

Understanding Perceptions of Intrafamily Violence from Members of Multiethnic Indigenous
Communities in the Colombian Amazon

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Abstract

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ABSTRACT

Indigenous groups in Latin America are social groups with less access to basic health and education services, making ethnic-racial status a cause of health inequities. Indigenous women have been historically marginalized as they have poorer reproductive health outcomes and possibly higher prevalence of violence against them. More information on Intrafamily Violence (IV), Violence Against Women (VAW) and in eliciting indigenous people's perspectives on these types of violence is needed. This qualitative exploratory study aims to fill this literature gap by exploring perceptions of VAW within the IV concept among members of two multiethnic indigenous communities in Vaupés, Colombia through Focus Group Discussions (FGDs) as well as In-Depth Interviews (IDIs). Our most notable findings were gender differing views, excessive alcohol consumption, lack of interculturality between indigenous people and western service providers (health, justice, and protection), as well as a perpetual *macho* culture affecting future generations in these communities. Loss of culture was the fundamental theme which encompassed every single perspective of these types of violence. From the social disorder to the differing perspectives between men and women, losing the indigenous culture is closely knit to intrafamily violence increase and inhibits the concept of living well, "*Buen Vivir*". Indigenous women in this region would benefit from a co-designed

organizational strengthening process between indigenous authorities and western institutions to further prevent the loss of culture and regain traditional practices that will mitigate IV/VAW and promote *Buen Vivir*.

INTRODUCTION

Intrafamily Violence (IV) is the collective term used to refer to physical aggression, sexual abuse, neglect, abandonment and maltreatment among others perpetrated by someone with familial, spousal, or parental relationships, or someone with ties to power relationships to the victim.¹ Women suffer the consequences of IV more than men, in fact Violence Against Women (VAW) is a global problem that affect approximately 30%² of all women in a relationship.

Factors that influence men perpetrating violent acts against female partners include educational attainment, poverty, exposure to childhood violence, imbalanced decision-making power, attitudes that condone violence, and alcohol abuse.³⁻⁵ Moreover, women who experience physical or sexual violence by their partners are more likely to have an abortion, suffer from depression, have low-birth weight babies, and as many as 38% get murdered, in comparison to women who do not experience these types of violence.⁶

Indigenous groups in Latin America are a social group with less access to basic health and education services, which makes ethnic-racial status a cause of inequity in health.⁷ Indigenous women have been historically marginalized as they have poorer reproductive health outcomes⁸ and a higher prevalence of intrafamily violence,⁹ although controlling for certain risk markers may suggest otherwise.¹⁰ Nonetheless, Intrafamily violence against indigenous women may prevent them from playing the crucial role of being a catalyst to achieve the sustainable development goals in their communities and violate the spiritual and cultural identity of indigenous peoples as a whole.¹¹

Indigenous populations comprise 3.4% of Colombia's overall population with 102 indigenous groups, of which many are endangered.¹² VAW among these groups is mostly researched with a

focus on violence from the military, paramilitary, and armed conflict and scarce research emphasizes acts of violence perpetrated by friends, neighbors, relatives close to the victims, including husbands and intimate partners.¹³ This lack of data was recognized by the National Organization of Indigenous Peoples of the Colombian Amazon (ONIC) in a mandate issued to portray the realities and challenges of indigenous women who are in extreme disadvantage not only through ethnic discrimination, but also through gender and social class inequities.¹⁴

It is important to recognize that indigenous populations in Colombia have their own jurisdictional functions within their own territorial scope, including management of IV/VAW cases, provided they are not contrary to the constitution and laws of the country.¹⁵

Understanding this system as well as the challenges in the territory is paramount to fully identify how indigenous populations approach issues of IV and VAW in Vaupés.

In the Amazon region of Colombia there are geographical challenges as small villages settled among river spouts and can only be accessed through canoes and small boats and in rare cases by planes, making it extremely difficult for VAW victims' access to care, as well as for institutions to conduct preventative interventions. Moreover, the scarcity of employment opportunities in this region affects mobilization of populations and fragility of traditional support networks,¹⁶ therefore contributing to different forms of violence.

Since there is little to no information regarding eliciting indigenous people's perspectives on VAW, this study aims to fill this literature gap, by exploring perceptions of VAW within the intrafamily violence concept among members of two multiethnic indigenous communities in the Colombian Amazon region. Understanding local perceptions about these types of violence can

provide an insight into the types of interventions that can be implemented to mitigate and prevent future violence against women and children in these communities.

METHODS

Study Design and Population

This descriptive exploratory study was carried out from July to December 2019 in the province of Vaupés and in the capital city Bogotá. The study used a semi-structured guide for conducting In-Depth Interviews (IDIs) as well as Focus Group Discussions (FGDs) with various members of Puerto López and Santa Marta villages. These two villages were chosen for the study as they prioritized the topic of IV in their “Community Action Plansⁱ” and due to their proximity with the municipality of Mitú. Both villages are located along the river spout Cuduyarí off the Vaupés river (Figure 1). Puerto Lopez is comprised of 96 inhabitants within 16 families and 7 ethnic groups among its members. Santa Marta is comprised of 162 inhabitants within 34 families and 10 ethnic groups among its members.¹⁷ Study participants varied in ages, ethnicities, and were both female (n=7) and male (n=15). IDIs were also conducted with personnel (n=5) from the relevant institutions from the Health, Justice, and Protection sectors in the municipality of Mitú.

Recruitment

A key informant was trusted to conduct a purposeful criterion sampling¹⁸ to select participants. His expertise and prior experience dealing with IV cases as a nurse assistant as well as his trust with community members, made him ideal to conduct this work. The inclusion criteria consisted

ⁱ Community Action Plans are documents in which the community proposes the plans to tackle some of the most pressing issues in their village such as lack of community integration, gossiping, GBV and general violence in the village.

of selecting community members with knowledge on the topic, who dealt with cases of IV such as village chiefs, wisemen, and other leaders. Other members from different ethnicities who were over 18 years old were also included to have a broader range of responses. Inclusion criteria for the personnel from institutions were the position they held at the time of the interview.

Participants did not receive any compensation for their participation.

Data Collection

A semi-structured questionnaire was developed in Spanish as the main instrument for the interviews, which was reviewed for cultural context by the key informant. This questionnaire used open-ended questions to explore the perceptions of VAW within IV from participants, both in IDIs and FGDs. IDIs were conducted to gather deep and intimate personal thoughts regarding IV to assess individual experience. On the other hand, FGDs sought to gather collective community understandings as to how these issues are perceived in the villages.

After each participant was informed of the purpose of the interviews, all signed an informed consent form prior to being interviewed. IDIs and FGDs with men were conducted by the Principal Investigator (PI), a man with western education fluent in Spanish but not in any indigenous languages. Due to the sensitivity of the subject, the research team agreed that a woman should conduct IDIs and FGDs with women participants. Two women conducted this work, one working for *Sinergias*ⁱⁱ and the other, an indigenous woman from Puerto Lopez village, who contributed with the necessary social context knowledge. This second research assistant was instructed on how to conduct IDIs which she then conducted in her native

ⁱⁱThe PI partnered with Sinergias which is the Colombian NGO working in implementing good practice, strengthening local capacities, and impacting of public policies to promote health, wellbeing and social development of indigenous populations.

tongue Cubeo. This information added an extra layer of depth and richness to the study that would not have been possible without a Cubeo native speaker. The PI also participated in community meetings and had informal conversations with members from both villages. He stayed at least 2 weeks in each village during data collection which also added richness and depth to the study.

Data Analysis

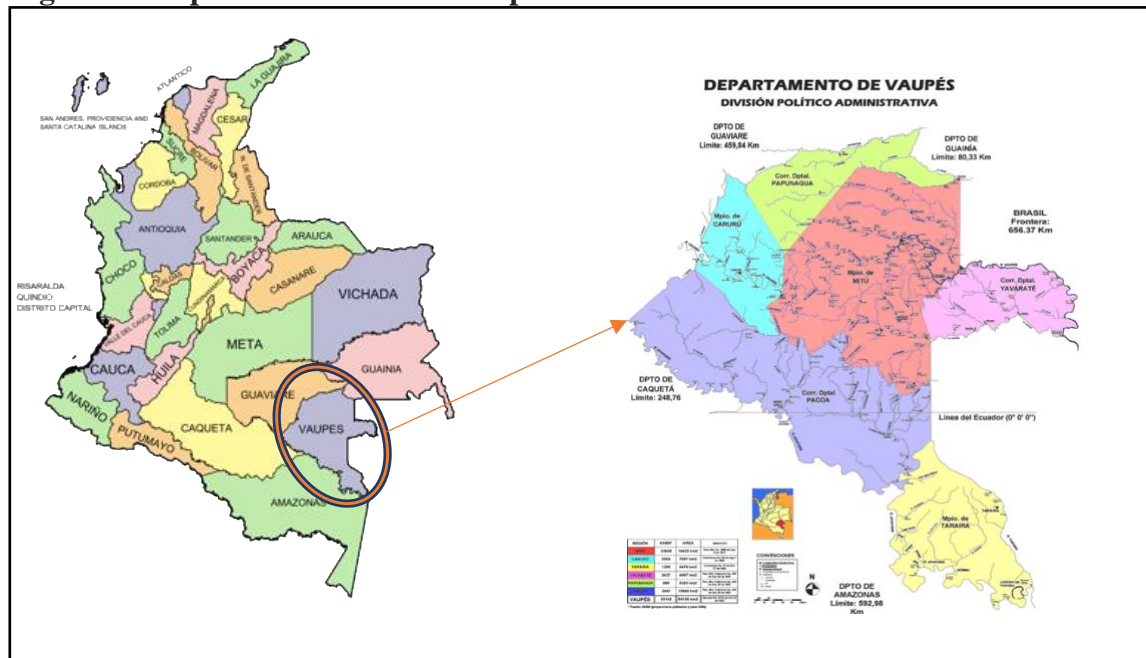
Each interview and focus group discussion was recorded in digital format (mp3) and then transcribed by the PI verbatim into a document in Microsoft Word ©. The transcripts were coded and analyzed using Atlas.ti © version 8. Both, thematic and structural codes were generated through the analysis of the transcripts and codebooks were developed by the PI. A theme identification approach¹⁹ was performed with all the relevant data. The codebook was iteratively defined with a second coder in order to have a thorough final version.

Ethical Considerations

This research topic presented ethical concerns that required for the PI and the research team to become familiar with the routes of attention that could be activated if a participant victim of these types of violence was encountered during IDIs and was in need of support.

This study went through the Institutional Review Board (IRB) of the University of Washington, which confirmed that it did not need a review because it was not considered research based on federal guidelines. This study was funded by the Thomas Francis Jr. Fellowship from the Department of Global Health at the University of Washington.

Figure 1: Map of Colombia and Vaupés Province



Source: Google and Vaupés Governorate

RESULTS

A total of 4 FGDs and 17 IDIs were conducted (See table 1). Interviewed community members' ages ranged from 18 to 63 years and participants belonged to 4 different indigenous ethnic groups. Although these numbers represent the formal and recorded interviews conducted, the number of people with whom this topic was discussed is greater.

Table 1: Type and characteristics of Interviews

| Type of Participant | Method | Age Range | Total Participants |
|--|-------------|-----------|--------------------|
| Men | FGD 1 (n=6) | 21-63 | 14 |
| | FGD 2 (n=2) | 30-63 | |
| | IDI (n=9) | 17-59 | |
| Women | FGD 1 (n=2) | 19-53 | 7 |
| | FGD 2 (n=3) | 18-49 | |
| | IDI (n=4) | 39-53 | |
| Personnel from Institutions (SRH*, Mental Health*, Health Secretary*, ICBF**, Family Commissary) | IDI (n=5) | 30-52 | 5 |
| Total | | | 23*** |

*Sexual Reproductive Health, Mental Health, and Health Secretary are all within the Ministry of Health

**ICBF-Instituto Colombiano de Bienestar Familiar (Colombian Institute of Family Wellness)

***Some participants from the FGD were also interviewed individually

PERCEPTIONS OF VIOLENCE

Social Disorder and Harm

Almost all participants perceived violence between a man and a woman or among family members as an abnormal phenomenon. Although most participants did not make a clear distinction between IV and VAW, they reported that these types of violence were household problems “*problemas de casa*” that can bring harm “*hacen mal/ daño*” to individuals and/or families and social disarray or disorder “*un desorden social*”. Sexual violence, on the other hand, was explicitly addressed as a very serious or severe problem “*un problema gravísimo*” yet not talked about much during interviews. Furthermore, participants indicated that saying bad words against someone “*decir malas palabras [hacia alguien]*” is the most common way of initiating violence. In this context bad words do not mean swear words, but rather having a quarrel or nagging someone using hurtful language usually towards a spouse or family member.

“...So by expressing yourself, you are not hitting [anyone] but if you are saying bad words to another person, what you say hurts the heart, and [it goes to] the mind and does not let the person be in peace and tranquility.” (Middle age female participant)

Wrongdoings and Denial

Similarly, all participants perceived VAW and IV, as wrongdoings and were quick to condemn these acts, some even argued that it is not normal to live with these types of violence.

Paradoxically, several participants expressed that most women who suffer from violence do not

see themselves as victims of it, but instead because there are many other women suffering for the same reason, they normalize the problem.

Another phenomenon arising from the data pertains to participant's denial of these types of violence occurring in their household or their village. Most participants referred to "others" having these problems. There was a strong sense of repudiation of cases of VAW and IV in participants' villages, yet the very few who acknowledged them in their village, reported they happened everywhere but in their households.

"That [IV and VAW] happens here, I do not [want to] point this out but here if you interview [villagers], they deny it because it affects him and the other [spouse]. They always deny it" (Older male participant)

FACILITATORS OF VIOLENCE

Excessive Alcohol Consumption

Although participants reported various reasons for VAW and IV such as lack of trust, gossip, lack of respect, laziness, jealousy, lack of education, and everyday couples and familial misunderstandings, the leading factor for why these types of violence occur, was perceived by most participants, as the excessive alcohol consumption from several community members.

Numerous participants reported that when people, especially men are in a state of drunkenness, there is "an increase in the number of problems" in the community with violence being the most prominent of them all resulting in a nonbelligerent environment. Furthermore, participants noted that many, if not all these factors, have contributed to a "neglectful attitude to cultural practices social control", which in turn, have been a gateway to misbehavior and wrongdoings and

ultimately have made IV a rather normalized pattern within their communities. Multiple participants expressed that there was a strong connection between excessive alcohol consumption to death since in recent years a woman had committed suicide after being raped. This topic hung like a dark cloud over the entire region especially because the perpetrator was still living among them.

Lack of Sanctions

When participants were asked about how sexual violence cases are handled by indigenous authorities, there was a lot ambiguity in their answers, yet there was consensus that their own system of governance needs to be strengthened to face the problems of the community and guarantee the functionality of a route of attention and sanctions against IV including VAW.

“In the event that if violence occurs within the couple, it has always been seen that nobody intervenes, and they solve it themselves. But if problems are very severe [this implies sexual abuse, or physical injuries], the [village] chief can help” (Young female participant)

Lack of Respect

Participants also reported that in traditional times there was far more social control and respect for the elderly, cultural practices, and traditions as community members really heeded the village chief's advice, thus resulting in less violence against women and children. In the past, indigenous

people consumed chichaⁱⁱⁱ rather than the western alcoholic beverages so readily available today such as beer, rum, and aguardiente^{iv}.

“[in olden times people] got drunk even fell asleep on the ground, but there was no violence between women and men. Because before drinking chicha the chief of the maloca^v explained that they were not going to do this [drink and fight], and they always listened”
(Older male participant)

COMMUNITY CONCERNS

Buen Vivir

For indigenous peoples in the Amazon region, the concept of Living Well or “*Buen Vivir*” is often used to express how health is a result of a harmonious balance in relationships with others, including the territory. Thus, when participants were asked about their main concerns regarding how IV impact their communities, most participants expressed concerns for the lack of community norms and the increase in disruptive behavior in the community that makes it hard to live in peace and live well.

“My biggest concern is how can we control this? ... The drinking. Here it has been... too... we haven’t lived well. This is very noticeable, there are all these problems and the community is not in peace” (Older male participant)

ⁱⁱⁱ A fermented drink made from yucca.

^{iv} A strong alcoholic beverage made from fermented sweet musts, and vegetables.

^v Ancestral indigenous house.

“... Many times these types of violence continue [from generation to generation] and they end up in the home, beating the wife, the children, the parents, and these [things] contribute to people in the village not living in peace, not living well” (Young female participant)

Lack of Advice

Conversations with participants always floated towards looking at the past. Multiple participants reported that their parents or grandparents were part of healthy communities living well. In past times the youth listened to their parent’s advice regarding living well and what activities they should and should not engage in. In the past, there was an enormous sense of respect for the elderly and the culture and people lived by the norms established. Today, there is a sense of negligence on one end from the older generations to teach the younger ones, as well as a sense of reluctance on the younger generations to live according to indigenous customs, culture and to live well.

“...They [old people] used to advice men and women [in the village] even from a very young age so that when they got a spouse, they already had that advice so they could live well and know how they should treat each other. When they formed their home they already lived well, and today there are no such advices” (Young female participant)

INSTITUTIONAL VIEWPOINTS

Development and Rapid Growth

To better understand the perceptions that indigenous people in the Vaupés region have regarding IV and VAW, it was important to interview personnel from institutions that play a pertinent role in the prevention, mitigation, and process of these types of violence. From these interviews, it was reported that the constant and rapid growth and development in the municipalities across the Vaupés province have brought with them a disruptive change into the indigenous lifestyle. Indigenous people live in different times than westerners and must adapt to changes abruptly which affects them perpetually. Participants from institutions reported that violence among indigenous people is a constant and everyday occurrence and a phenomenon that is not discussed among the communities. This is a very complex issue that implies talking about rights and responsibilities, which in this context, is easily dismissed by indigenous communities.

“For them [indigenous people] it is a complex issue... because they try to explain the concept in general terms of what violence is. They try to justify themselves in the fact that it could be something very ethno-cultural^{vi} because they cannot find a valid answer to identify the true causes and reasons of why these types of violence occur” (Institution employee female participant)

^{vi} This term here is being used as pertaining to the proper indigenous culture.

Increase in Violence Reporting

Furthermore, personnel from institutions expressed that most indigenous people did not identify more forms of violence other than physical and verbal. However, they noted that indigenous women are reporting IV cases to western authorities much more frequently than in the past.

“The years that I have been here in Vaupés, I think that intrafamily violence has not changed, what happens is that women now report these cases. They now understand that it is not right, they [women and children] have rights. This is thanks to sensitization and communication campaigns” (Institution employee female participant)

Lack of Interculturality

Similarly, the data seemed to show a disconnect between indigenous leaders and institutions regarding these types of violence’s approach, management and finding the most appropriate routes of attention for its victims. It was apparent that institutions struggled to work with indigenous leaders as these did not participate in meetings where these issues were discussed. To that point indigenous leaders expressed that their opinions were not taken seriously, or as plausible contributions to find better ways to prevent and mitigate VAW and IV. Despite the disagreements and different viewpoints, institutions did acknowledge that there is a considerable lack of intercultural focus when managing these types of violence.

“Personally from my point of view, we lack a lot in the ethno-cultural [approach], despite the fact that this is clearly an indigenous region, those of us who are not indigenous here are a minority and we lack many tools to ensure that services and

anything from the prevention side is with an ethno-cultural approach” (Institution employee female participant)

GENDER DIFFERENCES

Harsh Language and Obedience

The research also showed differences in the perception of these types of violence between men and women. Not surprising, in most of the cases one gender is the perpetrator, usually males, and the other gender is the victim of these types of violence, usually females. One of the biggest distinctions between women and men’s perspective of these types of violence pertained to how IV affects children. Naturally, women have maternal instincts and are genuinely concerned for children’s wellbeing as they also suffer the consequences of verbal, physical, and other types of violence.

“Sometimes we speak very harshly to children and that is on the minds of children hurting them, and many times those [types of] violence continue more and more until they end up in the homes mistreating their woman [and] their children” (Middle-aged female participant)

On the other hand, men expressed concerns for their children’s lack of obedience and need for correction of bad behavior. Similarly, men expressed concern regarding the types of examples children are receiving from their parents and from the community in general. There is a constant concern of what is being passed down from generation to generation and the implications on the indigenous lifestyle.

“Yes, it [the respect of children towards their parents] has changed. Children when they are young, they obey easily, a young man [who is] 15 [years old] no longer obeys. Today in schools they learn other things and when they come home to their family, the youth..., they rebel” (Older male participant)

Macho Culture

Moreover, this research showed that personnel from western institutions and indigenous women agreed on the perception of gender roles and how *machismo* seemed to be a contributor to these types of violence.

“Well the factor of macho culture is a factor that influences a lot because for the indigenous man, he suddenly thinks that he has the right to hit his wife because she is his or hit his children because he is the man in charge” (Institution employee female participant)

Meanwhile indigenous women also expressed their desire for men to forget about the macho culture and take part equally in the raising of children and helping with household chores.

“He also has to help [with household chores], to avoid arguments ... if he doesn't help her... well that's where the fights come from. They have to work equally, [he needs to] help the woman and the woman also help the husband and so they live well. They can live together well” (Older female participant)

Violation of Rights

Certain issues of gender equality were embedded in participants' language, as particularly one female participant with prior experience and knowledge of the topic of VAW expressed her concern for women's rights and the need to speak freely and unafraid in front of men.

“...I used to work in different villages with the women and I used to listen to them, and in front of the public with men and women around I used to say this [violence] should not happen. We [women] must not allow [men] to violate our rights. I was not afraid to speak” (Middle-aged female participant)

IDENTITY CRISIS

Loss of Culture

The fundamental theme that emerged during IDIs, FGDs and informal conversations was how indigenous culture is rapidly evolving due to the technology reach, educational system through the number of indigenous children currently in boarding schools, and the overwhelming quantity of western media within these communities. This rapid acculturation has left deep gaps between and within indigenous communities. Most noticeably, participants reported how the younger generations show a lack of interest in learning traditional dances, weaving traditional baskets and crafts, and wanting to participate in cultural practices and customs such as gathering around the fire at night and listen to the elderly tell stories about their culture. It is said that the youth is not interested in becoming traditional healers or “payes^{vii}” that were prominent figures of authority in the past. The youth have instead started listening to western music, watching TV

^{vii} This term here is used as a traditional healer or shaman.

shows, avoiding working in their plots of land “chagras^{viii}” and participating in community meetings. This lack of engagement in indigenous cultural practices may leave the youth with too much free time on their hands that sometimes is counterproductive and a contributor to violence in the communities.

“Because of acculturation, the youth of today no longer value the indigenous culture. They are already all confused and have so many addictions, so they change their ways and try to change their culture, but since they are indigenous, they are not up to the level of white culture, so they are confused. They do not understand what the behavior and the way of life of the indigenous people is... Today they do not know” (Older male participant)

This acculturation of western culture has been enticing the youth to slowly but surely fall victims to media consumption in all its forms. Some participants report that indigenous youth are consuming all types of violent films including pornography which could be unleashing an increase in sexual violence. The research further showed that there was consensus among older participants and one young participant regarding the youth no longer paying any attention to the elderly, nor following their advice as it was customary for the youth to do in past times.

“In the past, people were highly respected and the advice from parents and grandparents was well accepted. Now they do not value that, they [the youth] also want to recover the

^{viii} Plots of land where indigenous people harvest yucca.

culture from the experiences of indigenous peoples but how are they going to gain it if they despise it themselves?” (Older male participant)

“In the past, obedience was for life. From adolescents, to the youth and even when they formed their [own] families they still obeyed and followed the advices [given]” (Older male participant)

“In the past, the old men would give us advice. They said, ‘this is wrong, this is right’ and now we don’t know that, we don’t even know the [healing] prayers or anything. We only know the bad [stuff]” (Young male participant)

MOVING FORWARD

Proposed Solutions

Because IV affects not only the people directly involved in the violence, but rather it disrupts the harmony and functioning of the entire village, it was important to explore possible solutions. Mainly, participants suggested to focus on strengthening community and cultural practices. Although there were many proposed solutions, the three most prominent are highlighted next. First is the need for a culture of continuous advice giving and receiving. This means that just like in olden times, the youth used to heed the elderly’s advice on treating their spouses, being a responsible family man or woman, and simply living a conscientious traditional indigenous life. Not only do younger generations need to respect and listen to the elderly, but the elderly also need to purposefully seek to give helpful advice and to correct the behavior of youth. Particularly the village chief has the responsibility to advice the villagers against heavy drinking and any type of violence.

“The chief has to tell everyone before the drinking begins to not do that [fight or inflict violence], that they can drink and the drunks to sleep calmly. If they see someone on the floor, leave them alone until he or she wakes up but be vigilant [of them]” (Older male participant)

Secondly, there is a need for indigenous people to receive more information and education regarding matters of violence against women and intrafamily violence in general. Multiple participants expressed that some western institutions conducted a few workshops on the topic but that more of these educational strategies are needed, particularly adding an element of re-learning the indigenous culture and how this did not condone any type of violent acts.

“The whole village needs this... my first recommendation is to do trainings, and then do workshops not only by Sinergias but also involve the Ministry of Health, Colombian Institute of Family Wellness, and Family Commissary” (Middle aged male participant)

“I believe that violence is something internal from each person, maybe [due to] lack of education. Not only lack of education on the academic side, but also on the [indigenous] cultural side... I think it's time to remember what we used to do [in the past]. Maybe we can get three [older] adults who tell their experiences on the indigenous side” (Older male participant)

Third, there is a need to develop village norms and agreements by which each community lives by. Several participants expressed the need for the village authorities to come up with an agreement to prevent these types of violence through the collaboration of institutional

entities. One of the most popular ideas proposed was regarding establishing norms about when and where alcohol can be consumed in the village. Furthermore, one participant expressed the need to conduct evaluations after these norms are established in terms of how the community is doing with VAW and IV prevention and mitigation.

“This [evaluation] could also be done [for] intrafamily violence. How do you [entire community] see it? that is what is missing. Just as they [institutions] do activities and evaluate them, then they should also evaluate this. For example, in a month [we can] evaluate how we are doing, if we have committed ourselves [to prevent violence] and how we are doing in that matter. We could see the [level of] compliance as a community every month” (Older male participant)

DISCUSSION

This qualitative study identified perceptions of IV and VAW from members of two villages in the Colombian Amazon region and highlighted the main factors around these types of violence. Noticeably, there was reluctance to acknowledge IV/VAW happening in their own village and/or households. Overall, participants were hesitant to clearly convey their thoughts possibly because the problems were so present and permeated through the village’s lifestyle, so much so, that some women did not see themselves as victims of these types of violence due to their ubiquity. Moreover, there were gender differences in terms of perspectives, as men have a cultural focus whereby, they want children to be more respectful of everyone in the village, especially the elderly, as well as knowledgeable of the indigenous customs and traditions, therefore, failing to acknowledge issues of IV/VAW directly. On the other hand, women

expressed their concerns about children getting hurt through IV and for the cycle of violence to perpetuate once children grow up and have their own families.

It is important to note that men usually participate in the decision-making process regarding family and village matters instead of women which is why addressing this topic and proposing solutions can be complex. Adding to the complexity, because women have a virilocal residence, they do not have the necessary support network in their husband's communities, nor is it feasible to pursue justice against their perpetrators in the village, since most village authorities are part of the perpetrator's family. Sadly, this inhibits a response for victims to get justice through either, the indigenous, or national justice systems and for sanctions against these types of violence to be implemented.

The argument of excessive alcohol consumption contributing immensely to IV/VAW and to social disorder and disruption of village lifestyle is something worth noting. Excessive alcohol consumption is the number one factor and disruptive behavior of Living Well or "*Buen Vivir*" as it interferes with healthy relationships of a person with themselves, with their family, the community, the territory, and nature.²⁰ This disruption of *Buen Vivir* has altered the social norms and contributed to a loss of cultural values, ideas, and lifestyles and, in part, is a result of the western concepts taught in schools that guide the youth to a "progressive" knowledge, which derails them from their territory, from their historical, cultural, social and ecological interactions and into a breakage of transmission of knowledge that remains only with the elderly and causes a loss of worldviews, thoughts and meanings of a territory.²¹ Early identification of IV/VAW cases as well as sensitization and strengthening the capacities of institutions in order to support indigenous communities through quality services and with an intercultural approach can be

useful in preventing this catastrophic derailment from cultural, social, and ecological interactions by indigenous communities.²²⁻²³

Furthermore, it was imperative to obtain participant perspectives regarding solutions to these types of violence and they must be further explored. Establishing a structured and co-designed organizational strengthening process of educational activities regarding IV and strengthening the development of an Indigenous governance system will be useful for developing community norms which were solicited by multiple study participants. Similarly, working with indigenous authorities to establish a culture of advice giving and receiving can help in regaining traditional cultural practices and avoid identity loss.

A handful of interventions aimed at preventing violence against women in some African and Latin American countries have already proved successful. One of them is *SASA!* a community mobilization approach for preventing HIV and violence against women used in Sub-Saharan Africa which was associated with lower onset of abuse and a lower continuation of prior abuse of women.²⁴⁻²⁵ Similarly, *In Her Shoes* is an interactive program that allows participants to temporarily perceive life as a woman experiencing violence. This program goes beyond solely raising awareness as it brings forth the realities that women and girls face daily, particularly in what is often a missed area, the stigma they face when seeking support.²⁶ *Strong Families, Love and Limits* is a primary prevention program already being implemented in the region, based on scientific evidence which seeks to prevent risky behaviors through the promotion and strengthening of communication between parents and children and advice on parenting skills and family orientation, as well as promoting mental health and adolescent development for 10 to 14 year olds.²⁷ Interventions such as these are worth piloting and continuing in this region as long

as the indigenous context is accounted for, but more importantly, their implementation is done through a multifaceted approach considering the interplay among personal, situational and socio-cultural factors.²⁸ Therefore, it is critical that these programs are run by community activists and mobilizers and with a relationship building framework that would engage people in conversations and challenge their beliefs and views on IV and VAW and ultimately produce interventions that would mitigate and prevent further intrafamily violence and violence against women.

Limitations

This study had several limitations as it sought the perspectives of Intrafamily Violence in two villages in the Vaupés province which have unique circumstances due to their proximity to the biggest municipality: Mitú. This proximity may influence many of the behaviors encountered in participants, mainly because of the easy access to health, education, legal and other services including routes of attention to victims of these types of violence. Furthermore, there is a potential for selection bias from the key informant in the selection of participants. Moreover, because women were in general less available for interviews, the study population included more men than women and for the most part, older participants as young people were not interested in discussing the topic. Lastly, our small sample size provides an exploration of themes that are only suggestions for future research.

Conclusion

Indigenous women in this region would benefit from a collaborative effort between indigenous authorities and western institutions to further prevent the loss of culture and regain traditional practices that will prevent IV/VAW. It is imperative to consider the community proposed

solutions in order to co-develop corresponding interventions with indigenous authorities that would mitigate IV/VAW and promote *Buen Vivir*.

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