SEXUAL AND GENDER-BASED VIOLENCE AND ITS EFFECTS ON MARRIED WOMEN: A CASE OF NGOMBE COMPOUND IN LUSAKA DISTRICT

By

Edna Yambani

A dissertation submitted in partial fulfilment of the requirements

for the degree of Master of Arts in Gender Studies

The University of Zambia

School of Humanities and Social Sciences

2016

DECLARATION

I, EDNA YAMBANI, declare that the dissertation represents my own work and that it has not previously been submitted for a degree, diploma or other qualification at this or any other University.

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Date Signature

CERTIFICATE OF APPROVAL

This dissertation of EDNA YAMBANI has been approved as partial fulfilment of the requirements for the award of the degree of Master of Arts in Gender Studies by the University of Zambia

Signature	Date of Approval
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ACKNOWLEDGEMENT

This project would not have been possible without the support of many people. Many thanks go to my supervisor, Dr Kusanthan, who read the numerous revisions of my work and helped to make some sense of the confusion when I was on the verge of giving up. Thanks to Dr John Simwinga for his patience in enduring my slow pace of work. Also thanks to the University of Zambia for providing the necessary facilities to make this work possible. Thanks to my family for providing financial support and taking care of my little 'Suzi' while I was away from home. I would also like to thank Mrs Chibesakunda of Ngombe GBV centre and her members of staff for guidance and support. Finally, thanks to the Catechist of St Faustina Catholic Church in Ngombe/Foxdale for his support and warm welcome.

DEDICATION

I would like to dedicate this work to my family: my parents, Masiku and Aaron Yambani, may their souls rest in peace, my loving husband Eustarckio Kazonga, my daughters, Ekiwe, Masiku-Zamiwe, Suzi-Matambose and my son Waza-Fabian.

ACRONYMS

AIDS Acquired Immune-Deficiency Syndrome

CEDAW Convention on Elimination of All Forms of Discrimination Against Women

CSO Central Statistical Office

FGM Female Genital Mutilation

GBV Gender Based Violence

GIDD Gender in Development Division

HIV Human Immunodeficiency Virus

JCTR Jesuit Centre for Theological Reflection

CSPR Civil Society for Poverty Reduction

NAP National Action Plan

NGO Non Governmental Organisation

NGOCC Non Governmental Organisation Coordination Council

SGBV Sexual and Gender Based Violence

STIs Sexually Transmitted Infections

UN United Nations

UNECA United Nations Economic Commission for Africa

UNHCR United Nations High Commission for refugees

UNICEF United Nations International Children's Emergency Fund

USA United States of America

US/AID United States Agency for International Development

VAW Violence Against Women

VSU Victim Support Unit

WFC Women for Change

WHO World Health Organisation

YWCA Young Women Christian Association

ZARD Zambia Association for Research and Development

ZDHS Zambia Demographic Health Survey

DEFINITIONS

Abuse Conduct that harms or is likely to cause harm

Assault Violent attack

Children Persons below the age of 16 years.

Harassment Engaging in a pattern of conduct that induces in a person the fear of imminent harm or feelings of annoyance and aggravation.

Incest Illegal sex between people who are closely related

Intimidation Intentionally inducing fear of imminent harm in a person whether by words or actions and whether by oneself or by the use of a third party.

Perpetrator The person who inflicts violence on the other.

Responder The person who responds by taking care of victims/survivors

Survivor See Victim

Torture Severe physical or mental suffering

Victim The person on whom violence is inflicted

Violence Behaviour that is intended to hurt other people

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ABSTRACT

Sexual and gender-based violence is not only a pervasive and extensive worldwide problem but also a human rights violation. This fact is acknowledged by the UN. This study was conducted from September to November 2013 in Ngombe Compound which is an unplanned settlement in Lusaka City of Zambia. Ngombe

The aim of this study was to explore the experiences of women survivors of sexual and gender-based violence while establishing the available range of restorative services in order to improve on them. The study employed a mixed method research design which combined both qualitative and quantitative approaches. Results showed that sexual and gender-based violence manifests in physical, economical, sexual and emotional forms. Sexual abuses identified by women in their households include marital rape, rape, defilement and incest.

The causes and factors of violence identified include alcohol abuse, peer pressure, financial misunderstanding, jealousy, bride price, biased laws and above all, traditions issues. Interestingly, the lack of water and lack of a bridge in the Compound promoted violence as women and girls were raped while looking for water and when crossing a stream in the early and late hours of the day. There are inadequate services for restoration of SGBV survivors with only one Drop-in Centre At Ngombe Health Centre.

In conclusion, SGBV is real and rampant but intervention programmes are inadequate. In view of this, 4 recommendations were made: 1. Relevant authorities should control use and sale of alcohol in illegal bars. 2. Violence survivors should be thoroughly screened of STIs and the HIV virus. 3. Health personnel attending to violence survivors should undergo some kind of training in SGBV issues. 4. Drop-in-centres should be improved by including a police post, legal clinic and tight security in addition to the usual counselling centre.

CHAPTER ONE

INTRODUCTION

1.0 Background

Sexual and gender-based violence is an extensive global health, human rights and development problem that cuts across nations, culture, race, class and religion. Sexual and gender based violence undermines the achievement of gender equality thereby leaving its victims, who are mostly women and girls, in subordinate positions. It is a widespread and tragic issue with an estimate of over 25% of all women worldwide having been victims of violence perpetrated by a male partner (OXFAM, 2012). It is further revealed by OXFAM that 1 in 4 women are abused during pregnancy, putting both mother and child at risk.

In Africa, the story is the same as forced sexual initiation and sexual abuse of children is common. For instance, cross-sectional studies show that 40% of women in South Africa and 28% of women in Tanzania reported a forced first sexual encounter (Watts, 2002).

In Zambia, statistics from the 2007 ZDHS showing violence experienced by ever-married women aged 15-49 years indicate that physical violence is the most prevalent form at 46.5%, followed by emotional violence at 25.6% and lastly, sexual violence at 16.7%. Sexual and gender based-violence arises from discrimination and oppression mostly against women and children. While men and women both experience violence, there is evidence that patterns of violence against men are different from violence against women. It is usually the case that women are mostly disadvantaged by the violence (Johnson, 2008).Violence against women has been invisible for a long time (Yohannes, 2008). Due to concerns by the women's movement and gender activists, the United Nations recognised violence against women as ***Sexual and Gender Based Violence*** in 1999 (CSO, 2008). The milestones in the campaign against SGBV have been two UN declarations of elimination of violence against women

which were introduced in 1993 and 2003, as well as the 1995 Beijing World Conference on Women.

Sexual and gender based violence comes in varied forms and has emotional, psychological and physical consequences including death. Literature reveals that SGBV or even the mere threat of it contributes to the spread of HIV/AIDS. This violence increases the vulnerability of women to HIV/AIDS because it becomes difficult or impossible for them to abstain from sex when necessary or even to use a condom (UN AIDS, 2006, CSO, 2007). It is estimated that worldwide, 1 in 5 women will become a victim of rape in their lifetime and that women actually experience sexual harassment throughout their lives (UN, 2011-2012). In Eastern and Southern Africa, 17-22% of girls aged 15-19 are HIV-positive, compared to 3-7% of boys in the same age range. This pattern which is similar in many other regions shows that girls are being infected by men who are much older (UNICEF/UN-AIDS, 2007). This situation is attributed to rampant sexual abuse.

In Zambia, a research conducted by the University of Zambia revealed that there was a widespread wrong perception that having sex with a minor or a virgin will cure AIDS. The abusers infect the young ones with STIs and HIV/AIDS and because the defilers are close relatives most of the time, the victims do not often report the abuse (Katuta, 2004). A gender based violence survey report involving 2000 households in Zambia of 15-49 year olds indicates that only 7% of the respondents reported the abuse to someone (CSO, 2008).

Sexual and gender based violence occurs within homes and also in public- implying that there is no safe place for women and girls. Sexual and gender based violence is characterised by silence and non-reporting as already pointed out by the CSO (2008). This is so because, although violence may occur publicly, it is largely rooted in the attitudes of individuals that tolerate violence within the family, community and even the state (Munachonga, 2011).

As part of the solution to sexual and gender-based violence, the education of women is considered to be a liberating force in that educated women are becoming independent economically and socially so they break loose from the patriarchal discriminatory grip of men. This loss of grip by men on their women motivates the need to retain their traditional position of power and authority on women. Violence is therefore used by men to restore control on women and affirm a patriarchal social order (GIDD, 2008).

Thus, the root cause and effects of sexual and gender based violence must be well understood in a particular context before planning any prevention, response and mitigation programmes. Similarly, the eradication of sexual and gender based violence requires effective policies, laws, plans and programmes which are based on up-to-date quality statistical data and information (UNHCR, 2011).

The magnitude of sexual and gender-based violence and its effects justifies the need for further research. It is for this reason that this researcher seeks to highlight the experiences of sexual and gender-based violence survivors. This research is considered important in that it will also assist in identifying gaps in the efforts being made to care for women survivors of this violence, given the effects that the violence has on them.

Information on SGBV is so limited, scanty and varied such that the follow up responses to the violence is often of poor quality (Mullick, 2010). Some of the challenges in care of SGBV survivors include lack of human and economic resources, poor knowledge of appropriate policies and guidelines, lack of sustainability of programmes, lack of coordination of multidiscipline relevant sectors and simply the overwhelming number of SGBV survivors.

Apart from identifying gaps in the available SGBV programmes, this research will also offer recommendations on how to improve the existing programmes.

In conclusion, understanding the causes of sexual and gender-based violence will help in developing effective plans and actions to prevent it, while understanding the consequences and effects of sexual and gender-based violence will allow the development of appropriate response programmes for survivors.

1.2 Statement of the Problem

Sexual and gender-based violence is an extensive worldwide and pervasive problem which is also a violation of human rights. This type of violence is so extensive that it affects a lot of women, girls, children and eventually everyone all over the world. It is estimated that worldwide, 1 in every 3 women has been battered, coerced into sex or abused by a man in her lifetime. Moreover, about 20% of women worldwide are reported to have been abused by men with whom they live (UN, 2000).

The above situation translates to approximately 25% of women worldwide who have their human rights violated by the violence implying that they are stripped of their freedom and self-esteem. Such an extent of violence implies that a number of survivors are rendered helpless, vulnerable and even more dependent on men. The extent of the effects of sexual and gender-based violence of such magnitude means that sexual and gender violence survivors outnumber the available restorative services such as counselling, health-related services and shelter. If sexual and gender based violence is this rampant, then there is need for further research in this field. A lot of research has been done on why violence exists and how to combat it, but very little has been done to establish the effects of sexual and gender-based violence and the risk behaviour associated with it. The few studies that have been done reveal a number of inadequacies in the management of sexual and gender violence survivors. It is for this reason that this researcher will take a new twist and be pre-occupied with actual

experiences of sexual and gender based violence survivors with a view of finding out what is being done by stakeholders to rehabilitate them.

1.3 Significance of the Study

This research attempts to illustrate the actual experiences of sexual and gender-based violence survivors while establishing existing survivor restorative programmes, that is to say programmes which can assist violence survivors to get over their traumatic experiences and live a normal life once again.

This research therefore, has the potential to generate and avail useful and latest information on the forms, causes and effects of sexual and gender based violence while indicating latest rehabilitation programmes. This information will not only stimulate further research but will also be useful to the government and its development partners for the sake of policy formulation and implementation. When latest information is available, it is easier to ensure that programmes for addressing gender violence are effectively planned both for national development and protection of women's rights. The research will also be useful to survivors of sexual and gender- based violence as they will know what steps to take on the onset of violence and afterwards. Lastly, students and organisations that deal with work which is related to sexual and gender-based violence will benefit from this latest information.

1.4 Main objective

The aim of this study is to explore the experiences of women survivors of sexual and gender-based violence while establishing the available range of restorative services in order to improve on them.

1.5 Specific objectives

1.5.1 To identify patterns of sexual and gender-based violence among married women.

1.5.2 To explain experiences of women who have undergone sexual and gender- based violence.

1.5.3 To establish factors associated with gender-based violence.

1.5.4 To describe measures taken by stakeholders to rehabilitate survivors of sexual and gender-based violence.

1.6 Research questions

1.6.1 What are the patterns of sexual and gender-based violence that occur among married Women?

1.6.2 What are the common forms of sexual abuse that are associated with married women?

1.6.3 What factors are associated with sexual and gender-based violence?

1.6.4 What measures are taken by stakeholders to rehabilitate survivors of sexual and gender-Based violence?

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter presents a review of the literature which is related to the study. It contains information from a global, regional as well as local context. The purpose of this literature review is to help analyse studies and research on SGBV from a wider context in order to help provide a picture of SGBV and its effects. Section 2.1 attempts to explain what SGBV is while section 2.2 will outline the common forms of SGBV and its extent. Section 2.3 identifies the causes and risk factors of the violence while the impact of SGBV will be given in section 2.5. Finally, section 2.6 will examine SGBV in Zambia.

2.1What is SGBV?

Sexual violence, gender-based violence, domestic violence and violence against women are all terms that are used interchangeably. These three terms refer to human rights violations that perpetuate roles that deny human dignity of the individual and hamper human development. In particular, the term GBV is used to distinguish ordinary violence from violence that targets individuals on the basis of their gender. GBV, therefore, has been described by the UN as violence that is directed at a person on the basis of their gender or sex and "includes acts that inflict physical, mental or sexual harm or suffering, threat of such acts, coercion and other deprivations of liberty." (UNHCR, Undated, 10)

The term VAW refers to any act of gender-based violence that is likely to result in sexual, physical or psychological harm specifically to women and girls, whether it occurs in private or in public. The UN, however, employs an inclusive term of SGBV that recognises that men and boys are also targets of SGBV even though the majority of victims/survivors are women, girls and children

Domestic violence is an inclusive term meaning "a pattern of behaviour where an intimate partner coerces, dominates or isolates another intimate partner to maintain power and control over the partner and the relationship" (Rosado, 2011:14). This type of violence can occur in short or long term mostly at home.

Furthermore, domestic violence is the wilful intimidation, battery, physical assault, sexual assault and any other abusive behaviour perpetrated by an intimate partner against another. It is actually an epidemic affecting individuals in all communities regardless of race, religion, age, economic status or education background. In actual fact, SGBV in general is often linked to emotionally abusive and controlling behaviour and therefore it is part of a systematic pattern of dominance and control.

2.2 Common Forms of Sexual and Gender-Based Violence and their Extent

SGBV presents itself in different forms. Sometimes the survivors of this violence do not even recognise it as a form of violence (IRC, 2011). In line with the above, the National Coalition Against Domestic Violence (2007) clearly spells out forms of domestic violence as forms of power and control as outlined below. Forms of violence can be categorised as physical, sexual, emotional, verbal and economic (NCADV, 2007)

2.2.1 Physical abuse

This is a type of abuse involving ***contact*** which is meant to intimidate, injure, cause pain, bodily harm or any physical suffering. Physical abuse includes slapping, punching, hitting, choking, burning, pushing and any other contact that results in physical injury. In the year 2011 alone, the VSU recorded a total of 3699 cases of assault cases, 32 cases of murder and 3 cases of attempted murder. All these cases were classified as gender based (VSU, 2011). Other abuses include denying the partner of sleep, medical care or other necessities of life. Forcing a partner to engage in alcohol or drugs against their will is physical abuse.

2.2.2 Sexual abuse

In sexual abuse, the abuser uses force or threat to engage their partner in unwanted sexual activities. Coercing someone to engage in sexual activities against their will is an act of violence and aggression. The World Health Organisation defines sexual violence as "any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work" (WHO, 2002, 149). Evidence shows that 13% of women interviewed indicated that they did not want to have sex the first time they had sex. 10% of these women were from urban areas while 22% were in urban areas. This result is compared to 9% of men, 5% of whom were in rural areas and 11% in the urban areas.

In conflict areas, rape is used as a weapon of war to humiliate the enemy. In 2004 in Africa, the UNHCR approximated that 200,000 Sudanese had fled to Chad and another I million were internally displaced due to the Darfur War. During this time, widespread rape of women was reported (UNHCR, 2005).

A common but less talked about sexual abuse *is* ***marital rape*** or ***spousal rape*** which is a form of partner rape. Studies on marital rape are extremely few because the abuse is highly tolerated by society (Watts, 2002).

2.2.3 Psychological abuse

This type of abuse is also known as emotional abuse or mental abuse. Psychological abuse includes humiliating the victim publicly or privately, withholding information from the victim, controlling what the victim can do and cannot do, deliberately embarrassing or demeaning the victim, isolating the victim or simply blackmailing the victim. Psychological abuse can therefore be defined as any behaviour that intimidates, threatens and undermines the self esteem of the victim, or even control the freedom of the victim. In other words,

emotional verbal and psychological abuse means ‘‘a pattern of degrading or humiliating conduct towards a person’’ (GBV ACT, 2011).

Verbal abuse is a form of psychologically abusive behaviour which involves the use of language and is basically an act of threatening. Verbal abuse includes aggressive behaviour such as criticism, name calling, blaming, disrespect and ridicule among others. The abuse which was classified as ***insulting language*** had the most number of reported cases at 294 reports in 2011. Another offence labelled ***threatening violence*** had 28 reported cases (VSU, 2011).

Less aggressive pronouncements can also be used to falsely accuse, humiliate or manipulate victims to submit to unwanted behaviours. Verbal abuse can be either oral or written, with the oral being more common. The abuser may show different pleasant behaviour in public to disguise the abuse.

2.2.4 Economic abuse

Economic abuse is when one partner has control over the other’s economic resources. This may include preventing the spouse from engaging in gainful employment, advancing their career, limiting the availability of resources or even spending the victim’s savings. Economic abuse may include non- payment of school fees, mortgage, rent, medical expenses or even intentional destruction to property of a victim (GBV ACT, 2011). In 2010, 96 cases were reported to the police for the offence of ***failing to provide***, while in 2011, the number of cases reported rose to 163. Another offence of ***neglecting to provide*** had 1715 cases in 2010 with a slight increase of 1719 cases in 2011 (VSU, 2011).

2.3 Causes and Risk Factors of Sexual and Gender-Based Violence

Clearly there are many contributing factors to domestic violence. Causes and risk factors of domestic violence have their root in the gender inequalities that exist. The root causes of

SGBV lie in a society's attitudes and practices of gender discrimination which put women in a subordinate position in relation to men (Velez, 2009).

2.3.1 Social-cultural and Social-economic causes

There is the almost universal cause of violence springing from traditional norms which teach men that it is a normal, proper and important practice to beat one's wife. In an analysis of Zambia's fifth NDP 2006-2010, the CSPR (2007) agrees with the above concept of male supremacy as a cause of domestic violence. It all starts from the fact that men and women, being of different genders have different roles and responsibilities. These roles and responsibilities explain the existing unfair differences between men and women leading further into the differences in the socio-economic development processes. The result is women's limited participation in development processes.

Factors like low education levels, limited access and control over resources impede women's participation in the development process. For example CSPR quotes a statistic of 75% illiteracy levels for women in Zambia as compared to 65% for men. This situation has increased women's susceptibility to poverty which in turn leads to overdependence on male figures. The women are now vulnerable to violence as they have no say on many factors concerning their lives (CSPR, 2007).

As proof of the existence of male and female inequality, which contributes to gender violence, the UN confirms the worldwide low education levels for females that as late as 2010, rural and urban children from both the rich or poor households, female children are less likely to attend school. Estimates based on 43 countries indicate that primary level school attendance has 77% boys and 75% girls. The trend continues at secondary level with 57% boys and 54% girls. This inequality in education levels and access disadvantages women in terms of accessing socio-economic resources and so they become vulnerable to SGBV and are rendered perpetual dependents of men.

The situation of low education for females is the same in Zambia and a 2010 report by the Educational Bulletin confirms that school attendance is lower for girls in age group 14 -18 years at 69% and in the age group 19-22years it is at 15% only. Compare the mentioned age-groups to boys' attendance at 79% and 36% respectively (MOE, 2010).

A JCTR reader on poverty is in line with CSRP's view on inequality of men and women as a cause of violence since the culturally subordinate position of women implies that equality is interfered with. "Traditionally in most parts of the world, women have been taken as inferior to men. Women have sadly been associated with irrationality and inefficiency" (JCTR, 2008, 33), hence the male dominance leading to domestic violence.

According to a report on violence survivors, violence has a vicious cycle which will never end because victims of violence depend on their abusers for economic survival. They cling to them no matter how much they are abused. High levels of poverty and unemployment perpetuate women's dependency on men and this dependency makes women vulnerable to violence as they submit, tolerate and accept violence.

Another cause of violence comes from socialisation from initiation ceremonies. In rural areas, young girls lose interest and concentration in school after undergoing initiation ceremonies. This results in dropping out of school to seek marriage. This is a loss of economic potential growth resulting in overdependence on males (Munachonga, 2011).

In relation to the above point of dropping out of school, women are found with no choice but to get married, mostly under the Customary Law of marriage. Under this law, the tradition of paying bride price called ***lobola,*** turns a young bride into a man's property giving the man full control of the young girl. This results in controlling behaviour by the man leading to all sorts of abusive behaviours. A study on GBV conducted by the CSO is in line with above concept and the findings show that beating a wife is considered normal as a way of disciplining her for arrogance, late cooking and so on. It follows therefore that men are

justified to sexually abuse women as a way of punishing or embarrassing women who are considered proud, powerful or stubborn in society (CSO, 2006)

2.3.2 Inheritance/ Imitation

Research reveals that early childhood experiences of an individual have a direct bearing on their adulthood. Violence is a learnt behaviour and it can be inherited from parents and guardians. Children who grow up with violent authority figures are likely to exhibit violent behaviour later on in their lives (Rumbold, 2008). It is therefore advisable for parents and guardians to avoid fighting or quarrelling in full view of children. Children who are actually abused in childhood will most likely be abused or abuse others in their adulthood. It is therefore safely concluded that abuse in childhood correlates with sexual violence in adulthood. Boys who witness violence are most likely to be abusers and girls who witness violence are most likely to be victims of abuse in later life. Violence is transmitted across generations in a cyclic manner and it is addictive.

Another cause of violence is self defence. This is from violence survivors who are mostly women trying to defend themselves from abusive partners. The Zambia Demographic and Health Survey reveals that in its 2007 survey, 10% of ever-married women surveyed aged 15-49 years have initiated violence against their partner (CSO, 2007). Thus, the women are motivated into becoming violent as a self defence mechanism.

2.3.3Psychological causes

Psychological causes include mainly personality traits. These are mostly attributed to an individual‘s personality. These personality traits include low self-esteem and poor impulse control. A man who does not control his sexual desires is a potential rapist and defiler. Excessive jealousy causes violence because a man ensures sexual exclusivity for himself. Such men impose restrictions of movement on their wives. Another psychological cause is unresolved childhood conflicts which may manifest in later life in form of violent behaviour.

Moreover, Roach goes on to say that a person who is socially stressed by poverty or other issues is unable to provide for his family so they resort to violence (Roach, 2011).

Mental illness is another psychological cause of violence. Some mental illnesses include antisocial personality disorders, bipolar disorder, schizophrenia, drug abuse, alcoholism to mention a few (Judith, 2001)

2.3.4 Risk factors

A fact sheet on "Intimate Partner and Sexual Violence" from WHO observes that risk factors or factors that are associated with intimate partner and/or domestic violence can be summarised as: weak legal sanctions for sexual violence, marital dissatisfaction and discord, exposure to child maltreatment, infidelity suspicion by partners, ideologies of male sexual entitlement, attitudes that are accepting of violence and lack of adequate education. The above factors may combine to form a complex situation which puts women in an even more vulnerable situation (WHO, 2011).

Rumbold (2008) explains that in addition to early childhood exposure there are other risk factors such as separation and divorce which expose women to violence of all forms. Education is another factor in violence as there is a strong correlation between higher levels of female education and vulnerability to sexual violence. Educated women resist patriarchal norms and so men get provoked and resort to violence so as to regain the seemingly lost control over the women. However, Rumbold stresses that it is important to note that women's education beyond secondary school or tertiary education offers protection against violence. In other words, female empowerment puts women at risk of violence only up to a certain level, thereafter it definitely confers protection.

A study conducted by Mtonga (2007) whose aim was to explain forms and patterns of gender violence occurring among married women, revealed that a good number of GBV survivors

had below secondary level education as follows; university level-1, college-3, secondary-7 and primary level-9.

Other risk factors of violence include disability, crime, conflict and high levels of poverty. In 2010, a total of 16 cases of defilement of imbeciles were reported to the police but unfortunately only 11 were taken to court with 2 being convicted (VSU, 2010-2011).

In a study of survivors of domestic violence at a women's shelter, it was revealed that partners are sometimes provoked by very minor issues caused by male suspicion, petty jealousy and alcohol abuse (Musukuma, 2005). This revelation is in line with the WHO (2011) study. For example, a man beat up his wife on suspicion that her late coming from church was as a result of a love affair somewhere. Another example is when a woman questioned the husband's extramarital affair she was beaten up for inquiring. Musukuma concluded that socialisation plays a major part in issues of violence since the findings of the study showed that 60% of gender violence survivors got married under customary law. This law perpetuates violence as it is not coded but executed as the judges please in line with their particular tradition.

In an evaluation report of GBV programming, USAID/Zambia (Seytou et al, 2010) highlights a number of possible risk factors associated with violence. The report indicates that there are many motivations, behaviours, perceptions, and practices which vary greatly depending on the specific region, district, community or village.

According to the US/AID report, the factors associated with domestic violence include extreme poverty, as seen from high levels of unemployment which exacerbates economic abuse in relationships. It also leads to economic dependence on men as evidenced by fights after the harvest of crops. This violence is due to unequal sharing of profits from crop sales. The abuse of alcohol and locally found plants and stimulants can also cause violence by stimulating selfish sexual urge in the users. The socialisation of boys and girls in schools and

communities encourages dependency roles leaving them not properly empowered and vulnerable to abuse. The legal system does not help matters either because it does not recognise sexual and physical assault within marriage as a crime. The laws on GBV are inadequate and so it is difficult to adequately prosecute perpetrators of violence.

2.4 Consequences/impact of Domestic Violence

The effect of domestic violence on women is devastating. It not only harms the women but it destroys their families and limits the community's workforce. There is an all round atmosphere of fear, impunity and insecurity in violence prone areas. Domestic violence is connected to other human rights abuses of suppression of the rights to speech, association and liberty. Domestic violence also has negative impact on the health of its survivors.

A recent UNECA study entitled "Zambia National Study on Violence Against Women" summarises the effects of domestic violence as trauma, fear discrimination and failure to thrive (Munachonga, 2011). These effects of domestic violence do not only affect the women and the victims but have a terrible and costly impact on the family, society and the nation as a whole. The UNECA study categorises the impact of domestic violence as follows: violation of human rights for women, low economic productivity, increased gender inequality, increased health burden costs, increased social costs, and perpetuation of violence.

This researcher will use the UNECA (Munachonga, 2011) categories to explain the impact of domestic violence.

2.4.1 Violation of human rights

Women who are victims of gender violence are clearly robbed of their basic needs in terms of income opportunities, personal security and various other necessities of life. Panda (2003) points out that gender violence limits the right to education and this in turn limits the ability to being an agent of change. In addition to this, survivors of violence cannot participate in decision-making both within and outside their households.

2.4.2 Low economic productivity

Young female survivors of sexual abuse, are forced to drop out of school due to un planned pregnancies resulting in low education and literacy levels. This situation hampers productivity and negatively affects future opportunities for employment. The result is the vicious cycle of poverty and violence. Panda (2003) goes on to say that survivors of violence are unable to freely engage in community projects which can improve their livelihood. Furthermore, domestic violence prohibits women to be in gainful employment thereby increasing women's unemployment and reducing earnings.

2.4.3 Increased gender inequality

An abused person has a low self esteem, is unable to take care of herself and is virtually dependent on others, usually husbands. This results in underutilisation of human and economic resources. The vulnerable situation perpetuates inequality.

2.4.4 Increased health burden costs

Sexual and gender-based violence poses a danger to the health of its victims. The 2007 Demographic and Health Survey reveals that out of 5236 women surveyed, physical violence victims suffered as follows: 23% had cuts, aches and bruises while 11% experienced sprains, dislocations or burns within one year of the survey. These wounds have to be treated resulting in higher health care expenditure. Moreover 1 in 5 women aged 25-39 suffered sexual abuse (CSO, 2007).

Still on health, survivors of domestic violence are at high risk of contracting STIs including HIV due to the fact that they are unable to have protected sex. Their risk of having an unplanned pregnancy is high because they are powerless and voiceless to the extent of being unable to access contraceptives. In fact violence during pregnancy can even be more dangerous because it can lead to maternal death and directly affect infant mortality. It follows that a woman's sexual and reproductive state may be compromised by experiences and fear

of violence (CSO, 2008). The above discussion is an indication that the 'right to health' cannot be realised without protection from domestic violence.

Survivors also experience injuries and functional disorders such as chronic pain syndrome, stress related mental disorders, post-traumatic stress syndrome and even depression. Sexual and gender-based violence may lead to suicide and suicide attempts.

2.4.5 Increased social costs

Sexual and gender-based violence has the potential to destabilise families resulting in crime and street kids. The effect of domestic violence on children is appalling. The children learn and master the violent behaviour that they experience in childhood and imitate it later on in life. Survivors of violence suffer isolation, lack of participation in community activities and, inability to care for themselves. The ZDHS of 2007 reveals that violence makes girls pregnant and the children are born and grow up without any support from their fathers. 10% of women surveyed who had ever been pregnant experienced violence while pregnant.

2.4.6 Perpetuation of violence

Violence breeds violence. Violence has a cycle as already mentioned in the previous sections. The victim of violence may want to compete, revenge or defend herself from violence by using violence itself.

2.4.7 Consequence of violence on responders

Sexual and gender-based violence has a negative effect on people who respond to it by caring for survivors. An example of such type of survivors are counsellors, doctors, policemen, drop-in centre personnel or any other person who is always in touch with survivors of domestic violence. Due to the intensity of stories of abuse being listened to, the responders to violence are at risk of suffering from ***vicarious trauma*** which causes the responder to

manifest and experience symptoms similar to the original victim after listening to their traumatic experiences of abuse (Steed, 2000).

Moreover, those professionals who experience vicarious trauma exhibit among others, signs of hyper-vigilance, nightmares, exaggerated startle response and loss of confidence in their ability to help their clients. This ***vicarious trauma*** can lead directly to ***burnout*** which is a result of emotional exhaustion due to excessive demands on energy, strength and personal resources in the working place (keith-Spegel, 1998). Signs of burnout include headaches, lowered immune system, fatigue and irritability.

2.5 SGBV in Zambia

The picture of Sexual and gender-based violence in Zambia is similar to the rest of the world with the same characteristics of being rampant, widespread, devastating, ignored and tolerated by tradition. According to a CSO Monthly Bulletin, Zambia, whose population is 13,046 508 has a life expectancy of 51.3 years with 60% of its people considered poor (CSO, 2011). These indicators do not make life any easier for Zambian women because gender inequality is perpetuated.

According to the Beijing +10 Shadow Report produced by NGOCC and ZARD, domestic violence against women is rampant in Zambia and it includes battery, murder, exploitation, sexual abuse, rape, defilement, incest sexual harassment, assault and other forms. Zambian women experience violence from their intimate partners that presents itself in all forms and patterns. Sexual and physical violence are more common.

A report from the YWCA indicates that in the year 2008, 7016 SGBV-related cases were reported nationwide followed by 6836 cases in 2009. In 2010 however, there was an increase in the number of reported cases to 8400 cases. Lusaka region had the highest number of reported cases which translated to 30.4% of the total. According to the YWCA, the increase in the number of reported SGBV cases could be attributed to awareness campaigns but sadly,

there is no proper informative baseline in the country to gauge this increase (YWCA, 2010). Other cases mentioned in the report were as follows: defilement-253 cases, property grabbing-477 cases, rape-51 cases, incest-9 cases, emotional abuse-338 cases, threatening violence-192 cases.

A USAID/ZAMBIA evaluation on SGBV programming shows the extent of some forms of SGBV from eight CRC's in Zambia for the period of January 2008 to May 2010 as follows; defilement-499cases, rape- 93 cases, attempted rape-6 cases, incest-8 cases, and attempted incest-32 cases. This information shows that defilement was the most frequent offence with attempted rape and incest being the least. The low number of cases could be due to non-reporting (Seytou, 2010). The YWCA and USAID/ZAMBIA reports portray similar patterns of results in terms of incest and rape offences being the least in number probably due to non-reporting.

In a survey of Zambia Sexual Behaviour (CSO, 2003), the Central Statistics reports that sexual violence was very common with most cases going underreported. The occurrence of sexual violence was that 64% of respondents reported one to three incidences in a year. It was found that the majority of reported perpetrators of violence were husbands or live-in partners at 61%, followed by boyfriends 18%, strangers 9%, neighbours 3%, male relatives 3% and former intimate partners at 3%. Sadly, seven respondents listed more than one perpetrator. This data indicates that the majority of survivors know their perpetrators.

The 2007 ZDHS statistics indicate that in Zambia, physical violence is the most prevalent (47%) followed by psychological or emotional violence (26%). Sexual violence is at the bottom of the list (17%) probably due to non- reporting or non- recognition of marital rape. These results hold regardless of the socio-economic backgrounds of the spouses (CSO, 2007). To prove the above point, a Muvi Television (2011) news item revealed that a 25 year old woman was beaten and stabbed to death by her husband after a drinking spree. He accused

the wife of misusing money for food. The body of the woman was discovered dead in the morning (MUVI TV, 2011).

An earlier report by ZDHS (2001-2002), indicates that 53% of women interviewed experienced some form of battery, and 25% of them experienced physical abuse within a year preceding the survey. Women who never married are less likely to be physically abused than women who are currently or previously married. Further, 15% of Zambian women reported sexual violence in an intimate partner relationship. Unfortunately less than 25% of Zambian women believed that they could refuse to have sex with their husbands who were unfaithful and infected with HIV. Only 11% believed that a woman could initiate condom use in the prevailing circumstances. This situation compounds the spread of HIV/AIDS. Clearly, in my view, a comparison of the two ZDHS reports confirms that physical and sexual abuse are the most and least prevalent respectively, indicating consistency in domestic violence patterns(CSO, 2002).

In agreement with the above mentioned report is a documentation of a Human Rights Watch by Ochieng (2008) who points out that violence against Zambian women is hindering them from accessing and adhering to HIV treatment. All HIV programmers and policy makers know that discrimination and violence against women must first be addressed if the world is to combat the AIDS pandemic. Unfortunately, in Zambia, programmes and treatment policies still ignore the connection between this violence, women's insecure property rights and adherence to HIV treatment. Despite the Zambian Government efforts to end violence, Ochieng identifies some major gaps as outlined. Domestic violence discouraged women from disclosing their HIV status, delayed them seeking treatment, hampered their ability to adhere and thwarted their ability to seek HIV information and testing. Ochieng goes further to show that 17% of the Zambian adult population is HIV positive while 57% of these are women.

According to the National Action Plan on Gender Based Violence (GIDD, 2008), women are forced to remain in an abusive and risky relationship because of economic dependence on men enhancing vulnerablility to HIV. GIDD stresses that there is need for Zambia to document these abuses in order to determine the extent of the problem. These sentiments by GIDD justify this author's research.

Many Zambian women perceive violence to be a normal and acceptable affair, hence the non-reporting of incidences of violence. The negative attitude of the police and the consequences of reporting equally results in underreporting. Zambia has no specific laws and policy guidelines on domestic violence. Worse still, women are ignorant of the existence of laws that can criminalize domestic violence. Marital rape is common in Zambia but has not yet been recognised as an issue and neither has it been criminalised .A report by WFC on Millenium Development Goals, confirms the above point and stresses that since Zambia has no constitutional provisions to guarantee women's rights, women face increasing levels of violence both at home and outside. The police, courts and hospitals have inadequate resources to deal with the overwhelming violence (Muyoyeta, 2005).

A report entitled 'Gender equality in Zambia'(Bouchana et al, 2011) emphasises the fact that Zambia has no legislation to criminalise domestic violence though in the year 2005, the Zambian government amended the Penal Code to prohibit sexual harassment and indecent assault with provision of stiff punishment for perpetrators. Unfortunately, the perpetrators of violence end up only with small fines. The amended Penal Code still does not recognise marital rape. Survivors of violence are to use violence as ground for divorce, but in this country divorce is discouraged and set aside as a very last resort. Bouchana emphasises that in Zambia, about half of the women are subject to domestic violence because most of them are married under the Customary law under which women may be considered to be a joint property of a man and his male relatives. Bouchana is convinced that women education does

not improve the situation at all. This is in total contrast to an earlier view by (Rumbold, 2008) that education, up to a certain level, actually confers protection from domestic violence.

Apart from ratifying and being a signatory to international instruments like CEDAW, Zambia has embarked on a few interventions for GBV, which includes domestic violence. In 1994 the Zambian Government established the Victim Support Unit (VSU) a branch of the Zambia Police Service. The VSU which became operational in 1998 is found in every province of Zambia. Its aim is to assist survivors of any form of violence. The VSU avails the following statistics of Gender Based Crime reported in 2010 as follows: defilement- 2419 cases, rape-254 cases, attempted rape-35 cases, incest-41 cases.

The above cases are accepted by VSU due to measures put in place to amend the penal code as already explained by Bouchana (2011). The speaker of the Zambian National Assembly Mwanngala Matibini, emphasises the point that parliament enacted a law under Penal Code Ammendment Act 2005 to protect women and children from sexual harassment, defilement, indecent assault and so on (Matibini, 2011).

The Zambian government also established Gender in Development Division (GIDD) which is a National Gender Machinery tasked to coordinate the National Action Plan (NAP) which was adopted in 1994.

The women's movement is also very supportive of GBV programmes. NGOs, like the YWCA have established shelters for women and also some country-wide drop-in centres.

2.6 Theories explaining Sexual and Gender-Based Violence

In order to be effective, intervention strategies for sexual and gender-based violence must be based on a very clearly articulated theory of the violence. In this research, the literature reviewed brought about 4 theories of sexual and gender-based violence. These are: Psychoanalytic Theory, Learned Behaviour Theory, Cultural Explanations and Feminist Theory.

2.6.1 Psychoanalytic Theory

According to Zorza (2002), the prevailing theory of the 1970's of why men batterd their wives were thought to be mentally ill and that they could be cured. However, researchers dispelled this theory after finding out that people who batter others attacked mostly only their intimate partners as opposed to attacking the general public. It was therefore concluded that battered women and their attackers are not at all mentally ill. The next theory that emerged was that violence was a learned behaviour.

2.6.2 'Learned Behaviour' Theory

Researchers theorised that violence was a learned behaviour. It was argued that men battered their wives because they had learned the violence as children from within their families. They saw their fathers, uncles or grandfathers beating women. In a similar manner, women sought out abusive men because of their childhood experiences of seeing their mothers being abused. This is the 'learned behaviour' theory of violence. It follows, therefore, that women who wee abused as children may be more likely to be abused as adults.

However, although research shows that boys who witness abuse are 7 times more likely to abuse their wives in adult life, many of them who witness violence as children vow not to be violent in their adult life and grow up without battering anyone.

It is comforting to note that since battering is a learned behaviour, it can be 'unlearned' and these attackers can give up battering completely.

2.6.3 Cultural Explanation Theory

According to the journal of Gender, Social Policy and Law (2003), traditions and norms within certain cultures are very powerful. Wife battering, for example, is acceptable within most traditional African culture.

The uneven distribution of power in certain traditional marriages encourages and tolerates sexual and gender-based violence such as the impact of polygamy and even acceptance and

tolerance of male promiscuity. Moreover, the institution of Lobola (bride price) in exaggerated forms accentuates the widespread abuse of wives. The payment of Lobola also makes it difficult for women to leave their abusive husbands unless their families are willing to return the paid money. It follows that women are like objects which belong to men (a purchase).

Any challenge of the traditional absolute male control of the household is received with violence. A very common example is when wives inquire on extramarital affairs which men are involved in. This is not only a threat to the survival of the legal wife and her children but also a potential source of HIV/AIDS related troubles. The wife's questioning is seen to be a challenge to the man's traditional rights as head of the house, hence provoking violence. The husband's culturally prescribed position is not open to challenge. Moreover in most cultures, a married woman has minimal contact with men other than her husband. This situation is impossible nowadays especially in urban areas. The free interaction of women with other men provokes jealousy which in turn makes men violent. Usually the threat to their marriage is just imagined by these men.

Other causes of violence originate from cultural obligation such as household chores which should only be performed by wives. Failure by wives to perform such chores is perceived as challenging the husband's authority and contradicting the submissive way that women should play in marriage. Sexual and gender-based violence, therefore, acts as a control or a means of enforcing conformity with the role that a woman should play in a cultural setting. These cultural arguments are equivalent to gender inequality. Apparently, culture is used as an excuse to batter women.

The theory, however, does not explain why some men who believe in their traditions are able to keep their wives free from abuse. This theory also fails to explain how some traditional women are able to batter their husbands despite the emphasis on male dominance. It is

impossible to explain that violence still exists even in places which do not have strong cultural norms such as the USA.

2.6.4 Feminist Theories

Bowman (2003) explains the feminist view of sexual and gender-based violence. The feminist view is in line with the cultural theory in section 2.6.3. According to feminists, gender violence is interpreted in terms of pervasive gender inequality. Almost every traditional society is patriarchal and a woman's place is subordinate. This inequality is institutionalised by customary laws. Under most systems of customary law, women cannot inherit their husband's property, neither can they own land and are helpless upon divorce. In this context, women are rendered vulnerable to violence. Feminists also believe that unless the inequality between men and women is addressed, the problem of gender-based violence will persist.

In other words, gender violence is attributed to the subordinate position, economic dependency and passivity of married women in society. There is need to change social settings which indoctrinate women that they are unable to make even small decisions on their own. So the struggle against this violence is simply a small part of a bigger context, which is a struggle against equality.

This theory, however, can only, divorce make sense if the law is reformed concerning marriage, divorce, inheritance, child maintenance and reproductive rights. Acting on women alone would not work because men and women are socialised differently. Men should also be taught to change their mindset.

The four theories have therefore greatly influenced the direction of this research whereby patterns of violence are explored with the view of bringing out experiences of violence survivors. Understanding of the named concepts is hoped to bring out improvements on

existing interventions. Lastly, each theory presents its own limitations but the important thing is that the theories are an attempt to find a solution to sexual and gender-based violence.

2.6.5 Summary

Sexual and gender-based violence refers to human rights violations that perpetuate denial of human dignity of an individual and hampers human development. Sexual and gender-based violence manifests in physical, sexual emotional and economic forms and has devastating socio-economic and health effects. This violence has its roots in society's attitude and practices of gender discrimination which breed inequality between men and women, hence putting women in a subordinate position as compared to men.

CHAPTER THREE

METHODOLOGY

This chapter provides an overview of the methodology which was employed to carry out this research. Firstly, the study design will be discussed followed by the study site and population. Sample size and sampling procedures will also be explained. Finally, data collecting instruments will be outlined leading to data analysis procedures.

3.1 Study Design

This research employed a mixed methods research design, which is a combination of qualitative and quantitative approaches to collecting, analysing, interpreting, and reporting data. This mixed method approach was chosen because it incorporates the strengths of both qualitative and quantitative methods. Mixed methods also provide a more comprehensive view of the phenomena being studied- in this case, ***sexual and gender-based violence related issues.*** Moreover, mixed methods do not limit data collection but rather allows for unlimited free flow of data.

The qualitative aspect of the study design was included in this research because the topic of SGBV is subjective and of a philosophical nature and so data from such topics need to be arranged and described thoroughly. This thorough description can best be achieved through the use of qualitative methods (Ghosh, 2008), hence the inclusion of qualitative methods. However, quantitative methods will also be used alongside qualitative ones. This is because quantitative methods provide objectivity in dealing with events or circumstances which do not change (Lucey, 2002). As such, background information of respondents and close-ended information is better collected and analysed using quantitative tools. A mixed method

approach is prefered in research because the use of one method alone may result in biases and limitations which could be reasonably reduced by a multiple approach (Creswell, 2003).

In line with Cresswell, Paton (2001) advocates for the use of triangulation by stating "triangulation strengthens a study by combining methods. This can mean using several kinds of methods or data, including using both quantitative and qualitative approaches." In other words, this triangulation enhances the credibility of the research, that is, a believable and trustworthy research.

In this study, issues of validity and reliability will be taken care of by piloting the questionnaire. This action will be able to give a picture of how the responses will be and as such will allow improvement of the questionnaire. According to Yin (1994), validity is the extent to which data collection methods bring out what they were intended to measure and the extent to which research findings are what they profess to be about. Reliability, however, is the demonstration that the operations of the study can be repeated and the same results should be expected.

Since this research seeks to analyse, establish and describe SGBV and its effect on married women, the mixed method approach is appropriate to capture both qualitative and quantitative data because the occurrence of gender violence can both be quantified and explored. Quantitative data involves head-counting numbers of participants of an activity and equally focuses on what transpires when SGBV occurs, hence providing information on actual experiences by the SGBV survivors.

The mixed method approach will enable the researcher to obtain numbers of those affected by SGBV, gain insight into the patterns of SGBV occurrences and the reasons behind its occurrence.

3.2 Study Site and Population

The study was conducted in Ngombe Compound which is a high density and low income settlement in Lusaka. This compound was chosen because it is a very high density area accommodating people of very low social and economic class. The deplorable socio-economic conditions of Ngombe compound put women in very vulnerable situation-hence a suitable site for this research. According to information from CSO (2000) National Census, Ngombe compound which is originally an unplanned settlement is situated in the North Eastern side of Lusaka with a total population of 23850 inhabitants. Of these inhabitants 12111 are males while 11739 are female and they all live in 5117 households (CSO, 2000).

The population of the study is the married women and also men of Ngombe compound.

3.3 Sample size

De Vos (1968) indicates that a sample consists of elements of the population which are considered for the actual inclusion in the study. A sample can also be viewed as subset of the measurements drawn from a population in which we are interested. We study the sample in order to understand the population from which it is drawn. This particular study is explorative in nature and so a sample size of 150 respondents is sufficient, in relation to the population of the study site (see **3.2**).

3.4 Sampling Procedures

A total of 150 respondents was needed for this research. This sample was divided into two subgroups using simple random and purposive sampling techniques. Firstly, sampling frames for violence survivors of Ngombe was obtained with the help of the Gender-based Violence Centre which is located in Ngombe Compound. A sampling frame is a list of every item or member of the population (Lucey, 2002).

Thereafter, computer generated random numbers were used to select 90 women and 40 men who would complete the semi-structured questionnaire. Furthermore, 10 men and 10 women were selected purposively to take part in separate focus group discussions (See section 3.5.2). This purposive sampling was used to select respondents who were suited enough to discuss matters related to sexual and gender-based violence.

The focus group discussions consisted of persons who have been married for at least five years. This period of at least five years in marriage was chosen because it is enough to experience the effects of SGBV either directly or indirectly.

In other words, the sample comprised a total of 100 women and 50 men. The men were included in the sample in order to make the study holistic.

3.5 Data Collection

The information needed for this research was collected in two ways. Firstly primary data was collected by a semi-structured questionnaire (APPENDIX A) and Focus Group Discussion (APPENDIX B). Secondly, secondary data was be collected by document analysis.

3.5.1 Semi-Structured Questionnaire

A semi-structured questionnaire was used to collect quantitative data. The questionnaire helped to collect information on forms, causes and consequences of gender-based violence. This data collection tool is useful because it can be administered to a large number of respondents within a short period of time using the exact format to collect background information from individuals. (Wilson, 1993). Moreover, it is possible to compare responses and the open-ended questions in the questionnaire enable respondents to express themselves freely and bring up other aspects which would be further investigated in Focus Group Discussion.

3.5.2 Focus Group Discussion

Focus group discussions have a participatory nature which allows a respondent to bring out any information which might not have come out in full in the questionnaire. According to Kumar (1987), a focus group discussion is a quick assessment data gathering method in which a selected set of participants discuss issues and concerns which are based on key themes drawn up by a researcher. This researcher conducted 2 focus group discussions according to guidelines by Kruger (1994) which are as follows:

- **Discussion guide-** a discussion guide was prepared by the researcher to keep the discussion on track while allowing participants to talk freely and spontaneously. The facilitator led the discussion which was centred on key themes of the research. There were10 open-ended questions in the discussion guide which were arranged from general to specific and each participant was be given equal opportunity to take part.
- **Invitation-**participants of the focus group discussion were informed a week in advance of the time, date and venue of the discussion.
- **Group size and composition-**there were 10 participants per group who were purposively selected to take part in the discussion. The participants were those who were conversant with the main theme of the research and also representative of the population.
- **Venue-**a place which could privately and comfortably seat 10-15 participants was arranged. A semi-circular seating arrangement was encouraged to allow participants see and hear each other easily.
- **Timing-**the discussion took no more than 1 hour and during this period, the conversation was recorded by the facilitator with the help of a voice recorder to be transcribed and arranged for analysis. Consent was sought from the respondents on the recording of their voices.

3.5.3 Document Analysis

Document analysis was done by reviewing latest annual reports , minutes from meetings, yearbooks and articles related to this research from various relevant organisations. Theses, dissertations and many relevant research findings were also reviewed. Government departments like the Police Service, in particular, the VSU were contacted for their reports from their everyday interactions. Relevant books and journals in form of hard and soft copies were also reviewed from various resource centres such us YWCA, CSO, ZARD, WILDAF and Women For Change. This secondary data was collected to help illustrate the significance of the existing literature and research.

3.6 Data Analysis

Data analysis is the process of finding the right data to answer the research questions while understanding the processes underlying the data, discovering the important patterns in the data and communicating the results to have the biggest possible impact. In this research, data was analysed by use of SPSS. Section **3.6.1** attempts to elaborate how data analysis was done.

3.6.1.Qualitative data analysis

The purpose of doing qualitative data analysis is to reduce the volume of text in order to organise responses to identify trends in the data. In this particular research, qualitative data involves information from a focus group discussion in APPENDIX B. This researcher will analyse qualitative data by ***content analysis*** which is a method of creating a structure to organise open-ended information. Patterns and themes were allowed to emerge [adopted with modification from Seidel(1998) and CDC(2009)].

- **Identification**-firstly, 'units of analysis' were identified.
- **Arrangement-**raw data was arranged according to the unit of analysis, for example 'response' to a particular question.

- **Organisation-**the data was then organised using pre-determined categories which were already formulated by the researcher before the field work.
- **Classification-**data units were then placed in identified categories. A research assistant was asked to reclassify data until the classification made sense.
- **Reduction**-efforts were made to reduce the volume of the text without losing any valuable information by creating ***composite responses*** using 'quotations' that reflected the content of all the responses in each category. In addition to this, short paragraphs were written to describe the contents of each category instead of writing individual responses which are similar.

3.6.2 Quantitative Data Analysis

In this research, quantitative data came mostly from the semi-structured questionnaire in APPENDIX A and from background information of the focus group discussion in APPENDIX B.

To analyse quantitative data, questions were coded in order to come up with simple frequency tables, percent distributions and mean by use of the computer. For presentation of findings simple frequency tables, cross-tabulations, Pie-charts and bar charts were used in order to enhance clarity of results.

3.7 Ethical Consideration

Any data collection must adhere to confidentiality requirements in order to safeguard the rights of respondents (UNHCR, 2001). Therefore, before each interview, informed consent was sought from the respondents and total confidentiality in terms of their identity and responses was guaranteed. The purpose of the study and its benefit was explained to the respondents in order to maximise co-operation from them.

3.8 Background Characteristics of Respondents

3.8.1 Age of respondents

The respondents were asked to state their age in years as at the last birthday. The minimum age of the men interviewed was in the age group 20-24 represented by 2 (5%) men while that of women was in the 15-19 years age group represented by 3 (3.3%) men. Women were represented in all age groups while men were not represented in the first group (15-19 years). The majority of men [9 (22.5%)] were found in the age group 25-29 years while that of women [16 (17.8%)] was in the 30-34 age-group. In the age group 50 years and above, there were 8 (20%) men and 19 (21.1%) women. The results are shown in table 3.1.

Table 3.1: Percentage distribution of age of respondents by sex

Age	Men		Women		Total	
group	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
15-19	0	0.0	3	3.3	3	2.0
20-24	2	5.0	7	7.8	9	6.9
25-29	9	22.5	13	14.4	22	16.9
30-34	6	15.0	16	17.8	22	16.9
35-39	7	17.5	13	14.5	20	15.4
40-44	4	10.0	10	11.1	14	10.8
45-49	4	10.0	9	10.0	13	10.0
50+	8	20.0	19	21.1	27	21.1
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

3.8.2 Educational background

Respondents were asked to state the highest level of formal education that they attained. According to the results, the majority of the respondents [71 (78.9%) women and 39 (97.5%) men] had attained some form of education. Results however, show that illiterate levels tend to be higher in women that in men with 19 (21.1%) women having no formal education at all as compared to 1(2.5%) man with no formal education. Upper primary school level had the highest frequency [24 (26.7%)] of educational attainment for women while that of men was

senior secondary [16 (40.0%)]. Only 18 (20.0%) women had junior secondary education with 11 (12.2%) of them completing secondary school. The men had 5 (12.5%) who completed junior secondary and 16 (40.0%) of them with senior secondary education. Generally, women are likely to have lower education standards than men. This research showed that only 2 (2.2%) women managed to reach tertiary level of education while 8 (20.0%) men attained it as shown in Table 3.2.

Table 3.2: Percentage distribution of Education attainment of respondents by sex

Educational Attainment	**Men**		**Women**		**Total**	
	No	**%**	**No**	**%**	**No**	**%**
Lower Primary	4	10.0	16	17.8	20	15.4
Upper Primary	6	15.0	24	26.7	30	23.0
Junior Secondary	5	12.5	18	20.0	23	17.7
Senior Secondary	16	40.0	11	12.2	27	20.8
Tertiary	8	20.0	2	2.2	10	7.7
None	1	2.5	19	21.1	20	15.4
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

3.8.3 Source of household income

All respondents were asked to state their main source of income. The mentioned sources were farming, vending, formal employment and help from relatives. The majority of women [40 (44.4%)] and men [17 (42.5%)] indicated that their main source of income was help from relatives; 28 (31.1%) women and 11 (27.5%) men were street vendors while 7 (7.8%) women and 2 (5.0%) men were involved in farming. Results showed that there was likely to be a higher percentage of men who work in formal employment than women. 15 (16.7%) women and 10 (25.0%) men were formally employed as shown in Table 3.3.

Table 3.3: Percent distribution of source of household income

Source of Income	Men		Women		Total	
	No	%	No	%	No	%
Farming	2	5.0	7	7.8	9	7.0
Vending	11	27.5	28	31.1	39	30.0
Formal employment	10	25.0	15	16.7	25	19.2
Help from relatives	17	42.5	40	44.4	57	43.8
Total	**30**	**100.0**	**90**	**100.0**	**130**	**100.0**

3.8.4 Number of children of respondents

The respondents were asked to state the number of children that they had. Results showed that 31 (34.5%) women and 12 (30%) men had 5 or more children; 40 (44.4%) women and 10 (26.0%) men had 3 to 4 children. 12 (13.3%) women and 9 (22.5%) men had only 1 to 2 children. There were 7 (7.7%) women and 9 (22.5%) men who had no children at all. These results are shown in Table 3.4.

Table 3.4: Percentage distribution of number of children of respondents by sex

Number of children	Men		Women		Total	
	No	%	No	%	No	%
None	9	22.5	7	7.8	16	12.3
1-2	9	22.5	12	13.3	21	16.2
3-4	10	25.0	40	44.4	50	38.5
5+	12	30.0	31	34.5	43	33.0
Total	**30**	**100.0**	**90**	**100.0**	**130**	**100.0**

3.8.5 Monthly income of respondents

Respondents in this research were asked to give an estimate of their income per month expressed in Zambian Kwacha (ZMK). The amounts of money earned were categorised and the range was from less than 1000 to above 4000. The majority of women [82 (91.1%)] and men [23 (57.5%)] were in the less than 1000 category. This result shows that clearly, women

tend to be disadvantaged when it comes to their economic status. There were 3 (3.3%) women and 4 (10%) men in the 1000 to 1900; 4 (4.5%) women and 7 (17.5%) men in the 2000 to 2900 and only 1(1.1%) woman and 2 (5.0%) men in the 3000 to 4000. The above 4000 category had no women at all but it included 4 (10.0%) men as seen in Table 3.5. This result confirms that women are likely to have a lower economic status than men.

Table 3.5 Percentage distribution of the average monthly income of both women and men

Income Group (ZMK)	**Men**		**Women**		**Total**	
	No	**%**	**No**	**%**	**No**	**%**
Less than 1000	23	57.5	82	91.1	105	80.8
1000-1900	4	10.0	3	3.3	7	5.4
2000-2900	7	17.5	4	4.5	11	8.5
3000-4000	2	5.0	1	1.1	3	2.3
Above 4000	4	10.0	0	0.0	4	3.0
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

CHAPTER 4

FINDINGS OF THE STUDY

4.0 Introduction

In this chapter, the results of data gathered using the questionnaire and focus group discussion guide are presented. There were 150 respondents in this research, of whom 100 were women and 50 were men as determined in Chapter 3. These findings mainly show the experiences of married women who have undergone SGBV. The presentation is done under four main themes: i) common forms of violence that married women encounter ii) effects of violence on SGBV survivors; iii) factors associated with SGBV; and iv) available restorative services for SGBV survivors.

All the Tables and figures presented in this chapter are from field data collected in September/October, 2013 by this researcher.

4.1 Common Forms of Violence

The present research explored the common forms of violence that married women and men experience. This section presents the results showing how SGBV occurs in physical, economical, emotional and sexual forms. The intensity and extent of the violence is also portrayed.

4.1.1 Physical violence

Physical violence refers to a type of abuse which involves contact meant to cause pain, bodily harm and physical suffering. This abuse is also meant to injure and intimidate someone. Some examples of physical abuse are hitting, slapping, punching, pushing, choking and burning to mention a few. All the respondents in this research were asked to indicate how often they experienced some form of physical abuse in the last 12 months preceding the research. Results showed that the majority of women [65 (72.2%)] and only 4(10.0%) men

had experienced physical violence ***often***. This result shows that roughly, for every 1 man that experiences physical violence often, there will be 7 women that will experience the similar type of violence often. This ratio of 1:7 shows the extent of the violence and how women tended to experience it more than men. 8 (8.9%) women and 10 (25%) men experienced physical violence ***sometimes.*** Only 9 (10.0%) women compared to 22 (55.0%) men did not experience any violence at all as shown in table 4.1a.

Table 4.1a: Percentage distribution of frequency of Physical Violence

Frequency of physical violence	**Men**		**Women**		**Total**	
	No	**%**	**No**	**%**	**No**	**%**
Often	4	10.0	65	72.2	69	53.1
Sometimes	10	25.0	8	8.9	18	13.9
Not at all	22	55.0	9	10.0	31	23.8
Non response	4	10.0	8	8.9	12	9.2
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

Respondents were asked to pinpoint **s**pecific types of physical violence that they experienced either ***often***, ***sometimes*** or ***not at all***. Results show that the most common type of physical violence was ***kicking, dragging or beating*** with a frequency of 84% of all respondents experiencing the violence ***often.*** However, only 2 (5.0%) men experienced this type of violence ***often*** while an overwhelming 82 (91.1%) women experienced the violence ***often.*** Clearly, the results show that women are 18 times more likely to be beaten than men are. The next common form is ***slapping*** with 79 (87.7%) women experiencing it ***often***. This shows that women are about 11times more likely to be slapped ***often*** than men, because only 3 (7.5%) men said they were slapped ***often.***

Another type of violence was ***pushing, shaking or throwing*** something at the person. This was experienced often by 71 (78.9%) women and 4 (10.0%) men which is a ratio of 7:1:

Twisting arm and pulling hair was experienced ***often*** by 21 (23.3%) women and only 1(2.5%) man representing a ratio of 10:1: ***threaten or attack with a knife*** was experienced ***often*** by 10 (11.1%) women and only 1 (2.5%) man, which shows women are 5 times more likely to experience it than men are. The least frequent type of physical abuse was ***trying to choke or burn*** someone with only 3 (3.3%) women experiencing it ***often*** and no men experiencing it ***often***, but only 1 man experiencing it ***sometimes***. These results are summarised in Table 4.1b.

Table 4.1b: Percent distribution of experience of specific types of physical violence

In the last 12	**months did your**	**spouse ever do**		**any of the**	**follov ing things?**		
		Men		**Women**		**Total**	
		No	**%**	**No**	**%**	**No**	**%**
a) slap you	Often	3	7.5	79	87.7	82	63.1
	Sometimes	12	30.0	9	10.0	21	16.2
	Not at all	25	62.5	2	2.2	27	20.8
b) twist your arm, pull hair	Often	1	2.5	21	23.3	22	16.9
	Sometimes	2	5.0	30	33.3	32	24.6
	Not at all	37	92.5	39	43.3	76	58.5
c) push, shake you or throw something at you?	Often	4	10.0	71	78.9	75	57.7
	Sometimes	15	37.5	10	11.1	25	19.2
	Not at all	21	52.5	9	10.0	30	23.0
d) kick, drag or beat you up?	Often	2	5.0	82	91.1	84	64.6
	Sometimes	10	25.0	7	7.8	17	13.1
	Not at all	28	70.0	1	1.1	29	22.3
e) Try to choke or burn you?	Often	0	0.0	3	3.3	3	2.3
	Sometimes	1	2.5	2	2.2	3	2.3
	Not at all	39	97.5	85	94.4	124	95.4
f) threaten or attack you with a knife?	Often	1	2.5	10	11.1	11	8.5
	Sometimes	1	2.5	34	37.8	35	26.9
	Not at all	38	95.0	46	51.1	84	64.6
Total		**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

Focus group discussions for women revealed that the most common form of physical violence was battery. A young mother of two explains:

> *My husband slaps and kicks me most of the time...especially when I ask for money to buy groceries and other commodities. Sometimes he beats me up for no reason at all, its like a must to beat up wives.*

The men, on the other hand, were hesitant to point out any form of physical violence that they experienced claiming that it was rare since they were physically stronger than women. However, pulling and throwing things were acknowledged by men as types of violence. One woman explained that she had been physically abused for a very long time by her husband.

> *One time my husband pushed me so hard against the wall that I sustained head injuries and became unconscious. I woke up in hospital but he was nowhere to be seen. Mother looked after me very well but took me back to him because she could not afford to care for me anymore. I do not understand why my husband is in the habit of beating me up.*

4.1.1.1 Education level as a determinant of physical violence

Respondents of different educational levels are likely to experience the extent of physical violence differently. It is for this reason that results of educational level by physical violence were presented in order to assess how educational level determines physical violence. Table 4.1c shows the percentages of men and women who had experienced physical violence by their education level. Respondents [16 (21.9%) women and 1 man] with no formal education at all also experienced physical violence. 21 (28.8%) women and 4 (28.6%) men who had experienced physical violence had attained upper primary level of education. Results show that women who attained secondary education level and above are less likely to experience physical violence. Only 19 (26%) women who attained secondary level of education experienced physical violence while 7 (50%) men who attained secondary education experienced physical violence. Only 1(1.4%) woman and 2 (14.3%) men experienced physical violence with an attainment of tertiary level education as seen in table 4.1c.

Table 4.1c:Percent distribution of experience of physical violence by level of education

	Men		Women		Total	
Education level	**No**	**%**	**No**	**%**	**No**	**%**
None	1	7.1	16	21.9	17	19.5
Lower primary	0	0.0	16	21.9	16	18.4
Upper primary	4	28.6	21	28.8	25	28.8
Junior secondary	2	14.3	14	19.2	16	18.4
Senior secondary	5	35.7	5	6.8	10	11.5
Tertiary	2	14.3	1	1.4	3	3.4
Total	**14**	**100.0**	**73**	**100.0**	**87**	**100.0**

In the women's discussion, it was pointed out that some amount of education could help women command respect from their spouses and minimise violence such as unnecessary beatings. The women, however, were at pains to explain how and why this was so. One mother of four children attempted to give an explanation:

> *I did not go far in school and I am sure that low level of education contributes to physical violence. I say so because I have observed that my neighbour had secondary school level of education and she is rarely beaten by her husband. Actually, she can afford to buy herself whatever she wanted without having to plead for money from her husband. How I wish I had a chance to go to school.*

4.1.2 Emotional violence

Emotional violence, also known as psychological or mental abuse, refers to any behaviour that will degrade or humiliate a person in public or private including deliberately embarrassing, demeaning, isolating or blackmailing them. Respondents were asked to indicate if they experienced any emotional abuse while indicating its frequency: *often*, *sometimes* or *not at all*. Table 4.2a shows that the majority of respondents [40 (44.4%) women and 21 (52.5%) men] reported that they were emotionally abused sometimes while 24 (26.7%) women and 6 (15%) men reported being abused often. Women are likely to be emotionally abused more often than men. Only 14 (15.6%) women and 7 (17.5%) men indicated that they experienced no violence at all. However, 12 (13.3%) women and 6

(15.0%) men chose not to respond at all.

Table 4.2a Percent distribution of frequency of experience of emotional violence

	Men		Women		Total	
	No	**%**	**No**	**%**	**No**	**%**
Often	6	15.0	24	26.7	30	23.1
Sometimes	21	52.5	40	44.4	61	46.9
Not at all	7	17.5	14	15.6	21	16.2
Non response	6	15.0	12	13.3	18	13.8
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

Controlling behaviour by spouses is considered to be an emotional abuse because it is the starting point of violating the rights and freedom of a spouse by unnecessary monitoring. Respondents were asked to specify the type of emotional abuse in form of controlling behaviour that they suffered by indicating often, sometimes or not at all**.** As shown in Table 4.2b, respondents experienced controlling behaviour from their spouses which amounted to emotional abuse with the most common as often insisting on knowing where a partner is [30 (33.3%) women and 7 (17.5%) men]. Women are almost twice as likely as men to experience this type of controlling behaviour. This was followed by 'often limiting contact with family' [28 (31.1%) women and 6 (15%) men]. The least common controlling behaviour was 'not permitting a spouse to meet friends' with 22 (24.4%) women and only 3 (7.5%) men experiencing the abuse often.

In line with controlling behaviour, an experience was shared by a woman whose husband went to extremes in controlling her.

> *My husband does not like my church mates (both male and female). He followed me to church at one time and dragged me home where he beat me up and told me never to go to that church again. He accused me of having an affair with the church elder.*

Table 4.2b: Controlling behaviour in emotional violence

Does this situation apply to your spouse?		Men		Women		Total	
		No	%	No	%	No	%
a) Jealous or angry if you talk to other men/women?	Often	5	12.5	23	25.6	28	21.5
	Sometimes	21	52.5	40	44.4	61	46.9
	Not at all	14	35.0	27	30.0	41	31.5
b) Frequently accuse you of being unfaithful?	Often	4	10.0	24	26.7	28	21.5
	Sometimes	19	47.5	39	43.3	58	44.6
	Not at all	17	42.5	27	30.0	44	33.8
c) Not permit you to meet friends?	Often	3	7.5	22	24.4	25	19.2
	Sometimes	20	50.0	30	33.3	50	38.5
	Not at all	17	42.5	38	42.2	55	42.3
d) Limit your contact with your family?	Often	6	15.0	28	31.1	34	26.2
	Sometimes	18	45.0	40	44.4	58	44.6
	Not at all	16	40.0	22	24.4	38	29.2
e) Insists on knowing where you are?	Often	7	17.5	30	33.3	37	28.5
	Sometimes	20	50.0	42	46.7	62	47.7
	Not at all	13	32.5	18	20.0	31	23.8
	Total	**40**	**100**	**90**	**100**	**130**	**100**

Respondents were asked to specify any other emotional abuses that they experienced which were agonising them by answering the guided questions as shown in Table 4.2c. The majority of both men and women experienced insults often or were often made to feel bad about themselves [30 (33.3%) women and 10 (25.0%) men]. The next emotional abuse was *doing or saying something to humiliate the spouse* with 26 (28.8%) women and 6 (15.0%) men experiencing the abuse often. The least common abuse was *threatening to harm or hurt the spouse* [22 (24.4%) women and 7 (17.5%) men]. In all these situations, women tend to experience emotional violence more than their male counterparts.

Table 4.2c: Percent distribution of experience of agonizing behaviour

Does your spouse do any of the following things to you?		Men		Women		Total	
		No	%	No	%	No	%
a) Say / do something to humiliate you?	Often	6	15.0	26	28.8	32	24.6
	Sometimes	22	55.0	42	32.3	64	49.2
	Not at all	12	30.0	22	24.4	34	26.2
b) Threaten to harm or hurt you?	Often	7	17.5	22	24.4	29	22.3
	Sometimes	14	35.0	40	44.4	54	41.5
	Not at all	19	47.5	28	31.1	47	36.2
c) Insult you or make you feel bad about yourself?	Often	10	25.0	30	33.3	40	30.8
	Sometimes	24	60.0	42	46.7	66	50.8
	Not at all	6	15.0	18	20.0	24	18.5
	Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

The focus group discussion for men and also for women identified verbal abuse of insulting in public as a very common form of emotional abuse in their community. One mother of two children explained her position:

> *Insulting is an effortless tool of getting back at each other. It pains me when my husband insults me, whether privately or in front of everybody. Sadly, since insults are the order of the day in this compound, I have learnt how to insult back and I feel relieved after the payback.*

Family neglect is considered to be an emotional abuse because of the suffering that it causes. Family neglect can also be considered an economic abuse but this researcher will conveniently look at it as an emotional abuse. Respondents were further asked to state if their family was neglected by their spouse by indicating whether school fees, medical expenses and household resources were provided by their spouses. Starting with the most common form of neglect, the results were as follows: no help at all for medical expenses [26 (28.8%) women and 8 (20.0%) men]: no help at all for school fees for children [23 (25.6%) women and 7 (17.5%) men]: no help at all for household resources [18 (20.0%) women and 5 (12.5) men as shown in table 4.2d.

Table 4.2d: Percent distribution of experience of 'family neglect'

		Men		Women		Total	
Does your spouse provide for		**No**	**%**	**No**	**%**	**No**	**%**
a) School fees for children?	Often	2	5.0	22	24.4	24	18.5
	Sometimes	31	77.5	45	50.0	76	58.5
	Not at all	7	17.5	23	25.6	30	23.0
b) Medical expenses for the family?	Often	3	7.5	25	27.8	28	21.5
	Sometimes	29	72.5	39	43.3	68	52.3
	Not at all	8	20.0	26	28.8	34	26.2
c) Household resources for the family?	Often	5	12.5	30	33.3	35	26.9
	Sometimes	30	75.0	42	46.7	72	55.4
	Not at all	5	12.5	18	20.0	23	17.7
	Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

4.1.3 Economic Violence

Economic violence refers to the type of abuse where one person has control over another person's economic resources. Examples of economic abuse are spending another person's savings or preventing someone from engaging in gainful employment. Results show that more women reported being economically abused than men.

Table 4.3a shows responses given in answer to the questions on experiences of economic abuse. The majority of respondents [47 (52.2%) women and 36 (90%) men] reported being economically abused sometimes, while 20 (22.2%) women and only 1 (2.5%) man indicated being abused often. However, 20 (22.2%) women compared to 2 (5.0%) men said they experienced no economic violence at all and 3 (3.4%) women and 1 (2.5%) man gave no response at all.

Table 4.3a Percent distribution of frequency of economic violence

	Men		Women		Total	
	No	**%**	**No**	**%**	**No**	**%**
Often	1	2.5	20	22.2	21	16.2
Sometimes	36	90.0	47	52.2	83	63.8
Not at all	2	5.0	20	22.2	22	16.9
Non-response	1	2.5	3	3.4	4	3.1
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

Respondents were asked to specify the type of economic abuse that they experienced in connection with their earnings as shown in Table 4.3b. 27 (30.0%) women and 4 (10%) men indicated that their spouses do not at all share their earned money with them. 17 (18.9%) women and 15 (37.5%) men said they ***often*** had their earnings taken away. Moreover, 15 (16.7%) women and only 2 (5.0%) men indicated that they had ***often*** been stopped from working for a wage. This result shows that women are almost three times more likely to be stopped often from working for wages than men.

In both men and women's focus group discussions, it was revealed that grabbing of salaries and abandoning the family were among the common abuses in their area. A female respondent confirmed:

> *I was denied an opportunity to work for wages and yet my husband does not care for our children. I recently secretly started looking for a job and I found one. I will continue working for wages even though it is against my husband's wish. I am a housemaid in Fox-dale and I hide my hard earned money in places that you cannot even imagine.*

Table 4.3b: Percent distribution of specific types of economic abuse

		Men		**Women**		**Total**	
		No	**%**	**No**	**%**	**No**	**%**
a) Have you ever been stopped from working for a wage/salary?	Often	2	5.0	15	16.7	17	13.1
	Sometimes	10	25.0	20	22.2	30	23.0
	Not at all	28	70.0	55	61.1	83	63.8
b) Have you had your earnings taken away?	Often	15	37.5	17	18.9	32	24.6
	Sometimes	20	50.0	30	33.3	50	38.5
	Not at all	5	12.5	43	33.1	48	36.9
c) Does your spouse share with you the earned money?	Often	11	27.5	21	23.3	32	24.6
	Sometimes	25	62.5	42	46.7	67	51.5
	Not at all	4	10.0	27	30.0	31	23.8
	Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

Table 4.3c shows the results of controlling behaviour in economic abuse. The pattern of economic behaviour was determined by asking the respondents to specify who stopped them from working for a wage and who has control over family earnings and buying of major household goods. Results showed that apart from husbands and wives, other family members like uncle, aunt, father and boyfriend stopped people from working for a wage. Results further show that family earnings are not only controlled by husbands or wives but also by the in-laws. A mother of three children recounts her experience:

> *I got pregnant while I was at school in grade 11. I managed to get a job at a lodge after training in a catering course. Unfortunately, my mother in-law teamed up with my husband and went to my supervisor to say that I neglected the children because of my job and yet it was not true. That is how I lost my job and I miss my small salary.*

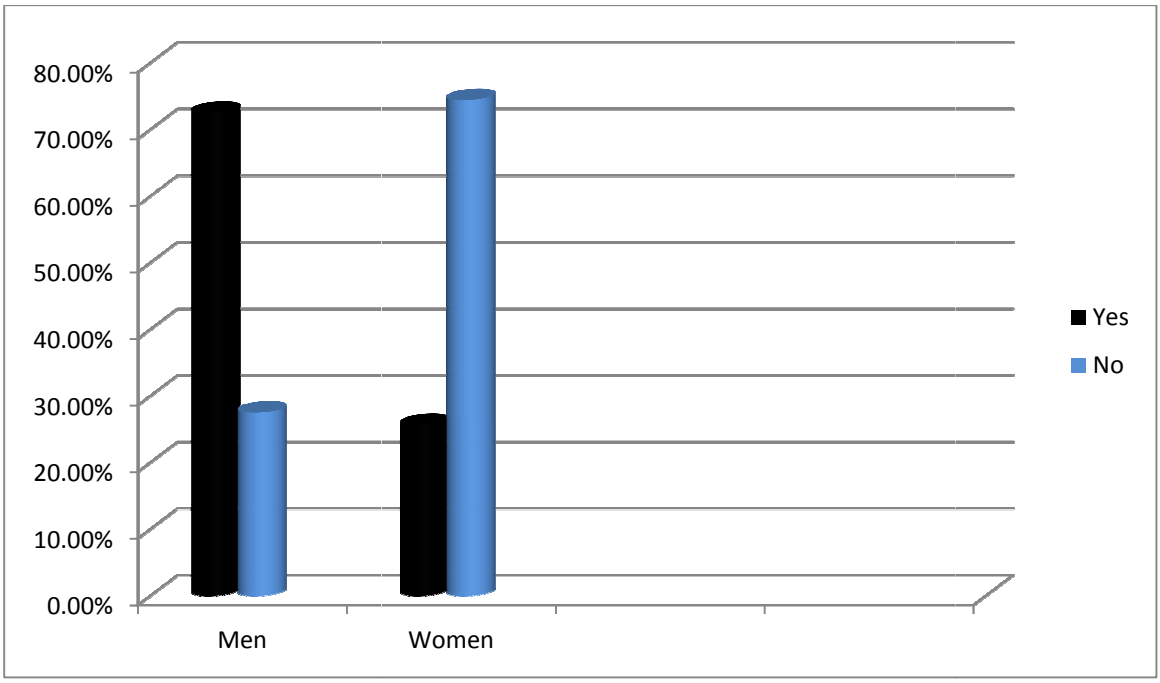
However, sometimes the family earnings are controlled by both husband and wife. On buying of household goods, it was indicated that decisions could be made by husbands, wives, both spouses and by a sister in-law.

Table 4.3c: Controlling behaviour in economic violence

a) Who stopped you from working for a wage/salary?	Husband, wife, uncle, aunt, father, boyfriend
b) Who controls all family earnings?	Husband, wife, both husband and wife, mother in- law, father in-law, brother in-law.
c) Who makes the final decision when buying major household goods?	Husband, wife, both husband and wife, sister in-law

All the respondents were asked to state if they owned personal property as a spouse. Results showed that the majority of men [29 (72.5%)] owned property while the majority of women [67 (74.4%)] said they did not own any property as shown in figure 1.

Figure 1: Property ownership by respondents



4.1.4 Sexual Violence

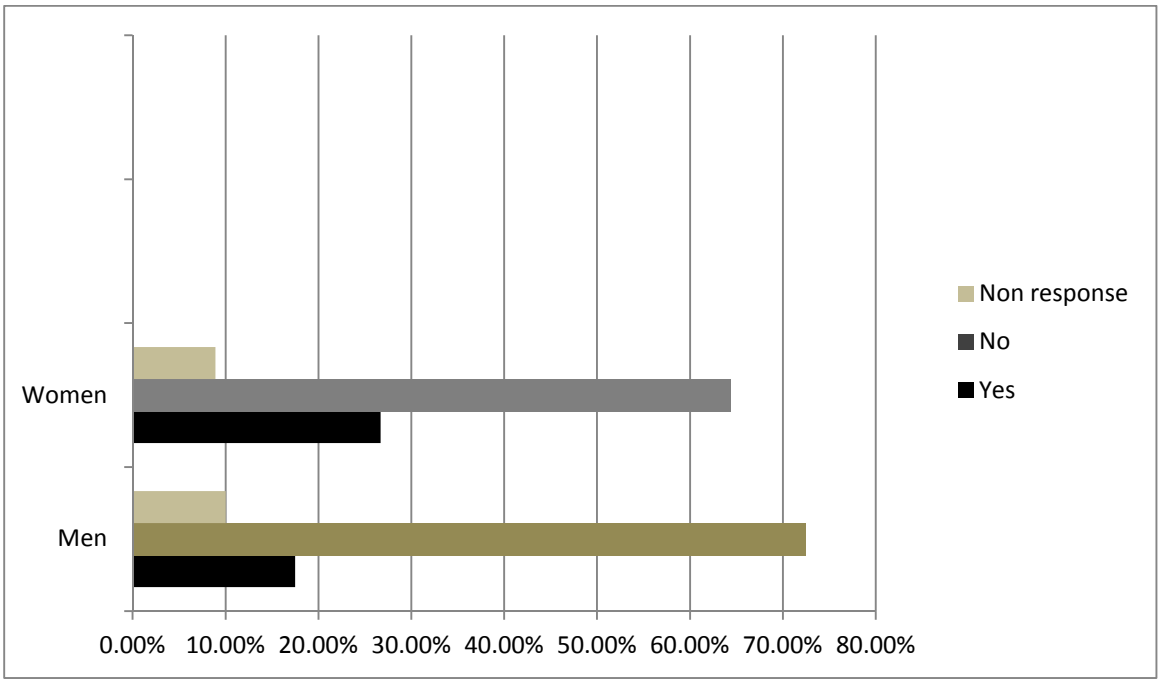
Sexual violence refers to the kind of abuse where a person uses force or threats to engage another person in unwanted sexual activities. Sexual violence includes rape, attempted rape and unwanted sexual comments or advances. Respondents were asked to indicate if they have ever been forced to have sex at one time in their lives. Figure 2 summarise the results as follows; 24 (26.7%) women and 7 (17.5%) men said yes and 58 (64.4%) women and 29 (72.5%) men said no. 8 (8.9%) women and 4 (10.0%) men gave no response at all. Sexual abuse in form of rape was also identified by both men and women in their focus group discussions. However, the women further identified marital rape, incest and defilement as common abuses. A 38 year old mother of four children explained:

> *Our daughters have to help us draw water from the kiosk as early as 04:30h and when we lose sight of them, they are defiled by the people in-charge of the water kiosk. It is disheartening.*

Another female respondent explained how rampant sexual abuse was in the compound and bemoaned the lack of a bridge as a source of concern:

> *There is a stream that runs through the compound and it often overflows. When women and girls fail to cross this stream, they are assisted by young men who will demand for sex as payment for the job. When husbands find out about the rape cases, they blame their spouses and beat them up. It is very sad....Husbands, or men in general, will never understand these problems.*

Figure 2: Percent distribution of respondents who have ever been forced to have sex



4.1.4.1 Perpetrators of Sexual Violence

Both male and female respondents from focus group discussions reported specific persons who had abused them sexually at one time in their lives. These perpetrators included family members such as a step-father, cousin (male and female), step-brother/sister, uncle, nephew and grandfather. Non family members mentioned include boyfriend, girlfriend, fiancé, present husbands, former husbands, school principal, class teacher, tutor, police officer, neighbour and a supervisor at work. In one case of incest, a blood brother was reported as a

perpetrator of sexual violence and the victim linked the act to suspected satanic rituals. Table 4.4a summarises these results. One young mother narrated her experiences:

> *I was in grade 7 when my class teacher almost raped me, thanks to the guidance teacher who reported the case to the Head- teacher. Unfortunately, in the process of sorting out the case, the Head-teacher called me often to his office including on non-school days and ended up forcing me to have sex with him. I was too young to tell anyone what happened.*

Table 4.4a: Perpetrators of sexual violence

Family members	**Non- family members**
Step-father	Boyfriend
Step-brother	Girlfriend
Step-sister	Fiancé
Uncle	Husbands-present and former
Nephew	School Head Teacher
Grandfather	Class teacher
Brother	Tutor
	Police officer
	Neighbours
	Supervisor at work

Respondents were asked to state at what age (in years) they were first forced to have sex and the results are shown in table 4.8 as follows; for the 6 to 10 age group, only 1 women and 1 man were represented and it had the lowest frequency. The interval 11 to 15 had 8 (53.2%) women and 2 (28.7%) men and it had the highest frequency for both men and women. The 16 to 20 interval had 4 (26.7%) women and 3 (42.9%) men. The age group representing older respondents (21+) had a low frequency of 2 (13.4%) women and only 1 man. It is worth noting that women had the highest number of abuse in the age group 11-15 while men had the highest number of abuses in the age group 16-20. Women are more likely to be abused at an earlier age than men. Table 4.4b summarises these results.

Table 4.4b: Percent distribution of age of respondents at first forced sexual act

Age group	Men		Women		Total	
	No	%	No	%	No	%
6-10	1	14.2	1	6.7	2	9.1
11-15	2	28.7	8	53.2	10	45.5
16-20	3	42.9	4	26.7	7	31.8
21+	1	14.2	2	13.4	3	13.6
Total	**7**	**100.0**	**15**	**100.0**	**22**	**100.0**

4.1.4.2 Help seeking behaviour

The topic sexual abuse is so sensitive that some people feel uncomfortable to talk about it. This makes it difficult for survivors of the violence to open up and seek help. Respondents were asked if they sought help from somewhere after being sexually abused. Results in Figure 3 show that few women [12 (13.2 %)] and men [3 (7.5%)] indicated that they sought help while 18 (20.0%) women and 10 (25.0%) men said that they did not seek help. In the focus group discussions, one woman explained why she did not seek help.

> *It is difficult to seek help after abuse because victims are normally blamed for the abuse and so we are not sure of how the community is going to react.*

Research reveals that respondents who experienced sexual abuse sought help from relatives, friends, pastors, priests, neighbours and *Alangizi* (marriage counsellors). Other places mentioned were YWCA, VSU, YMCA and Ngombe GBV centre. In the same discussion, a 20 year old woman lamented:

> *I was sexually abused by my fiancé and I didn't know where to go to seek help. I ended up going to him (my abuser) to complain and to plead with him to stop abusing me. His response was shocking as he threatened to marry another girl if I didn't give in to his sexual demands. He is now my husband and continues to abuse me sexually.*

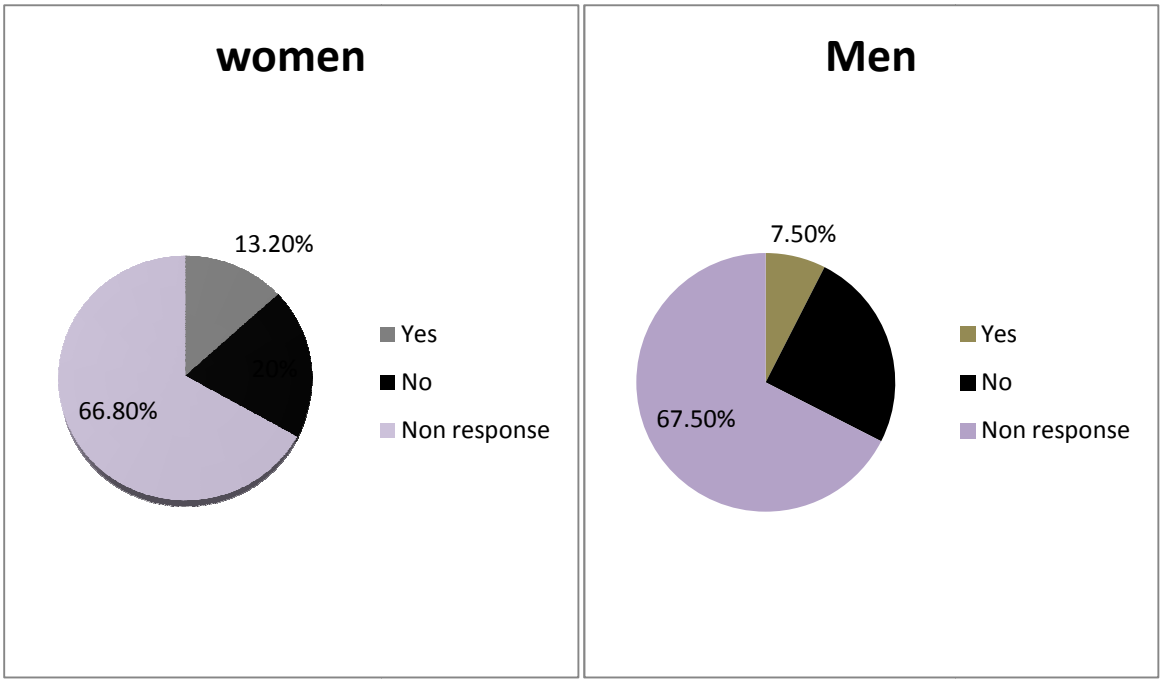
The young woman failed to avail more details as she was in tears when narrating her story. In

the men's focus group discussion, one middle aged father of two children had this to say:

> *Some wives abuse their husbands by demanding sex at very inappropriate times....they make it a habit....it is irritating especially when one is busy. Such things are difficult to explain to anyone.*

Clearly, both men and women affirmed the existence of marital rape while indicating how difficult it is to explain the situation when seeking help.

Figure 3: Number of respondents who sought help after experiencing sexual violence



Respondents were asked whether they were aware that SGBV was an offence. This question was asked because knowledge is power. If people are aware of the fact that SGBV was an offence, they would not hesitate to seek help and even report the perpetrators to the police. Table 4.4c presents the responses as follows: 65 (72.2%) women and 31 (77.5%) men stated that they were aware of the fact that SGBV was an offence. However, 18 (20.0%) women and 3 (7.5%) men indicated that they were not aware that SGBV was an offence.

From the focus group discussion, women were asked to give their views about reporting violence perpetrators to the police and they said it was a good idea as it was a corrective measure to teach men a lesson. However, reporting abusive husbands has other consequences as explained by a middle aged mother of five children:

> *Reporting our abusive husbands to the police has a negative impact because we are actually giving away the family breadwinner. It is for this reason that women withdraw SGBV cases from court. In fact, when abusive husbands come out of jail-cells, they are likely to be more violent than before.*

Moreover, the in-laws for these women tend to despise them for reporting their sons to the police. In the men's focus group discussion, the men were responding to a question on why they don't report violent wives to the police. They pointed out that they did not want to report their wives to the police because of the immoral behaviour of some police officers who rape female cell inmates. It was like offering your wife to the police officer for rape. The men further said that they had to endure the torture from violent wives because reporting a wife to the police usually leads to divorce and it would disadvantage the children and ruin their reputation in society as men of integrity. Another reason for clinging to a violent wife was that in Christian circles, marriage was for life, *for better for worse* but reporting is a recipe for separation and even divorce.

Table 4.4c: Percent distribution of Respondent's awareness of SGBV being an offence

	Men		**Women**		**Total**	
Response	**No**	**%**	**No**	**%**	**No**	**%**
Yes	31	77.5	65	72.2	96	73.8
No	3	7.5	18	20.0	21	16.2
Non Response	6	15.0	7	7.8	13	10.0
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

4.1.5 Marital Conflicts

This section continues to highlight common forms of SGBV as stated by respondents of this research. However, the emphasis is now on marital conflicts. Respondents were asked whether their spouses had other sexual partners and whether they left home on the onset of violence. 38 (42.2%) women and 6 (15.0%) men indicated that their spouses had other sexual partners while 40 (44.4%) women and 30 (75%) men confirmed that their spouses had no other sexual partners. However, only 1 (2.5%) man indicated that he did not know whether the wife had other sexual partners or not. This is shown in Table 4.4d.

Table 4.4d: Sexual partners outside marriage

		Men		Women		Total	
		No	**%**	**No**	**%**	**No**	**%**
Does spouse have	Yes	6	15.0	38	42.2	44	33.8
Other sexual	No	30	75.0	40	43.3	70	53.1
Partners?	Don't know	1	2.5	0	0.0	1	0.8
	Non response	3	7.5	12	13.3	15	11.5
	Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

On leaving the matrimonial home after a conflict, the majority of women [45 (50.0%)] and 19 (47.5%) men said they never left their matrimonial homes at all. Only 15 (16.7%) women and 1 (2.5%) man indicated that they left their home often after a conflict as shown in Table 4.5. Clearly, women are about 8 times more likely to leave their matrimonial homes after violence

Table 4.5: Percent distribution of respondents who left home after violence

		Men		Women		Total	
		No	**%**	**No**	**%**	**No**	**%**
Ever leave home after a conflict?	Often	1	2.5	15	16.7	16	12.3
	Sometimes	16	40.0	21	23.3	37	28.5
	Not at all	19	47.5	45	50.0	64	49.2
	Non applicable	4	10.0	9	10.0	13	10.0
	Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

Respondents were then asked if it was justified to deny a partner sex when there was a reason. They responded as follows: the majority of women [55 (61.1%)] and men [22 (55%)] said yes it was justified while 29 (32.2%) women and 10 (25%) said no, it was not justified. These results on marital conflicts are summarised in table 4.6.

Table 4.6: Justification of denial of sex by partner

		Men		Women		Total	
		No	**%**	**No**	**%**	**No**	**%**
Is it justified to deny a partner sex when there is a reason?	Yes	22	55.0	55	61.1	77	59.2
	No	10	25.0	29	32.2	39	30.0
	Non-response	1	2.5	2	2.2	3	2.3
	Non applicable	7	17.5	4	4.5	11	8.5
	Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

The respondents were further asked to state where they went after leaving their matrimonial homes, and to state the reason for returning to their abusive marriages. The following places of refuge were identified: parent's home, neighbour's home, grandparents place, Wedding Matron's place, marriage counsellor's place, YWCA, Police Station, in particular, VSU.

A mother of five children narrated her experiences:

My husband beat me up so badly that I could hardly walk straight. He then locked me out of our home so I had no choice but to leave the matrimonial home. I went to my parents' place but was uncomfortable because there was only enough room for my young siblings. I then went to my aunt who welcomed me but later chased me saying that I was now a grown up. I later went to my friend's place who accepted me, but her husband did not. That is how I reluctantly went back to my abusive husband.

In the focus group discussion for men, a 36 year old father of two children had this to say:

Coming home to a violent wife is not interesting because I am not free in my own home so I would rather go to the bar to pass time until she is asleep.

The reason for returning to the abusive matrimonial home was given as mainly having nowhere to go. Other reasons given included love for the children, love for the husband or wife and fear of the reaction of the society.

4.2 Effects of Violence

This section highlights the effect that violence has on married women. Responses from married men have also been included so as to give a gender balanced view. Respondents were asked to state the effects of violence in terms of their health, social and economic well-being.

4.2.1 Socio-economic Effects of Violence

The focus group discussion for men pointed out that SGBV resulted in sad marriages which were regrettable. Furthermore, violence retarded all types of development that was scheduled to take place in the family, community and the country at large. The women group discussion brought out similar statements implying that violence crushed their sprits. Respondents were asked to state whether they lived in fear of SGBV ***often, sometimes*** or ***not at all.*** The majority of women [32 (35.5%)] and also men [15 (37.5%)] said they lived in fear ***sometimes***. 20 (15.3%) women and 8 (20.0%) men said that they lived in fear ***often***. However, 22 (24.4%) women and 14 (35%) men said they did ***not at all*** live in fear.

Respondents were further asked if their children were affected by SGBV and the majority of the respondents said yes [76 (84.4%) women and 29 (72.5%) men]. Only 7 (7.85) women and 9 (22.5%) men said no. In the focus group discussion, both men and women alluded to the fact that children were negatively affected by SGBV. One woman confirmed:

> *My children are badly affected by this violence because we have to move out of the matrimonial house on the onset of violence. I see that their school report cards show very little progress and they live in fear like refugees....it's very sad.*

The majority of respondents [65 (72.2%) women and 27 (67.5%) men] said yes while 23 (25.6%) women and 12 (30.5%) men said no when asked if their own welfare was affected by violence. Asked how they responded to violence, 55 (61.1%) women and 25 (62.5%) men stated that they did not use violence and these were the majority. Only 17 (18.9%) women and 8 (20.0%) men said they used violence. The respondents were then asked if they ran away from violence and the women [54 (60%)] and men [12 (30%)] said yes while 21 (23.3%) women and 52 (55%) men said no. The results are summarised in Table 4.7a.

From the focus group discussion, both men and women cited lack of peace, divorce and separation as effects of SGBV. A mother of one child narrated:

> *As survivors of SGBV, we are reduced to destitution and sometimes we fail to pick up the pieces to start a new life. It crushes our mind and body.*

The men even cited suicidal tendencies as an unfortunate effect of violence. Asked to state how the community reacts to violence survivors, a father of five children lamented:

> *As survivors of SGBV, we are ridiculed, sidelined, bullied, mocked and labelled as* ***not men enough****. We end up in isolation and withdraw from normal community activities. However, there are times when people sympathise with us so they try to accommodate and advise us, though this is on very rare occasions.*

Table 4.7a: Percent distribution of socio-economic effects of violence on respondents

		Men		Women		Total	
		No	**%**	**No**	**%**	**No**	**%**
Do you live in fear?	Often	8	20.0	20	15.3	28	21.5
	Sometimes	15	37.5	32	35.5	46	35.5
	Not at all	14	35.0	22	24.4	36	27.7
	Non response	0	0.0	2	2.2	2	1.5
	Non applicable	3	7.5	14	15.6	18	13.8
Is children's welfare affected?	Yes	29	72.5	76	84.4	105	80.7
	No	9	22.5	7	7.8	16	12.3
	Non applicable	2	5.0	7	7.8	9	7.0
Does it affect Your own welfare?	Yes	27	67.5	65	72.2	92	70.8
	No	12	30.0	23	25.6	25	19.2
	Non applicable	1	2.5	2	2.2	13	10.0
Responded by using violence?	Yes	8	20.0	17	18.9	25	19.2
	No	25	62.5	55	61.1	80	61.6
	Non applicable	7	17.5	18	20.0	25	19.2
Running away?	Yes	12	30.0	54	60.0	66	50.8
	No	22	55.0	21	23.3	42	32.3
	Non applicable	6	15.0	15	16.7	22	16.9
Total		**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

4.2.2 Health-related effects of violence on respondents

The respondents were asked whether they experienced poor health due to SGBV and 29 (32.3%) women and only 2 (5.0%) men said yes with 49 (54.4%) women and 28 (70%) men saying no. Furthermore, the women respondents were asked if they had unplanned pregnancies at one time due to SGBV and their male counterparts were asked if the same happened to their wives. The result was that 10 (11.1%) women and only 3 (7.5%) men said yes while 70 (77.8%) women and 34 (85.0%) men said no. The respondents were then asked whether SGBV led to complications due to abortion and 17 (18.9%) women and 5 (12.5%) man said yes. The majority [63 (70.0%) women and 32 (80.0%) men] said no.

Asked whether they had access to family planning, 53 (58.9%) women and 26 (65%) men said yes and only 29 (32.2%) women and 12 (30%) men said no. Finally, all respondents were asked if they could use a condom amidst violence and the result showed that only 29 (32.2%) women and 14 (35.0%) men said yes while the majority [52 (57.8%) women and 25 (62.5%) men] said no. These results are shown in Table 4.7b. There is a marked difference between the number of women and men whose health is affected by SGBV. Actually, women are 6 times more likely than men to experience poor health due to SGBV.

Table 4.7b: Percent distribution of Health-related effects of violence on respondents

		Men		Women		Total	
Response		**No**	**%**	**No**	**%**	**No**	**%**
Poor health due to SGBV?	Yes	2	5.0	29	32.3	31	23.8
	No	28	70.0	49	54.4	77	59.3
	Non Response	0	0.0	2	2.2	2	1.5
	Non Applicable	10	25.0	10	11.1	20	15.4
Unplanned pregnancy?	Yes	3	7.5	10	11.1	13	10.0
	No	34	85.0	70	77.8	104	80.0
	Non response	5	12.5	17	18.9	22	16.9
	Non applicable	32	80.0	63	70.0	95	73.1
Complications due to abortion	Yes	5	12.5	17	18.9	22	16.9
	No	32	80.0	63	70.0	95	73.1
	Non applicable	3	7.5	10	11.1	13	10.0
Do you have access to family planning?	Yes	26	65.0	53	58.9	79	60.8
	No	12	30.0	29	32.2	41	31.5
	Non response	1	2.5	2	2.2	3	2.3
	Non applicable	1	2.5	6	6.7	7	5.4
Do you use a condom?	Yes	14	35.0	29	32.2	43	33.0
	No	25	62.5	52	57.8	77	59.3
	Non response	0	0.0	2	2.2	2	1.5
	Non applicable	1	2.5	7	7.8	8	6.2
Total		**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

In the focus group discussion, the men pointed out that SGBV results in bodily harm and sometimes causes deformities. In the women's discussion, one middle-aged mother had this to say:

I sustained injuries after being beaten by my husband. I had a broken leg, which did not heal completely and I also lost 2 teeth. He did not care for me while I was suffering in hospital and this is not the first time that I have suffered from his beating.

The woman has since left the matrimonial home and has vowed to file for divorce. Details of those respondents who said yes to experiencing some form of bodily harm are summarised in Table 4.8 as follows from highest to lowest frequency: cuts, bruises and aches [15 (37.5%) men and 70 (77.8%) women]: eye injuries, sprains, dislocations, minor burns [3 (7.5%) men and 11 (12.2%) women: deep wounds, broken bones/teeth [1 (2.5%) man and 10 (11.1%) women]: severe burns [2 (5.0%) men and 5 (5.6%) women].

Table 4.8: Bodily harm due to physical violence

In the last 12 months did you have any		**Men**		**Women**		**Total**	
		No	**%**	**No**	**%**	**No**	**%**
a) Cuts, bruises or aches	Yes	15	37.5	70	77.8	85	65.4
	No	25	62.5	20	22.5	45	34.6
b) Severe burns	Yes	2	5.0	5	5.6	7	5.4
	No	38	95.0	85	94.4	123	94.6
c) eye injuries, sprains, dislocations, minor burns	Yes	3	7.5	11	12.2	14	10.8
	No	37	92.5	79	87.7	116	89.2
d) Deep wounds, broken bones/teeth	Yes	1	2.5	10	11.1	11	8.5
	No	39	97.5	80	88.9	119	91.5
	Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

Women in the focus group discussion said that when women are raped, they are blamed that they caused the abuse. The women said that in such a situation, the raped women are not in a position to defend themselves from these unfair accusations. The women further said that the innocent children of the rape victims are ridiculed together with their parents. Other health related consequences of SGBV according to the women's discussion were depression, weight loss and slow manifesting amnesia. There was no time/chance to remember things due to

sadness. The women also said that sexually abused women contracted diseases but felt shy to go to the clinic for treatment. The consequences of an untreated STI are disastrous, they said. It turns out that the disease gets worse due to lack of treatment so they would rather go to traditional healers who are more easily accessible, cheaper and welcoming. However, the women recognised the fact that traditional healers sometimes have a problem with dosage of medicines.

4.3 : Factors Associated with Sexual and Gender-Based Violence

The previous sections brought out common forms of violence and the effects experienced by the respondents. Moreover, in the previous section, some factors of violence emerged, such as educational background and gender issues in general. This section outlines further, factors that cause or facilitate the occurrence of SGBV. Factors outlined include the abuse of alcohol, traditional factors and economic dependency. Other factors include childhood experiences, parental interference, paying of bride-price and excessive jealousy by spouses. In addition to this, financial misunderstandings, infertility, competition of lifestyle and lack of love were also considered as causes of violence. Peer pressure and also lack of water and a bridge caused violence in this study. Finally respondents' views on the adequacy of the Zambian Legal system as a factor of violence are presented.

4.3.1 Alcohol

Alcohol has been known to disturb the normal functioning of a body by destabilising the mind. It is sometimes used as an excuse to do anything under its influence. This is why respondents were asked to state whether their spouses took alcohol before becoming violent. Results showed that the majority of women [48 (53.3%)] and only 11 (27.5%) men said yes while 27 (30.0%) women and 23 (57.5%) men said no as shown in Table 4.9. In relation to alcohol, peer pressure was identified as a cause of violence by the men's focus group

discussion. It was also pointed out that friends pressure the men to go and drink beer and when they are under the influence of alcohol, they become violent to their spouses. The men continued to say that wives who drank beer were unable to take proper care of their homes so they are beaten by their husbands. In the women's discussion, it was also agreed that indeed alcohol caused violence. The women complained that those husbands who had nothing much to do, resorted to drinking beer and when they took too much of it, they became violent.

4.3.2 Traditional factors

Traditional societies the world over have explicit gender roles which must be followed by both men and women, failure to which one would even be convicted. This is the reason why respondents were asked whether traditional factors contributed to violence. The majority of female respondents [49 (54.4%)] said no while the majority of male respondents [26 (65.0%)] said yes. Results are summarised in Table 4.9. Asked to explain causes of violence, a respondent in the women focus group discussion stated that:

Sometimes men become violent towards women because they (women) are lazy and don't want to conform to their traditional gender roles of cooking for the family, doing the laundry, bathing the children and showing respect to their husbands. Failure to perform the traditionally prescribed roles can be very annoying to men who have grown up in a traditional patriarchal Zambian society.

Surprisingly, the men echoed the same sentiments in their discussion that sometimes wives provoke them into violence by not following traditional values such as respect, discipline and hard work. It was further said that laziness affects the ability of a woman to do house chores properly and failing to accept correction leads to violence. A 45 year old man who is a father of 3 lamented:

Women nowadays do not want to respect their husbands and so they end up with a beating which is a way of instilling discipline in them.... it is not that we enjoy beating them.

Table: 4.9: Percent distribution of respondents' view on alcohol, education, gender and traditional factors

	Men		Women		Total	
	No	**%**	**No**	**%**	**No**	**%**
Alcohol						
Yes	11	27.5	48	53.3	59	45.4
No	23	57.5	27	30.0	50	38.5
Non response	6	15.0	15	16.7	21	16.2
Traditional Factors						
Yes	26	65.0	31	34.5	57	43.8
No	10	25.0	49	54.4	59	45.5
Non response	0	0.0	2	2.2	2	1.5
Non applicable	4	10.0	8	8.9	12	9.2
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

4.3.3 Economic Dependency

When a person is economically dependent on another, they usually have no say in any aspect of their life. It is in this line that respondents were asked if economic dependency can render a person vulnerable to violence by indicating ***sometimes, often*** or ***not at all***. The results were summarised in Table 4.10 as follows: the majority of both women [30 (33.3%)] and men [19 (47.5%)] said ***sometimes*** economic dependency can lead to violence while 17 (18.9%) women and 10 (25.0%) men said ***often*** and that 24 (26.7%) women and 6 (15.0%) men said economic dependency was ***not at all*** a factor of violence. In the women's focus group discussion, it was pointed out that young girls keep dropping out of school to become prostitutes at a very tender age in a bid to sustain themselves economically. A middle aged female respondent had this to say:

The young girls believe that only men could lift them up economically. These young women are unknowingly exposing themselves to SGBV, it happened to me when I was

16 years old. I thought that prostitution was the quickest way to sustain myself economically but I ended up being abused in different ways.

The women further explained that they were aware that total economic dependency on men was not right because desperation exposes them to violence. However, sometimes the women find themselves completely dependent on their husbands due to the prevailing harsh economic situation.

4.3.4 Childhood Experiences

Children who experience violence are likely to experience it again in later adult life. In other words, children are conditioned to a violent environment and this exposure has a bearing on their future as they may emerge as perpetrators or survivors of violence (Rumbold, 2008). Hence the respondents were asked to confirm this assertion. The results however showed that the majority of both women [49 (54.4%)] and men [21 (52.5%)] said childhood experiences were ***not at all*** a factor of violence in their lives. This result is shown in Table 4.15. However, during the focus group discussion both women and men did not bring up childhood experiences as a factor of violence. A female respondent explained:

If at all I had experienced violence in my childhood. I would have been very careful not to be caught up in a violent situation later on in life. In other words, violence in childhood is like a wake-up call.

4.3.5 Parental Interference

Sometimes in marriage, in-laws tend to interfere with the internal affairs of their daughter or son's marriage. This interference may trigger violent behaviour between spouses. It is for this reason that respondents were asked to confirm whether parental interference was really a factor of violence by indicating ***often, sometimes, not at all***. Results show that the majority of women [46 (51.1%)] and 10 (25%) men confirmed that parental interference was ***often*** a

cause of violence while 18 (20%) women and 18 (45%) men said it was ***sometimes*** a factor of violence. However, 17 (18.9%) women and 6 (15%) men said it was ***not at all*** a factor of violence.

4.3.6 Unfaithfulness

The tendency by some people to have sexual partners other than their spouse, can be a source of misunderstanding which may lead to violence. The respondents were therefore asked to state whether unfaithfulness causes violence ***often, sometimes*** or ***not at all.*** Surprisingly, the majority of both women [44 (48.9%)] and men [15 (37.5%)] stated that unfaithfulness ***was not at all*** a factor of violence as shown in Table 4.10. Very few women [17 (18.9%)] and men [7 (17.5%)] thought it was ***often*** a cause of violence. However, in the focus group discussion, a female respondent had this to say:

> *Ngombe compound is overpopulated and almost not fit for human habitation and so men and women are found in a situation where they are forced to have intimate interactions with each other leading to promiscuity.*

The men also explained in their group that it was disheartening to learn that one's wife was unfaithful as this made them extremely jealous, hence the battering. In addition to this, the men indicated that some women (especially older ones) enjoyed seducing younger men and this provokes violence in marriages. Such women are nick named as *Sugar Mummies.*

Table 4.10: Percent distribution of respondents' views on economic dependency, childhood parental interference and unfaithfulness

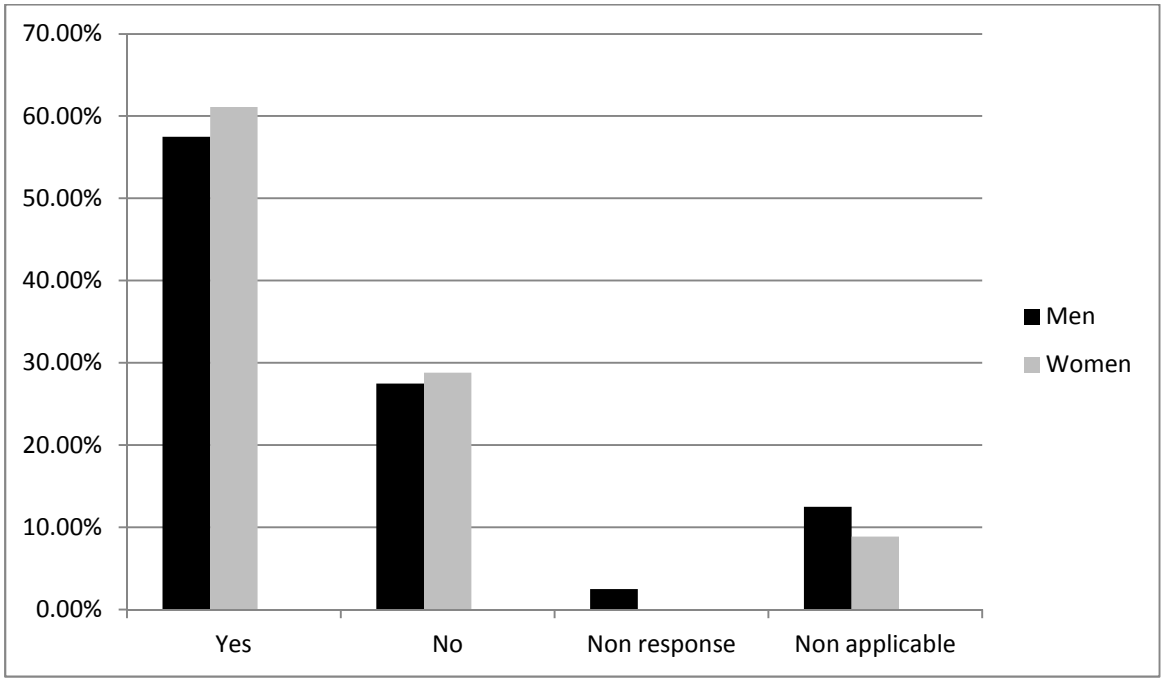
	Men		Women		Total	
	No	**%**	**No**	**%**	**No**	**%**
Economic Dependence						
Often	10	25.0	17	18.9	27	20.8
Sometimes	19	47.5	30	33.3	49	37.7
Not at all	6	15.0	24	26.7	30	23.0
Non applicable	5	12.5	19	21.1	24	18.5
Childhood Experiences						
Often	2	5.0	12	13.3	14	10.7
Sometimes	10	25.0	13	14.5	23	17.7
Not at all	21	52.5	49	54.4	70	53.8
Non applicable	7	17.5	16	17.8	23	17.7
Parental Interference						
Often	10	25.0	46	51.1	56	43.1
Sometimes	18	45.0	18	20.0	36	27.7
Not at all	6	15.0	17	18.9	23	17.7
Non applicable	6	15.0	9	10.0	15	11.5
Unfaithfulness						
Often	7	17.5	17	18.9	24	18.5
Sometimes	11	27.5	17	18.9	28	21.5
Not at all	15	37.5	44	48.9	59	45.4
Non applicable	7	17.5	12	13.3	19	14.6
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

4.3.7 Payment of bride price

In traditional society, women are considered to be part of the property of a man because the men had to pay bride price when marrying them. This situation may make a woman or wife vulnerable to violence. Thus, the respondents were asked to confirm if payment of bride price was one of the causes of violence by answering the question "Is there a relationship between payment of *Lobola* (bride price) and violence?" The results were as follows: the majority of both women [55 (61.1%)] and men [23 (57.5%)] said yes while 26 (28.8%) women and 11

(27.5%) men said no as shown in figure 4. There is almost an equal line of thought between men and women concerning payment of bride price.

Figure 4: Percent distribution of respondents' views on payment of Bride Price as factor of violence



4.3.8 Financial misunderstanding

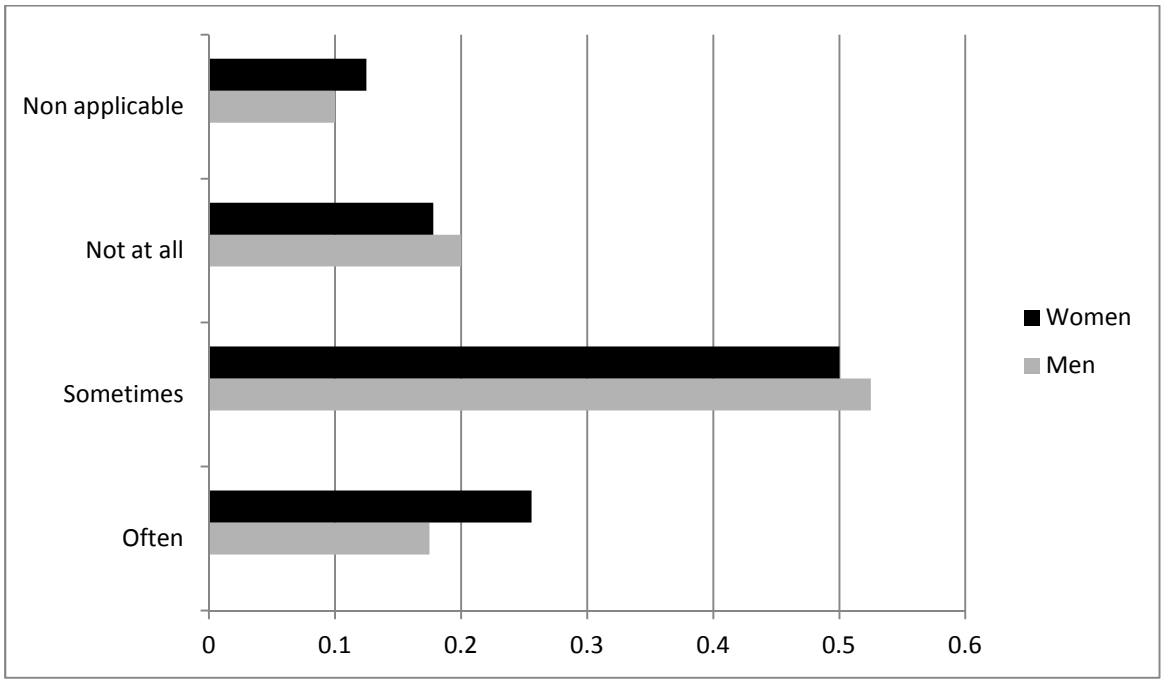
In an effort to secure money from the husband for upkeep, a wife may expose herself to violence. Similarly, a husband who is struggling economically to care for his family may resort to violence due to desperation. It is for this reason that respondents were asked to indicate from their point of view whether financial misunderstanding was a cause of violence ***often, sometimes*** and ***not at all***. The results are summarised in figure as follows: the majority of both women [45 (50%)] and men [21 (52.5%)] said ***financial misunderstanding*** was a factor of violence ***sometimes*** while 23 (25.6%) women and only 7 (17.5%) men said it was ***often*** a factor of violence. Both men and women had almost equal likelihood of their thoughts on financial misunderstandings. However, 16 (17.8%) women and 8 (20%) men said it was ***not at all*** a factor of violence. This result is summarised in figure 5.

In the men's discussion, a respondent pointed out as follows:

> *As husbands, we are under pressure to make ends meet in a harsh economic environment. Moreover, some wives dropped out of school, lacked simple budgeting skills at household level and so they become wasteful of upkeep money and are extremely demanding.*

The women, however, accused their husbands of putting up scary faces when they got paid so that their wives get discouraged from asking for some of the money. They went on to say that insisting on asking for money almost always led to violence.

Figure 5: Percent distribution of respondents' views on financial misunderstandings



4.3.9 Excessive jealousy

Respondents were asked whether their spouses were excessively jealous of their social life to the extent of being violent. The majority of women [54 (60.0%) and also men [22 (55.0%)] said yes but 26 (28.8%) women and 14 (35.0%) men said no.

4.3.10 Infertility

In traditional Africa, infertility is always blamed on women and it is not tolerated. Women without children are despised and called names. Asked whether infertility would be a source of violence in marriage, 59 (65.6%) women and 18 (45.0%) men said yes while only 27 (30.0%) women and 18 (45.0%) men said no.

4.3.11 Competition of Lifestyle

In neighbourhoods like Ngombe Compound, the houses are small and close to each other. This situation robes neighbours of the privacy they deserve. There is a tendency of copying and envying the neighbour's lifestyle. For this reason, all the respondents in this research were asked whether competition of lifestyle would breed violence in marriage and the response was as follows: 62 (68.9%) women and 26 (65.0%) men said yes while only 19 (21.1%) women and 12 (30.0%) men said no. One mail respondent complained that his wife had a tendency of copying every little thing that the neighbours did such as shopping of groceries, dressing, hair styles and so on causing unnecessary fighting among them. He went on to say that such behaviour has a toll on his budget and that his financial capacity was far below that of the neighbour. He said that it was unfortunate that his in-laws seemed to be encouraging their daughter over such behaviour.

4.3.12 Lack of Love

With age and other factors, women and men may become different from what they were upon marriage. This situation may lead to loss of love between spouses, therefore, the respondents were asked if lack of love was a factor in promoting violence. The majority of women [60 (66.7%)] and also men [29 (72.5%)] said yes it was a factor but 26 (28.8%) women and 10

(25.0%) men said no it was not a factor of violence. In the focus group discussion for women, one respondent explained:

> *After years of marriage, men say that they get fed up of having one wife and they start looking for younger women who cannot even take care of the children or do house chores properly. Most of these young women are sick and they transmit the sickness to our husbands.*

The women further explained that when this happens, the husbands wanted to be nursed by the first wife, not out of love but desperation. Usually the whole community condemned the wives if at all they refused to nurse the husband who abandoned them for a younger girl. The women felt that such situations were very unfair. Asked to explain the type of sickness they were referring to, the women said it was HIV/AIDS related illnesses.

Table: 4.11 Percent distribution of respondents' views on excessive jealousy, infertility, lifestyle and lack of love

	Men		**Women**		**Total**	
	No	**%**	**No**	**%**	**No**	**%**
Excessive jealousy						
Yes	22	55.0	54	60.0	76	58.5
No	14	35.0	26	28.8	40	30.8
Non response	1	2.5	2	2.2	3	2.3
Non applicable	3	7.5	8	8.9	11	8.5
Infertility						
Yes	18	45.0	59	65.6	77	59.2
No	18	45.0	27	30.0	45	34.6
Non applicable	4	10.0	4	4.5	8	6.2
Competition of lifestyle						
Yes	26	65.0	62	68.9	88	67.7
No	12	30.0	19	21.1	31	23.8
Non applicable	2	5.0	9	10.0	11	8.5
Lack of love						
Yes	29	72.5	60	66.7	89	68.5
No	10	25.0	26	28.8	36	27.7
Non applicable	1	2.5	4	4.5	5	38.5
Total	**40**	**100.0**	**90**	**100.0**	**130**	**100.0**

4.3.13 Adequacy of the Zambian Legal System

The legal system in Zambia has a lot of challenges in defining SGBV and aligning it to the existing laws of the country. It is for this reason that the respondents were asked to comment on the adequacy of the Zambian laws in relation to SGBV. The majority of women [51 (56.7%)] and also men [(20) 50%] indicated that the laws were inadequate while only 36 (40%) women and 17 (42.5%) men said the laws were adequate as shown in figure 5. In the focus group discussions men thought the law favoured women while women thought the law was biased against them. One middle aged man had this to say:

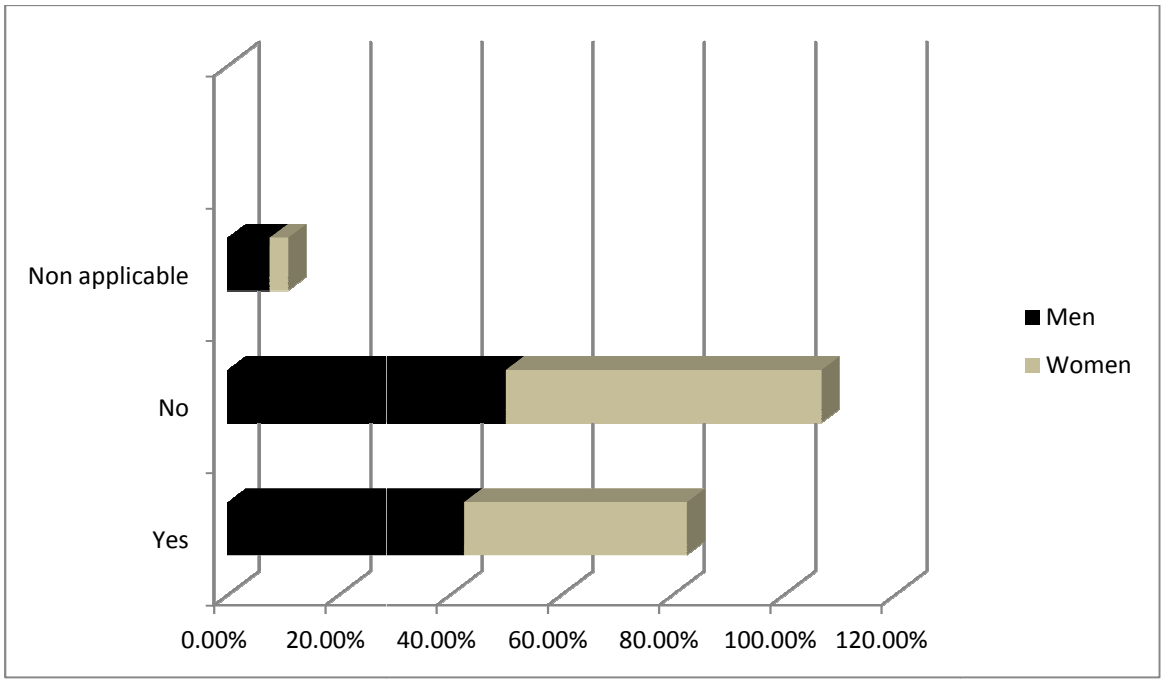
> *My case was in court concerning a divorce. The facts were very clear that I really needed to divorce. To my surprise we were ordered to reconcile. Up to now we haven't reconciled with my wife, we still fight.*

The man did not want to disclose full details of his story. On the other hand one middle aged mother of four children complained:

> *The courts take long to dispose of some cases, and when they do, the judgement is clearly biased. It feels like the local court does not like women.*

The woman was hesitant to disclose the details of her personal experience as she became emotional.

Figure 5: Adequacy of Zambian Legal System



4.4 Existing Intervention Programmes

Ngombe Health Centre is a government owned clinic which is situated right inside Ngombe compound. It has a sexual and gender-based violence shelter which is a drop-in-centre caring for violence survivors. The shelter is supported financially by DFID and US/AID and is located right within Ngombe Health Centre. The drop-in-centre is run by qualified full-time counsellors and volunteer part-time counsellors. However the researcher noticed that security at the centre is inadequate. It is easy for an abusive spouse to follow the person who is trying to seek help at the centre and cause confusion.

Types of violence dealt with at the centre include physical violence, mostly battery, sexual violence like defilement/rape and emotional violence such as neglect of families to mention a few. Child-neglect, which is a by-product of SGBV is also taken care of by engaging the Child Protection Unit (CPU) which is a branch of the Zambia Police Service. The SGBV centre also works hand-in-hand with the Victim Support Unit of the Zambia Police Service.

Services offered at the centre include psychosocial counselling to survivors of SGBV. Physical violence victims are treated at the clinic and whenever referrals are necessary, they are done to the appropriate institutions such as CPU, VSU and any legal services institution.

The centre also assists in forming and running Support Groups for SGBV survivors. This researcher witnessed the formation from scratch of a brand new Support Group of about 30 women. The women were from a similar background with problems and experiences of violence-related problems. The aim of Support Groups is to help each other psychologically, emotionally, materially and economically. Support groups are by purpose connected to CPU and VSU so that the members can learn about children's and women's rights. The members are also taught how to write and execute project proposals in order to access funds for income generating activities. Possible projects include peanut-butter making and selling second-hand clothes. The members are encouraged to create a revolving fund which will eventually make them self-reliant. There was basically no other restorative activities going on in the compound apart from the VSU help from the Zambia Police Service which the women say only specialises in issuing call outs for perpetrators.

Asked to name any institution which helps SGBV survivors, the respondents were able to mention the VSU of the Zambia Police Service and the Ngombe Gender Based Violence Centre. Other respondents said that they preferred to go to YMCA and YWCA which were situated far away from their compound. This was for safety and confidentiality reasons.

4.5 Summary

Results of this study show that *battery* was the most common form of physical violence while *insulting* topped the list for emotional violence. In economic abuse, women suffered lack of assistance from their spouses. *Rape, incest* and *defilement,* were identified as common sexual abuses experienced by married women. Alcohol abuse, unfaithfulness, cultural factors and

lack of education were some of the causes of violence. Results further showed that the effects of violence that married women suffered were social-economic and also health-related. In addition to this, results revealed that there was a Gender-Based Violence Centre situated within Ngombe Health Centre.

CHAPTER 5

DISCUSSION OF FINDINGS

5.0. Introduction

This chapter discusses the findings of the study based on the objectives. This discussion also attempts to answer the research questions while giving the highlights of major findings of the research and comparing them to past findings in the reviewed literature where necessary.

The findings show that SGBV manifests in physical, sexual, emotional (psychological), and economical forms. This violence is experienced by both women and men although women are likely to experience it more than men. SGBV has devastating socio-economic as well as health-related consequences. The study also reveals that SGBV is caused and associated with a number of factors. Lastly, results show that there is a gender- based violence centre located in the compound.

5.1 Common forms of violence

The findings show that the majority of women (72.2%) experienced physical violence ***often*** while only 10% of men experience physical violence ***often.*** Even though both women and men experience physical violence, women were likely to experience this violence at a higher frequency than men. This could be due to the fact that men are naturally physically stronger than women. Results revealed that beating, kicking or dragging was the most common form of physical violence with women likely to experience it 18 times more than men followed by slapping where women are likely to experience it 11 times more than men. Women also had their hair pulled or arms twisted. This is likely to occur to women 10 times more than it would occur to men. The extent of violence and gender gaps are alarming. Clearly, women

are much more vulnerable to physical violence than men possibly because of their biological nature and also due to socialisation of a patriarchal society.

In relation to educational attainment, physical violence is more pronounced in women who attained below secondary school level education with the highest frequency of experiencing the most physical violence being at upper primary level. In this research, only 2.2% women as compared to 20% men attained tertiary level education. However, women who attained senior secondary to tertiary level of education (27.4%) experienced the least violence. The pattern was similar to men but more pronounced in women. This result implies that secondary and tertiary level of education is likely to confer protection to women against gender-based physical violence. This could be due to the fact that women who attain senior secondary and tertiary education are empowered socially and economically so it makes them command respect. This result compares well with Rumbold (2008) who states that woman with at least secondary education are able to resist patriarchal norms which are aimed at bringing them down.

Another form of violence that was revealed was mental abuse, also known as psychological or emotional violence. 27.6% women and 15.0% men confirmed that they were emotionally abused ***often*** by their spouses while 44.4% women and 52.2% men indicated that they were being emotionally abused ***sometimes.*** Surprisingly, in this scenario, more men are likely to be emotionally abused ***sometimes*** than women. This could be attributed to the fact that women lack physical strength to beat men so they resort to verbal abuse. A confirmation came from focus group discussion where both men and women pointed out that verbal abuse of insulting in public is very common in their community. It could be that spouses may wish to find a way of informing the community of their grievances so they resort to insult in public. It could also be a way of reporting or exposing a spouse to the community although spouses may use

the insults to bring each other down. Results revealed that another common type of emotional abuse was controlling behaviour where a person insists on knowing where the spouse is. Women are twice as likely as men to experience this abuse.

Economic violence was also identified in this research. Focus group discussions reveal that men and women grab each other's salaries and that men are guilty of neglecting their families very often. However, some men feel jealous of their wives and stop them from working for wages. Results show that only 22.2% women and 5.0% men reported being economically abused ***often*** while only 52.7% women and 90% men reported being abused ***sometimes.*** The switch in the frequency of economic abuse (more male victims) may mean that women are denied access to money so they grab their husband's earnings. Actually, women are 3 times more likely than men to be stopped from working. Other identified abuses are controlling behaviour in economic violence such as economic decision making and control of family earnings. It was surprising to learn that even the in-laws control family earnings.

Another form of SGBV is sexual abuse. 26.7% of the women sampled have experienced forced sexual acts at one time in their lives. This result is a little higher that the ZDHS results of 2007 where 1 in 5 (20.0%) of women aged 25-39 have suffered sexual abuse at one time in their lives. The increase in sexual violence could be due to deterioration of moral standards in the society and also the fact that people realise that they can report the violence to relevant authorities. Similarly, 17.5% of the men have equally experienced forced sexual acts in their lives. Compare with 13.0% of men experiencing sexual violence in a study by WHO (2002, 149). The number of abused cases has definitely increased due to a number of factors such as perceptions and behaviours which are unique to a particular region (Seytou et al, 2007). This indicates that men are also victims of the violence though women are more likely to be sexually abused than men. It could be due to a number of factors such as dependency on men,

lack of access to social-economic resources and even due to their biological make up. We can conclude that even men can be victims of sexual violence although women are more likely to have a higher frequency of experience of violence than men. It is interesting to know that marital rape was recognised by both men and women. However, the abuse takes place in most marriages

The focus group discussion for women was quick to identify marital rape, ordinary rape, incest and defilement as sexual abuses that they experienced at both household and community level. However, the men's discussion reluctantly recognised rape as an abuse. This situation makes it difficult for stakeholders to advise because traditional men take wives to be part of personal property and do not believe in asking a wife if they could have sex. The women's discussion also revealed that lack of water and lack of a bridge in their community creates circumstances where they and their daughters are rendered vulnerable to sexual abuse. This shows that even lack of development/social amenities can cause violence.

Based on this research, perpetrators of violence can be categorised into two: relatives and non-relatives. Relatives who are very close to the victim are likely to take advantage of any situation because the victim may not possibly suspect them to be abusive but instead confides in then. The discussions revealed that blood relatives may take incest as a cleansing ritual. People who are authority figures in society are likely to take advantage of someone who relies on them economically, socially and emotionally. The abuse by a police officer, who enforces the law, only shows that the same laws are weak and not elaborate. This result shows that girls and women are not safe with anyone or at any place. A CSO study revealed similar results with perpetrators of violence as husbands, boyfriends, neighbours and even male relatives (CSO, 2003).

Data reveals that women are likely to experience their first sexual abuse as early as 6 years and as late as 32 years on the average. Men on the other hand, tend to experience their first sexual abuse at a later age of 10 years to as late as 32 years. This means that females' vulnerability is more pronounced earlier in life than is the case with males. This could be due to gender inequalities which are inculcated into our traditional society and so baby girls are born into a world of inequalities. The highest cases of sexual abuse are in the age range of 11-15 for women (53.2%) and 16-20 for men (42.9%). The age range 11-15 for women is the age of puberty which is also a vulnerable adolescent age group. Girls in this age range have a whole future before them and defiling them would be very destructive to their lives.

Fortunately, both women (72.2%) and men (77.5%) indicated that they were aware of the fact that SGBV was an offence. This knowledge is a step in the right direction of mitigating violence. However, even after knowing that SGBV is an offence, some respondents are hesitant to report violent partners to the police. This came to light during focus group discussions where women thought it unwise to report their breadwinner to the police. This situation takes us back to dependency on men due to gender inequalities. The men were also hesitant to report their violent wives to the police because policemen allegedly raped all female cellmates. There is very little confidence in the legal system. The result is that SGBV cases are usually withdrawn from the courts.

Still on sexual abuse, data revealed that only 13.2% of women who ever experienced sexual abuse sought help. As for the men, only 7.5% sought help. Survivors, regardless of their sex are reluctant to open up, it is embarrassing. In the focus group discussion, the women revealed that it was difficult to seek help after experiencing sexual abuse because it was not known how the people listening would react. It was revealed by women in the focus group

discussions that the most common reaction of the community towards SGBV survivors was to blame the victim.

Respondents added their voice on a number of marital conflicts such as denying a partner sex when there is a reason and the majority of women (61.1%) and also men (55.0%) said it was understood. Very few women (16.7%) and men (2.5%) left home after experiencing SGBV. The result shows that women are 8 times more likely than men to leave their matrimonial homes on the onset of violence. In the focus group discussion it was revealed that men may even go to the bar just to avoid a violent wife while women sought refuge in more decent places. Surprisingly, men and women returned to their abusive marriages citing love for children or their spouse as a reason. In my opinion, reasons for returning to abusive homes are just excuses for laziness in some cases, because it does not make sense to return to an abusive marriage if one's life is in danger. It is unwise and unacceptable. It is better to start a new and safe life no matter how difficult it may prove to be.

5.2 Consequences/Effects of Violence

SGBV has negative consequences on married women and also men. Some socio-economic effects revealed in the research were lack of peace, fear, separation and generally sad marriages which were regrettable and ended up in divorce. These effects are crushing even to the bravest person.

Since 35.5% of women and 37.5% of men said they ***often*** lived in fear of SGBV showing that both genders are affected in almost equal proportions, it is clear that their body and mind is negatively affected and their overall development is disturbed hence the isolation of themselves. Focus group discussions revealed that SGBV also affects the welfare of children to the extent that they do badly at school as evidenced by their report cards. Children are the future of the nation and if they are unhappy, the future of the nation is affected in the long

run. It is clear that mothers feel sad when they look at their unhappy children so we conclude that SGBV has a double effect on married women as they have to worry about their abusive husbands and their unhappy children. This could be more pronounced in mothers than fathers because of maternal instincts which are said to be in-born. Such situations are likely to result in suicidal tendencies as survivors are reduced to destitution due to mockery, being bullied and humiliated by onlookers. Men who are abused by women are a laughing stock of the compound, probably because men are considered to be stronger than women traditionally. However, sympathy may come from the community especially from elderly women who try their best to rehabilitate the violence survivors. This help is short lived due to lack of resources. As seen from background characteristics, the majority of women (91.1%) are in the lower income bracket of an average of less than K1000 per month compared to their male counterparts with 57.5% only in the lower income bracket.

SGBV also has health-related consequences on married women and men. Results showed that 32.3% of women and only 5.0% men experience poor health due to SGBV. Women tend to be more negatively affected health-wise due to their biological make up which differs from that of men. Actually, women are 6 times more likely to experience poor health due to SGBV than men. Other health-related effects were unplanned pregnancies and consequently, abortion and its complications. This could be attributed to lack of access to family planning and is confirmed by results showing that in the midst of violence, 57.8% women and 62.5% men are unable to use condoms while 58.9% women are unable to access family planning services. In the midst of violence it may be difficult for women and even men to make informed choices about their sexuality, hence the unwarranted health effects of violence. Other effects of violence that were cited were bodily harm such as sustaining of cuts bruises, deformities and contraction of HIV virus and STIs which remain untreated due to shyness.

Clearly, these health-related effects of violence are costly for both the government and the individual survivor. One can safely say that mitigating violence is saving money in a way.

5.3 Causes and Factors of SGBV

Research has identified a number of factors that are associated with SGBV. Topping the list of factors is abuse of alcohol, peer pressure, financial misunderstandings, low level of education, traditional aspects, paying of bride price and excessive jealousy by spouses. Other factors include economic dependency, parental interference, infertility, competition of lifestyle, lack of love, laziness and even the inadequacy of the Zambian legal system.

Our tradition has prescribed gender roles which one must adhere to or face condemnation hence the eruption of violence even over simple issues like house chores. Bride price makes men feel like they own a wife and so they become excessively jealous of their wives, lose trust and become violent. It makes sense to say that low level of education on the part of women creates a chain reaction of promoting gender inequalities in terms of securing gainful employment and acquiring basic needs of life. This in turn makes women dependent on men or they become unfaithful to their marriage and become prostitutes for economic reasons.

This research revealed that women are roughly 4 times more likely than men to experience violence caused by their low level of education. As for the Zambian Legal system, the majority of women (56.7%) and also men (50%) indicated that the system was inadequate. This shows that both men and women are likely to experience the inadequacy of the law on the same level. During the focus group discussion, both men and women lamented that cases took long to dispose off and judgement from local courts was clearly biased. All women thought that the law favoured men while some men thought it favoured women. The confusion surrounding the Law in relation to SGBV could be attributed to the fact that it is not very clear what constitutes gender violence and how to prosecute perpetrators.

5.4 Restorative programmes

This result shows that violence survivors need a fully packed treatment of both physical and mental well-being and that their children need treatment as well. Unfortunately, Ngombe Compound has insufficient intervention programmes. There is only one gender based violence centre located at Ngombe Health Centre which is a government institution. The drop-in-centre provides counselling and referral services. Clearly, one facility is not enough to cater for the population of Ngombe compound. Even though the Ngombe centre is working hand in hand with the Zambia police, it is overwhelmed by violence survivors who avoid the police VSU since the word 'Police' is intimidating in nature. The GBV centre has no adequate security features which should enable women and their counsellors to be secure. Male violence survivors are disadvantaged because the drop-in-centre has a *feminine face* and is clearly for women because it has a structure called 'women's shelter'. The counsellors are very friendly but they look overworked. It could be that the centre is understaffed.

5.5 Summary

Results showed that women experienced sexual and gender-based violence to a higher extent than their male counterparts most likely due to their biological make up coupled with traditional orientation. This reason could also be linked to the fact that violence has a more devastating impact on women than men. Lack of essential services in a community is likely to trigger violence, as was the case of lack of water in Ngombe compound. Furthermore, results showed that the SGBV centre in the compound was overwhelmed because it was the only main restorative service for violence survivors.

CHAPTER 6

SUMMARY, CONCLUSION AND RECOMMENDATIONS

6.0 Introduction

This chapter gives a summary and conclusion of the whole research followed by the recommendations.

6.1 Summary

The aim of the study was to explore the experiences of women survivors of sexual and gender-based violence while establishing the available restorative services in order to improve on them. The main objectives were: To identify patterns of sexual and gender-based violence among married women: To explain experiences of women who have undergone sexual and gender-based violence: To establish factors associated with gender-based violence: To describe measures taken by stakeholders to rehabilitate survivors of sexual and gender-based violence.

A structured questionnaire and two focus group discussions were used to collect primary qualitative and quantitative data. 100 women and 50 men comprised the study sample drawn from Ngombe Compound, an illegal settlement in Lusaka City.

The research has shown that sexual and gender-based violence manifests itself in a physical, sexual, emotional and economic manner while affecting both men and women. Research reveals specific forms of violence experienced by married women and men as battery, rape, marital rape, incest, defilement, insulting in public, neglecting the family and grabbing of earnings. It turns out that 26.7% of women reported being sexually abused at one time in their lives. Results show that women are likely to experience first forced sex as early as 6 years of age as compared to their male counterparts who are likely to experience first forced sex at 10

years of age. Perpetrators of violence were found to be relatives and even non-relatives. Unfortunately, only 13.2% women and 7.5% men who experienced sexual abuse sought help for it. Even though respondents were aware that sexual and gender-based violence was an offence, they still hesitated to report violent spouses to the police. Women said they couldn't risk turning in their breadwinners to the police while men feared that police officers would rape their wives. Survivors who left their homes returned to their abusive marriages sighting the fact that their children would suffer if they didn't return and that they really had nowhere to go.

Violence survivors experienced socio-economic effects of violence such as destitution, isolation, withdrawal, and being blamed for the abuse. Other effects include lack of peace, fear, separation, divorce and suicidal tendencies. Respondents also cited health-related effects of violence such as unplanned pregnancies, miscarriages, lack of family planning facilities and contraction of HIV virus and STIs which go without treatment due to shyness. These effects of SGBV have trickled down to negatively affect children of violence survivors.

Factors and causes of SGBV include financial misunderstanding, alcohol abuse, unfaithfulness, competition of lifestyle, excessive jealousy, peer pressure and level of education. Only 34.6% of women had attained secondary school level of education and above. It happens that secondary level of education confers protection from SGBV to women and men. Economic dependency is another factor of violence. Results show that 91.1% of women fell in the lower income bracket of less than K1000 per month. This kind of poverty makes women vulnerable hence the dependency on men. Other factors are infertility, lack of love, traditional affairs, parental interference and paying of bride price. The Zambian Legal system is said to be inadequate as it is unclear of what SGBV is and the law is seen to be

biased hence promoting violence. Simple things like house chores are connected to gender roles and they can cause violence. Surprisingly, lack of running water and lack of a bridge in the compound rendered the women and girls vulnerable to sexual violence. Therefore, we conclude that even lack of essential amenities can promote violence.

As for intervention programmes, Ngombe Compound has a gender-based violence centre which is located at Ngombe Health Centre and it offers services such as psychosocial counselling to violence survivors and also refers survivors to appropriate institutions such as VSU and CPU of the Zambia police service. This facility is not enough to cater for the Ngombe population.

6.2 Conclusion

This study has shown that sexual and gender based violence is a reality and that patterns of violence, forms, causes and the devastating consequences are similar among women and men, though, violence tends to be more severe in women hence the concentration on women survivors' welfare. This inequality may be attributed to in-born patriarchal tendencies in men which women accept as normal and also the biological make up of women.

This study has also shown that even underdevelopment like lack of a bridge and lack of water in an area can trigger violence. It is interesting to note that women and even men are aware of patterns of violence, its causes, effects and consequences, but they still fall victim to it. The available restorative services are inadequate, causing a strain on any potential mitigation programmes that are available. This situation makes it difficult to adequately care for survivors of violence. We conclude that SGBV is a real, complex and extensive problem. Therefore, it requires serious measures which should incorporate both men and women's concerns to significantly reduce or eradicate it.

6.3. Recommendations

On the basis of this research and other studies shown in the literature review, the following recommendations are made:

6.3.1 Control of Use of Alcohol

Alcohol abuse was cited as one of the factors associated with sexual and gender-based violence. It is therefore recommended that the relevant authorities should patrol and control the operating hours of the many bars and drinking places that operate within the compound. This may reduce the hours that men and women spend drinking in the bar.

6.3.2 Compulsory Screening of Violence Survivors

Since gender-based violence survivors are at risk of contracting STIs and the HIV virus. It is important therefore, that stakeholders should ensure that all violence survivors (especially rape cases) should be screened for HIV and STIs infection as they undergo psychosocial counselling and then treated accordingly.

6.3.3 Training of Health Personnel

Health personnel who attend to sexual and gender-based violence survivors should be well versed with SGBV issues by undergoing simple but helpful gender violence training to enable them handle the survivors confidently and competently instead of blaming the victim as seen from the findings of this study

6.3.4 Improvement of Drop-in-Centres

A one-stop drop-in-centre encompassing a police post, health centre, legal clinic and counselling centre should be planned and built in each community. This can be done by

government in partnership with the corporate world, NGOs and CBOs. Such a centre can help the violence survivors to be attended to in one place.

6.3.5 Security at Drop- in –Centre

Security at the Drop-in-Centre should be improved. This will encourage more survivors to pass through because they will feel confident and safe from possible trailing of perpetrators.

6.3.6 Community Initiative

The community should form a Task Force comprised of women from different churches such as the Catholic Women's League, the Dorcas Mothers from Seventh Day Adventist, the Mothers Union from the Anglican Church and so on. This Task Force should work out ways of preventing SGBV by planning advocacy programmes in the local language. They should also find ways of supporting violence survivors materially and spiritually as they try to rehabilitate them. The local setting may work better than foreign programmes due to cultural differences.

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APPENDIX A

QUESTIONNAIRE FOR SGBV SURVIVORS

SECTION 1 RESPONDENTS BACKGROUND

Good morning/afternoon. My name is Edna Yambani-Kazonga a student at the University of Zambia. I am conducting a research on SGBV. I would appreciate your participation in this study. You don't have to tell me your name and whatever information you provide will be kept strictly confidential and will not be shown to anyone.

Participation in this study is voluntary, please feel free. May I start asking you questions now?

RESPONDENT CONSENTS TO THE INTERVIEW	
RESPONDENT DOES NOT CONSENT TO THE INTERVIEW	

RECORD TIME….HOURS…….MINUTES…….

Tick the appropriate response.

Date……(dd-mm-yyyy)

SECTION 1 BACKGROUND INFORMATION

NO.	QUESTIONS	CODING CATEGORIES	SKIP	
1	How old are you?			
2	What is your occupation?			
3	What is the highest level of school you attended?	Nil Lower primary Upper primary Junior Secondary Senior Secondary		
4	What is your religion?			
5	How many children do you have?	a) None b) Below 5 c) Above 5		
6 7	What is your monthly income? What other economic activities are you involved in?	Specify a) Farming b) Vending c) Other (specify)		

SECTION 2 PHYSICAL VIOLENCE

8	In the last 12 months Does your husband ever do any of the following things to you? a)slap you b)twist your arm or pull your hair? c)push you, shake you, or throw something at you? d)kick you, drag you or beat you up? e)try to choke you or burn you on purpose? f)threaten or attack you with a knife? g)physically force you to have sex with him even when you did not want to?	Often Sometimes Not at all
9	In the last 12 months Did you have any a)cuts, bruises or aches b)severe burns c)eye injuries, sprains, dislocations, or minor burns d)deep wounds, broken bones, broken teeth	Yes No

SECTION 3 EMOTIONAL VIOLENCE

10	Does this situation apply to your husband? a)jealous or angry if you talk to other men? b)frequently accuse you of being unfaithfull? c)not permit you to meet friends? d)limits your contact with your family? e)insists on knowing where you are?	Often Sometimes Not at all

11	Does your husband ever do any of the following things to you? a)say or do something to humiliate you in front of others? b)threaten to harm or hurt you? c)insult you or make you feel bad about yourself?	Often Sometimes Not at all
12	Have you ever been so stressed as to contemplate suicide?	Often Sometimes Not at all
13	Have you ever attempted suicide?	Often Sometimes Not at all
14	Does your partner provide for a)school fees for children? b)medical expenses for the family? c)household resources for the family?	Often Sometimes Not at all

SECTION 4 ECONOMIC VIOLENCE

15	Have you ever been stopped from working for a wage/salary?	Often Sometimes Not at all
16	Who stopped you from working?	Specify
17	Have you had your salary/earnings taken away?	Often Sometimes Not at all
18	Who controls all the family earnings?	Specify
19	Does your partner share with you the earned money?	Often Sometimes Not at all
20	Do you own any property as a woman/wife?	Yes No
21	Who makes final decisions in the buying of major household goods?	Specify

SECTION 5 SEXUAL VIOLENCE

22	Has anyone forced you to have sex at any time in your life?	Yes No
23	How old were you the first time you were forced to have sex?	Specify

24. Who was the person who forced you at that time?	Specify
25. Did the person make you afraid of what they would do if you refused to have sex with them?	Yes No
26. Do you have a chance to use a condom?	Yes No
27. Did suggestions on condom use provoke your partner?	Yes No
28. Have you ever tried to seek help to stop this person from doing this to you?	Yes No
29. Where did you seek help for this	Specify
30. During the past 12 months have you reported the sex abuse to anyone?	Yes No
31. After you reported the abuse did you receive any of the following care? STI screening/treatment HIV counselling/testing emergency contraception counselling referals, please specify	Often Sometimes Not at all Specify
32. Can you name one organisation that provides care for abused women?	Yes No
33. Are you aware that SGBV is an offence?	
SECTION 6 MARITAL CONFLICTS	
34. Does your spouse have other sexual partners?	Yes No
35. Did you ever leave your home on the onset of violence?	Often Sometimes Not at all
36. Where did you go after you left home?	Specify
37. Why did you return to you abusive marriage?	Specify reason
38. Do you think a wife is justified to deny her husband sex when there is a reason? Explain	Yes No

SECTION 7 EFFECTS OF VIOLENCE ON MARRIED PERSONS	
39. Do you leave in fear at home due to SGBV?	Often Sometimes Not at all
40. Do you have any chance in your memory to peacefully discuss a)family planning	Yes No
b)condom use	
c)property ownership	
41. In the last 12 months have you ever experienced any SGBV-related complications resulting in	Yes No
a)poor health	
b)unplanned pregnancy	
c)abortion	
42. Which aspect of your married life is most affected by violence?	
a)children's welfare	Yes No
b)own welfare as a wife.	Yes No
43. What is your response to abusive spouses?	
a)reporting	Yes No
b)using violence	Yes No
c)running away	Yes No
SECTION 8 FACTORS ASSOCIATED WITH GENDER - BASED VIOLENCE	
44. In the last 12months did your spouse take alcohol before they became violent?	Yes No
45. Does your low level of education provoke violence?	
46. Do you feel inferior to your spouse just because of your gender?	
47. Does your tradition justify spouse beating as a disciplinary measure?	

48. Poverty may result into economic dependency of a female spouse on her partner, thereby rendering her vulnerable to violence.	Often Sometimes Not at all
49. Are there any childhood experiences that may trigger violence in your adult married life?	
50. Does parental interference provoke violence in marriage?	
51. If your spouse was to be found unfaithful to you, would your reaction be violent?	
52. Is there a relationship between payment of *Lobola* and violence?	Yes No
53. Is your spouse excessively jealous of your social life?	Yes No
54. Do you fight with your spouse due to financial misunderstandings?	Often Sometimes Not at all
55. Would infertility be a source of violence in marriage?	Yes No
56. Does competition of lifestyle breed violence in marriage?	Yes No
57. Can lack of love be a factor in promoting violence?	Yes No
58. Does the Zambian Legal System adequately protect survivors of sexual and gender-based violence?	Yes No

THANK YOU VERY MUCH FOR YOUR COOPERATION

Adopted, with modifications, from 2007 ZDHS WOMEN'S QUESTIONNAIRE ON DOMESTIC VIOLENCE (CSO).

APPENDIX B

INTERVIEW GUIDE FOR FOCUS GROUP DISCUSSION

Good Morning/afternoon. I am Edna Yambani-Kazonga, a student at the University of Zambia. I would like us to discuss issues of SGBV so feel free to share your opinions and even experiences. You do not have to tell me your name.

1. What are the factors associated with gender-based violence?
2. From your experiences and you own opinion, what causes husbands to be violent?
3. How does violence affect married persons in terms of their health, happiness and general wellbeing?
4. Why do spouses choose to remain in abusive homes despite the violence?
5. What type of abuses are most frequently observed in your community?
6. What is being done in your community to prevent violence?
7. What do you think about reporting/non-reporting of violent partners to the police?
8. What is the reaction of the community towards violence survivors and children who are born as a result of rape?
9. What are the reactions of violence survivors?
10. Explain any other traumatic experiences that survivors encounter?
11. In your opinion, what must be done to mitigate this violence?

NB-Spend no more than 6 minutes on one question.

I THANK YOU FOR SPARING YOUR TIME

APPENDIX C

CONSENT FORM

Good morning. I am Edna Yambani-Kazonga, a student at the University of Zambia. I would like to have a focus group discussion with you concerning Sexual and gender-based violence issues. This is an academic exercise and confidentiality will be ensured throughout the discussion. You don't have to tell me your name but I need your permission on two issues:

1. Do you agree to take part in this focus group discussion?

   Yes..... No.....

2. If need arises, I may have to record your voices during the discussion. Will you allow me to do so?

   Yes..... No.....

Thank you for your cooperation.