10-2017.pdf](chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://kazakhstan.unfpa.org/sites/default/files/pub-pdf/Kazakhstan%20VAW%20report_final%2031-10-2017.pdf)

<sup>11</sup> Global Database on Violence Against Women, UN Women, COUNTRY PROFILE. It should be noted that in a number of countries, women aged 15-49 year were interviewed, while in this Study 18-59 year old women were targeted. <https://evaw-global-database.unwomen.org/en>

Figure 1  
Prevalence of physical and/or sexual violence by husband / partner in the countries of Europe, Central Asia and the South Caucasus, percent



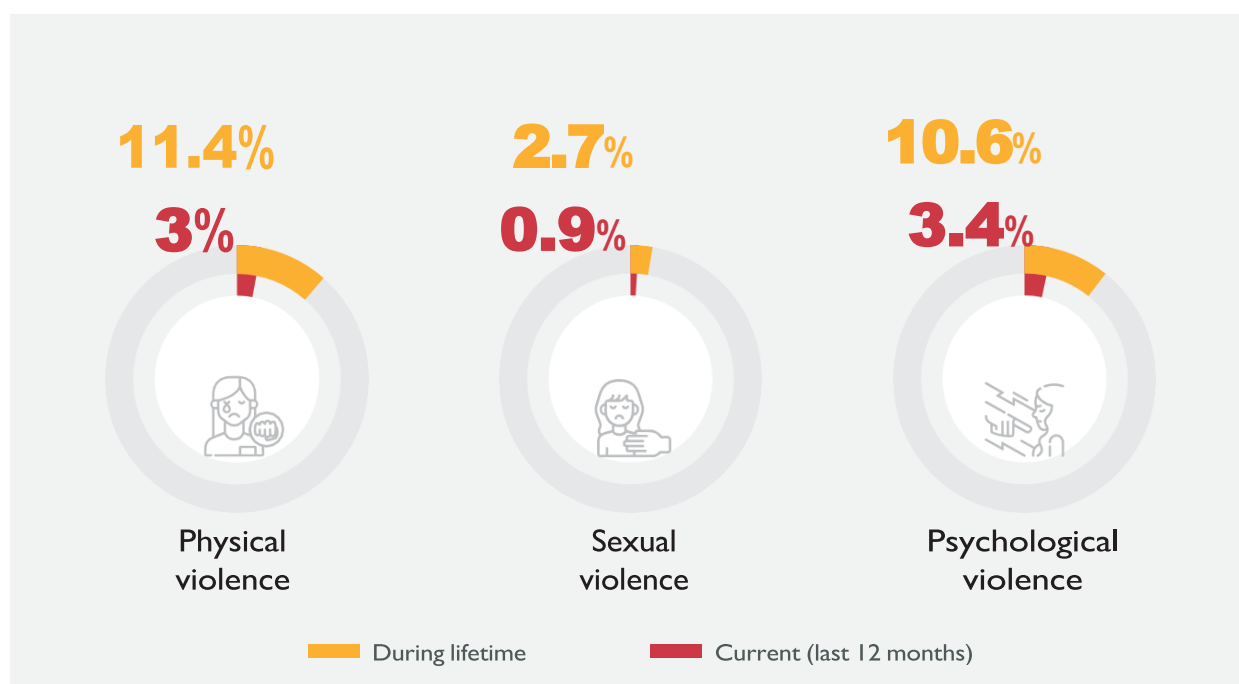
22. It should be noted that data for Turkmenistan, like for Kazakhstan and Georgia, is characterized by a noticeable difference between the prevalence of IPV throughout the life course and in the last 12 months. This suggests that women were less likely to report recent or ongoing violence than they faced violence at some time in their lives. This situation may be the result of the reluctance or fear of the respondents to talk about the current period of their lives. In this case, it is especially important to understand the seriousness of the risks for women who are in crisis and do not dare to seek help.
23. Cultural taboos against discussing domestic violence with outsiders, fear of retaliation, and economic and social barriers often prevent women from speaking out about violence. The normalization of domestic violence may also be a reason for not allowing female respondents to report their experiences in a survey. Such factors play a particularly significant role in situations of ongoing violence where the current spouse or partner is the source of violence.
24. Moreover, in addition to gender inequalities and power disparities within the family, the social justification of violence as a disciplinary action when a woman does not comply with certain expected gender roles, plays a contributing role to sustaining violence in domestic settings. Data from the 2019 Multiple Indicator Cluster Survey (MICS) shows that a large proportion of women (58.4%) aged 15-49 years consider violation of restrictions and obligations imposed by spouse control as a sufficient

reason for husband to beat his wife<sup>12</sup>. This data is especially alarming as the same attitude back in 2015 was lower (35%)<sup>13</sup>.

25. The results of the survey demonstrate that the prevalence of various forms of violence against women by a husband or partner in Turkmenistan is as follows: 11.4% - physical violence, 2.7% - sexual violence and 10.6% - psychological violence. Thus, similar to the experience of many countries, in Turkmenistan, respondents were least likely to report sexual violence, which may be more related to the particular trauma and cultural stigmatization of such an experience, as well as serious social and family pressures on a victim of violence.

Figure 2

Prevalence of various forms of husband / partner violence among women aged 18-59 who are or have been married or in a relationship, percent



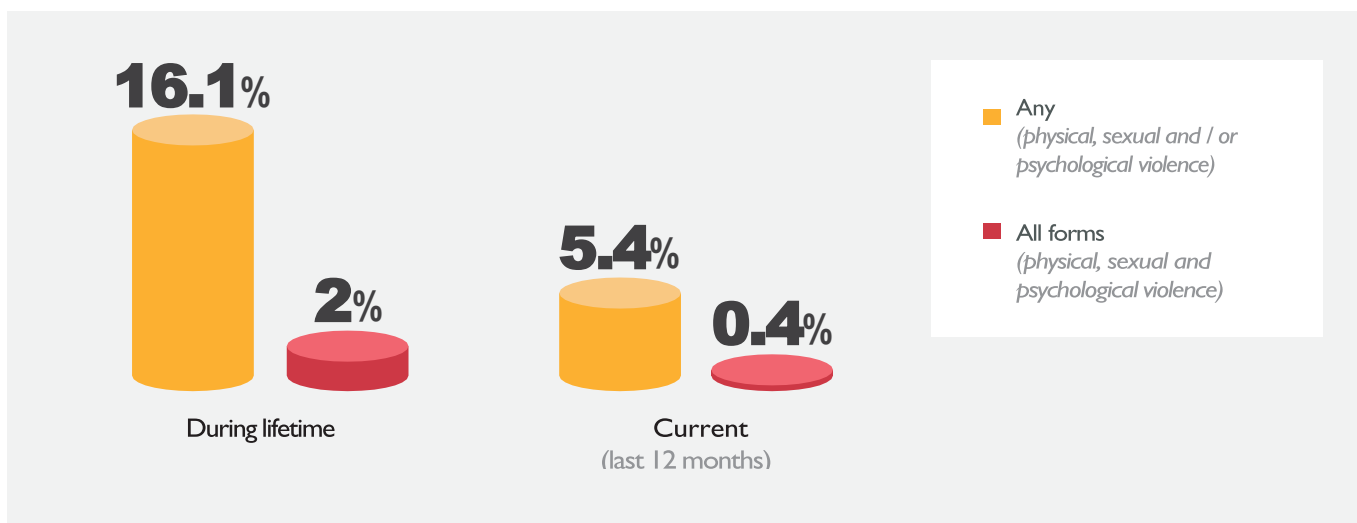
26. 5.4% of the survey participants, have experienced physical, sexual and/or psychological abuse by their husband/partner at least once in the last 12 months (Figure 3). This indicator for measuring the prevalence of three forms of violence (physical, sexual and/or psychological violence) over the past 12 months is included in the list of priority indicators of the SDG 5 - Ensuring gender equality and the rights and opportunities of all women and girls (indicator 5.2.1).

<sup>12</sup> Multiple Indicator Cluster Survey in Turkmenistan, 2019 [https://mics-surveys-prod.s3.amazonaws.com/MICS6/Europe%20and%20Central%20Asia/Turkmenistan/2019/Survey%20findings/Turkmenistan%202019%20MICS%20SFR\\_English.pdf](https://mics-surveys-prod.s3.amazonaws.com/MICS6/Europe%20and%20Central%20Asia/Turkmenistan/2019/Survey%20findings/Turkmenistan%202019%20MICS%20SFR_English.pdf)

<sup>13</sup> Multiple Indicator Cluster Survey in Turkmenistan, 2015-2016 [https://mics-surveys-prod.s3.amazonaws.com/MICS5/Europe%20and%20Central%20Asia/Turkmenistan/2015-2016/Final/Turkmenistan%202015-2016%20MICS\\_English.pdf](https://mics-surveys-prod.s3.amazonaws.com/MICS5/Europe%20and%20Central%20Asia/Turkmenistan/2015-2016/Final/Turkmenistan%202015-2016%20MICS_English.pdf)

Figure 3

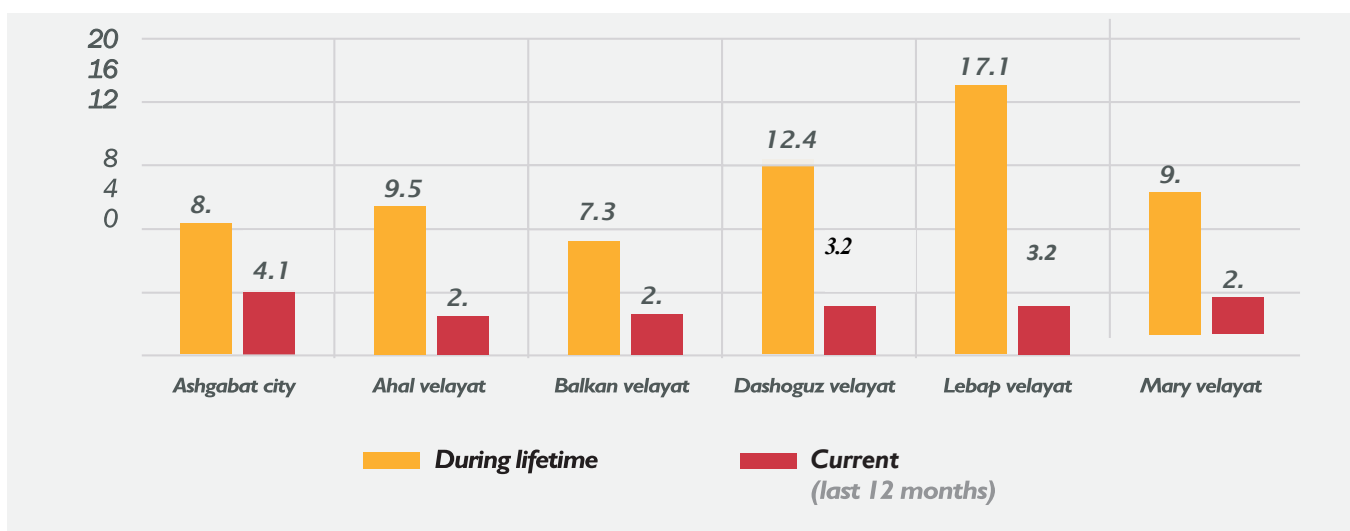
Percentage of women aged 18-59 who are or have been married/in relationships subjected to any form of violence (physical, sexual and/or psychological) and all three forms of violence by husband/partner, percent



27. The Survey revealed that the prevalence of husband/partner violence against women in Turkmenistan varies by regions. Lebap velayat demonstrated the highest rate of women reporting exposure to physical violence by a husband/partner at any time in their lives. The second highest rate is with Dashoguz velayat (12.4%). The value of the same indicator in other regions varied from 7.3% in Balkan velayat to 9.5% in Ahal velayat. The situation with the level of use of physical violence over the past 12 months in the regional context is different. In Ashgabat, 4.1% of women reported experiencing physical violence by their husband/partner in the last 12 months, while in other regions the prevalence ranged from 2.4% in Mary velayat to 3.2% in Dashoguz and Lebap velayats (Figure 4).

Figure 4

Percentage of women age 18-59 who have experienced physical violence by current or former husband / partner, by region

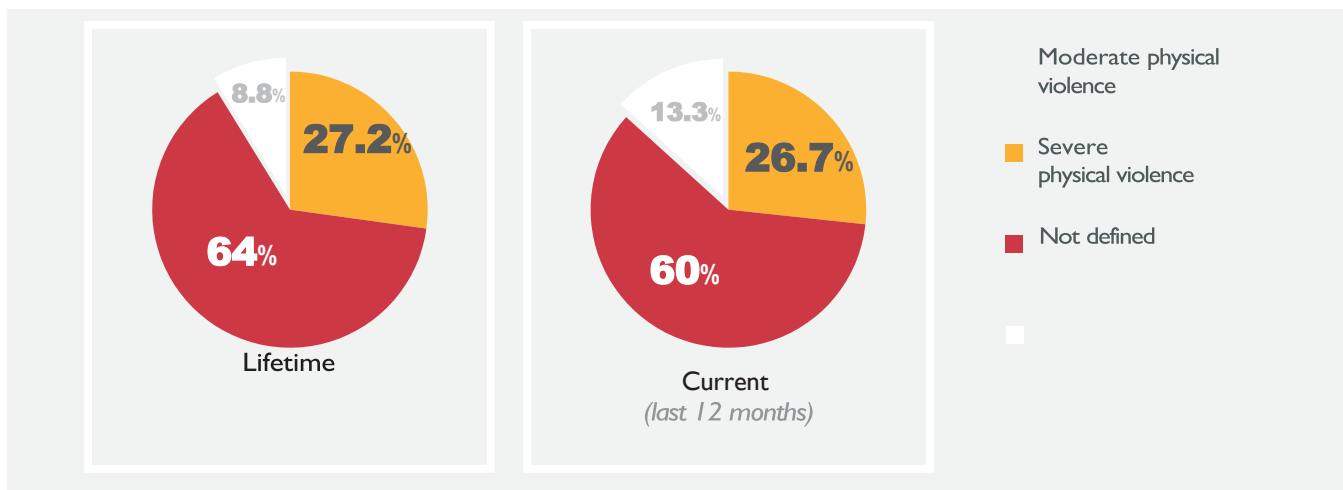




28. Unexpectedly for many, the Survey discovered a higher prevalence rate for severe form of physical violence against women than moderate. Among the respondents who experienced physical violence from their current or ex-husband/partner, 64% were subjected to severe physical violence, 27.2% - moderate, 8.8% of women did not answer the relevant questions (Figure 5).

Figure 5

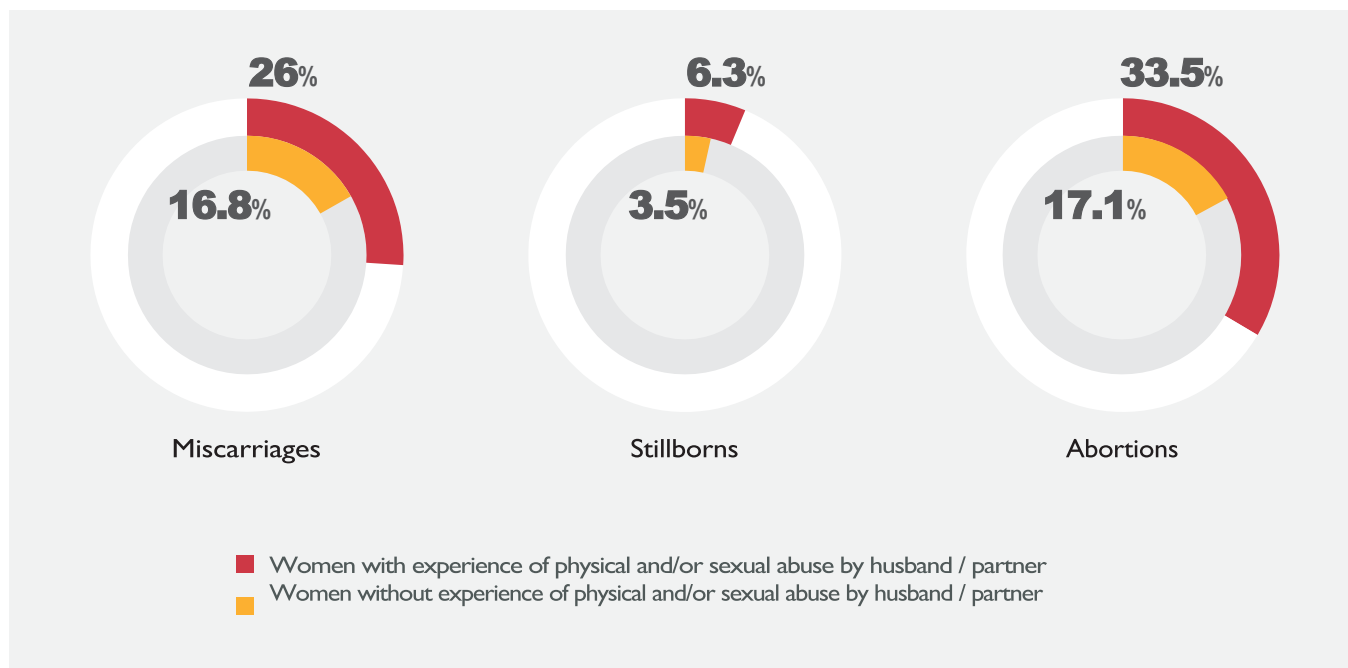
Percentage of women aged 18-59 who have experienced moderate or severe physical violence from their current or former husband / partner



29. The survey demonstrated that women subjected to husband/partner violence are more likely than women without experience of such violence to face problems with reproductive health. Among women who experienced physical and/or sexual violence by their husband/partner, 33.5% resorted to have had an abortion, 26% had a miscarriage, and 6.3% gave birth to stillborn children (Figure 6).

Figure 6

Percentage of women aged 18-59 who are or have been married/in a relationship who have ever been pregnant with an adverse reproductive health impact



### III. Conclusion

30. The sample survey on “Health and status of a woman in the family in Turkmenistan” is the first experience in collecting data on the prevalence of domestic violence against women, its main characteristics and associated factors. Analysis of the results demonstrated that, in general, the Survey managed to answer all pre-formulated key questions, thereby achieving the set goals and objectives.
31. The results of the survey made it possible to establish the presence in the country of a level of prevalence of domestic violence against women, comparable with the similar data from a number of countries in the region of Europe, Central Asia and the South Caucasus. The Survey shows that reports of severe physical violence outnumber reports of moderate violence over a lifetime, and most of the survivors’ experience violence more than once. This situation requires the need to build a system of assistance to victims of violence that can quickly and effectively respond to gender-based violence and provide essential services.
32. Characteristics of all forms of violence (physical, sexual, psychological and economic) both for the country as a whole and for regions were identified. The results made it possible to highlight the general socio-demographic characteristics of the groups of respondents. It is suggested that a more in-depth study of the situation will be needed in order to further develop response policies and strategies, advance national legislation, establish national network of essential services to support the victims of GBV.
33. The Survey was not only for collecting and analysing GBV data, but also served as effective instrument for developing recommendations and follow up actions in responding to GBV from different angles, including the advancement of national statistical capacities in providing gender and GBV data. Within the Survey outcomes, the Government of Turkmenistan committed itself to “continue and improve the collection and analysis of data on the frequency, prevalence and characteristics of gender-based violence in and outside the family”<sup>14</sup>. Also, the Survey called to “use survey data to conduct in-depth qualitative research on domestic violence and other types of violence against women belonging to vulnerable groups (women with early marriages, women with disabilities, women from remote areas, or migrant women), with particular attention to additional barriers to support and protection that such groups may face”.
34. Recognizing the leading technical role of the State Statistics Committee of Turkmenistan to collect and analyse data on violence against women and generating gender statistics, the Survey recommended advancing the capacity of the Committee by investing more in its technical and human resources. These investments will help to conduct qualitative and quantitative surveys to track trends in domestic violence, monitor the relevant SDG indicators, and provide reliable data for relevant national development programs and action plans.
35. It shall be commended and recognized that right after the Survey, the Government of Turkmenistan developed a Road Map with concrete actions to address the major outcomes of the research. The scheduled actions include improvements in national legislation as it still lacks legal definitions for GBV and domestic violence to start with. The engagement of healthcare, police and social support services providers under the approach of Multi-Sectoral Response to GBV is another important area to develop and expand. Informing women about their rights and choices, ensuring access to reproductive health services and choices, expanding education and employment opportunities are also under the focus of response actions.

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<sup>14</sup> Sample Survey “Health and Status of a Woman in the Family in Turkmenistan”  
<https://turkmenistan.unfpa.org/en/publications>