

**WOMEN EMPOWERMENT AND GENDER BASED VIOLENCE IN
SERENGETI DISTRICT, MARA REGION, TANZANIA**



**FOR REFERENCE
ONLY**

BY

ANNA NYAKAUNDA SIKIRA



**A THESIS SUBMITTED IN FULFILMENT OF THE REQUIREMENTS FOR THE
DEGREE OF DOCTOR OF PHILOSOPHY OF SOKOINE UNIVERSITY OF
AGRICULTURE. MOROGORO, TANZANIA.**

ABSTRACT

This study was conducted in Serengeti District to assess the extent to which women empowerment is linked to Gender Based Violence (GBV). Specifically, the study examined the extent of GBV in the area, the attitude of the communities towards GBV and the responses of women during and after GBV. The study also sought to establish the linkage between socio-economic status and GBV as well as the linkage between women empowerment and GBV. Serengeti District was purposively selected to be the study area because of having a high level of GBV as opposed to other districts of Mara region. Three divisions were purposively selected while four wards and two villages from each ward were randomly selected to make a total of 8 villages for the study. Data were collected between August 2007 and June 2009. A total of 240 women selected randomly were subjected to a questionnaire survey. Other data were collected through focus group discussions and indepth interviews. Descriptive statistics and inferential statistics including binary logistic regression model, one way ANOVA and Chi-square were applied. Based on the findings, various forms of GBV were found to be practiced in the area regardless of the ongoing empowerment strategies in the country. With regard to attitude, both victims and perpetrators of GBV had positive perception towards GBV. Furthermore, GBV was influenced by empowerment indicators such as decision making at a household level and age of women at first marriage. Similarly, GBV was found to occur to all women regardless of socio economic status. However, findings of the study revealed that as economic status of women improves the level of GBV decreases. It is concluded that improving women's socio-economic status and decision making through awareness creation would reduce GBV in the area. Additionally, increasing the age of girls at first marriage would eventually reduce GBV. It is, therefore, recommended that social and economic empowerment is needed to relieve women from GBV. A revision of

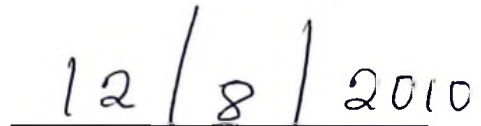
various laws such as the Marriage Act of 1971 which allow marriage of young girls of 15 years old is required which would increase the age of women at first marriage and reduce GBV. Enacting of bylaws to fight against some of the outdated cultural norms is recommended as a strategy towards elimination of early pregnancies and marriage of young girls. Awareness creation to both men and women in the area is needed in order to change their perceptions towards some of the cultural practices like marriage between two women, paying of bride price and ritual cleansing.

DECLARATION

I, Anna Nyakaunda Sikira do hereby declare to the Senate of Sokoine University of Agriculture that this is my original work and has not been submitted for higher degree award at any other university.



Anna Nyakaunda Sikira
(PhD Candidate)

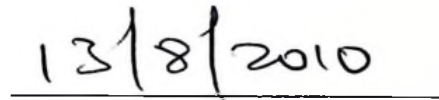


Date

The above declaration is confirmed by



Prof. Eleuther Alphonse Mwageni
(Supervisor)



Date

COPYRIGHT

No part of this thesis may be reproduced, stored in any retrieval system, or transmitted in any form or by any means without prior written permission of the author or Sokoine University of Agriculture in that behalf.

ACKNOWLEDGEMENTS

This study could not be successful without the support from the Programme for Agricultural and Natural Resources Transformation for Improved Livelihoods (PANTIL) at Sokoine University of Agriculture, for the financial support which enabled me to accomplish this work. I wish to express my gratitude to my supervisor Professor Eleuther Alphonse Mwageni for his guidance, advice, constructive criticisms through out the study period. His valuable comments have significantly contributed to the shaping of this thesis.

My appreciation also goes to Mr. Lot Misinzo and Mr. Jumanne Magiri and all the staff of the CBHPP programme who despite their very busy working schedules had found time to guide me through the collection of data for this study. Not forgetting Ms. Georgina Mkwenda of the Community Development Office of Musoma District and Anthon Gikuri for the support and advice during data collection. My thanks also go to the government officials at the District Agricultural Office and the Community Development Office of Musoma and Serengeti Districts for their guidance during data collection. I appreciate the role of the Ward and Village leaders and all the enumerators and respondents for their useful information towards the accomplishment of this study.

Special thanks also go to the officials at the Serengeti Designated District Hospital (DDH) more specifically Mr. Willy Elias Mchomvu. Others are Mr. Joseph Kiberenge of Machochwe Dispensary in Serengeti District for the useful information which they provided. Officials at the Police post at Nyamisingisi are also indebted for their openness on issues pertaining to this study.

My acknowledgements would be incomplete if I do not say a word of thanks to my colleagues at the Development Studies Institute, specifically Dr E. Chingonikaya, Dr. A. Mwakalobo and Dr. C. Nombo for their tireless assistance in the writing and shaping of this work.

My sincere gratitude goes to SUA-UMB exchange programme under PANTIL through the young professional exchange programme for the opportunity they offered to me to attend some basic courses for five months at the Norwegian University of Life Sciences (UMB). This enabled me to gain an international exposure and acquire more knowledge relevant to my study. Special thanks go to the coordinators Prof. Jairo A. Matovelo, and Prof. Romanus Ishengoma of SUA and Prof. Eik, O. Lars of UMB who provided a conducive environment to enable me pursue my study at the University.

Special appreciation goes to my children Frank, Lilian, and Sikira Erick Magafu for their patience and tolerance when I was away in Norway for further study, and when I was in Serengeti District during data collection. Their understanding and moral support during the entire period of my study is highly acknowledged. My appreciation goes to Miss Grace Magoti for taking care of my family during my absence. Lastly, I would like to state that any mistakes, errors and patches of ignorance found in this work rest with me.

DEDICATION

This work is dedicated to my children Frank, Lilian and Sikira whom I encourage to impersonate my achievements. This work is also dedicated to my late beloved father Mr. Sikira Surra who passed away a few months before the accomplishment of this study and to my late mother Nyamanyasi Sikira who laid the foundation of my academic achievements. It is also dedicated to all GBV victims especially the women of Serengeti, Tanzania and in Africa at large.

TABLE OF CONTENTS

ABSTRACT.....	ii
DECLARATION.....	iv
COPYRIGHT.....	v
ACKNOWLEDGEMENTS	vi
DEDICATION.....	viii
TABLE OF CONTENTS.....	ix
LIST OF TABLES	xvii
LIST OF FIGURES	xx
LIST OF APPENDICES.....	xxi
LIST OF ABBREVIATIONS AND ACRONYMS	xxii
CHAPTER ONE	1
INTRODUCTION.....	1
1.1 Background Information.....	1
1.2 Problem Statement and Justification	7
1.2.1 Problem statement.....	7
1.2.2 Research justification	8
1.3 Objectives of the Study.....	9
1.3.1 Main objective	9
1.3.2 Specific Objectives	10
1.3.3 Hypotheses tested	10
1.4 Conceptual Framework.....	10
1.5 Organization of the Thesis.....	14

CHAPTER TWO	16
LITERATURE REVIEW	16
2.1 Overview.....	16
2.2 Definition of Key Concepts	16
2.2.1 Women empowerment	16
2.2.2 Gender based violence	17
2.2.3 Violence against women	17
2.3 Forms of GBV.....	17
2.4 Perspective on Women Empowerment.....	22
2.4.1 Historical background of women empowerment.....	22
2.4.2 Theoretical perspectives about power and empowerment	25
2.4.3 Policy approaches towards women empowerment.....	26
2.4.4 Indicators of women empowerment.....	28
2.5 Historical Background of Gender Based Violence	29
2.6 Gender Based Violence in the Life Cycle of a Woman	31
2.7 Theories Related to GBV in African Societies	34
2.7.1 Right-based theories.....	34
2.7.2 Feminist theories on GBV	37
2.7.3 Cultural explanation on GBV	39
2.7.4 Violence as explained in the society in transition theory.....	41
2.7.5 Gender role conflict theories on GBV	42
2.7.6 Interactionist approaches to GBV	44
2.7.7 Structuralist approaches to GBV	44
2.8 Linkage of Women Empowerment and GBV	45
2.9 Determinants of GBV	47

2.10 Women’s Response to GBV	50
2.11 Methodology Used in GBV Studies.....	51
2.12 Research on Women Empowerment and GBV in Tanzania.....	54
2.12.1 Research on women empowerment	54
2.12.1.1 Political empowerment	55
2.12.2 Research on GBV in Tanzania	55
2.13 Summary.....	58
CHAPTER THREE	59
METHODOLOGY.....	59
3.1 Overview.....	59
3.2 Description of the Study Area.....	59
3.2.1 Geographical location of Serengeti District	59
3.2.2 Justification for selection of the study area.....	61
3.2.3 Climate and ecology	61
3.2.4 Administration	62
3.2.5 Socio-economic and cultural aspects of people in the district	63
3.3 Research Design.....	63
3.4 Sampling Procedures	63
3.4.1 Sampling design.....	63
3.4.2 Sample size.....	64
3.4.3 Sampling for questionnaire-based survey	66
3.4.4 Selection of key informants.....	67
3.4.5 Selection of respondents for focus group discussions (FGDs).....	68
3.4.6 Selection of respondents for in-depth discussion	68
3.4.7 Recruitment of enumerators	69

3.5	Data Collection.....	69
3.5.1	Primary data collection	69
3.5.2	Secondary data.....	71
3.6	Data Management Procedures	72
3.6.1	Factor analysis	72
3.6.2	Development of index variables	72
3.6.2.1	Determination of GBV index	73
3.6.2.2	Determination of knowledge index	74
3.6.2.3	Determination of empowerment index	75
3.6.2.4	Determination of attitude index.....	76
3.6.2.5	Decision making index	78
3.6.2.6	Determination of index on income use.....	79
3.6.3	Determination of socio-economic status of respondents	80
3.7	Determination of the Linkage between Women Empowerment and GBV	81
3.7.1	Reasons for using binary logistic model	82
3.7.2	Use of Binary Logistic Model	82
3.8	Qualitative Data Analysis	83
3.9	Limitations of the Study	83
3.10	Ethical considerations.....	85
3.11	Summary	86
	CHAPTER FIVE.....	87
	RESULTS AND DISCUSSION	87
4.1	Overview.....	87
4.2	Socio-Demographic Characteristics of Respondents	87
4.2.1	Marital status and types of marriages	87

4.2.2	Age	89
4.2.2.1	Age differences between husband and wife.....	90
4.2.2.2	Age at first marriage	90
4.2.3	Years of schooling	91
4.2.4	Occupation.....	92
4.2.5	Religion	93
4.3	Qualitative Information on the Status of GBV	94
4.3.1	Forms of GBV	94
4.3.2	Determinants of GBV	101
4.3.2.1	Gender roles at household level	102
4.3.3	Explanation about women empowerment.....	105
4.4	Quantitative Information on the Status of GBV in the Study Area	105
4.4.1	Forms of Violence practiced in Serengeti District	107
4.4.1.1	Wife battering.....	107
4.4.1.2	Depriving women from basic necessities	108
4.4.1.3	Female Genital Mutilation (FGM)	109
4.4.1.4	Widow/widower cleansing.....	110
4.4.1.5	Marital Rape.....	110
4.4.1.6	Getting hit during pregnancy	110
4.4.2	Frequency of occurrence of some of the GBV	111
4.4.3	GBV occurrence over a period of time	111
4.5	Gender Based Violence Index.....	112
4.5.1	GBV and social demographic factors	113
4.6	Perpetrators of Violence	115
4.6.1	Forms of violence and perpetrators.....	116
4.7	Responses of women against GBV	117

4.7.1	Measures taken by women after GBV	117
4.7.2	Intervention against wife battering	118
4.7.3	Willingness of respondents to disclose about GBV.....	119
4.8	Knowledge and Attitude of Women towards WE and GBV	119
4.8.1	Knowledge of victims towards Women Empowerment (WE).....	120
4.8.2	Respondent's knowledge of women empowerment	121
4.8.3	Knowledge index of women on empowerment	122
4.8.4	Source of information	123
4.8.5	GBV as defined by respondents	125
4.8.6	Knowledge of women on GBV	125
4.8.7	Knowledge index on GBV	126
4.8.8	Attitude of respondents towards GBV	127
4.8.9	Attitude towards GBV by division	132
4.8.10	The relationship between attitude of women towards GBV on social demographic characteristics	133
4.9	GBV and its linkage to women empowerment	135
4.9.1	Decision making index.....	135
4.9.2	Decision making on family issue.....	136
4.9.3	Decision making and social demographic characteristics.....	136
4.9.4	Working in development groups	138
4.9.5	Access and control over resources.....	140
4.9.5.1	The relationship between marital status and ownership of houses and land	141
4.9.6	Socio-economic status and GBV	143
4.9.7	Correlation between access and control over resources.....	148
4.9.8	The linkage between socio-economic status and GBV.....	149

4.10	Binary Logistic results Explaining Linkage between Empowerment and GBV	150
4.10.1	Binary logistic outputs	150
4.10.2	Outputs from binary logistic explaining the linkage between women empowerment and GBV	151
4.11	Reasons for Increase in GBV as Perceived by Respondents	153
4.12	Reasons Contributing to a Decrease in GBV as Perceived by the Respondents	154
4.13	Impact of GBV on the Victims	155
4.13.1	Physical, social and psychological impact of GBV	155
4.13.2	Economic impact of GBV	157
4.14	Summary of Major Findings	157
4.14.1	The status of GBV	158
4.14.2	Knowledge of women on empowerment	159
4.14.3	Knowledge of Women on GBV	159
4.14.4	Determination of community's attitude towards GBV	160
CHAPTER FIVE.....		161
CONCLUSIONS AND RECOMMENDATIONS.....		161
5.1	Overview.....	161
5.2	Conclusions.....	161
5.3	Recommendations	165
5.3.1	Household Level	165
5.3.2	Community Level.	165
5.3.3	District Level	166
5.3.4	Policy Level.....	167
5.4	Areas for Further Research	168

REFERENCES..... 170

APPENDICES..... 192

LIST OF TABLES

Table 1: Variables measured by the study	14
Table 2: Population and household distribution by Division, Ward and Sex.....	62
Table 3: Sampling scheme	i
Table 4: Respondents selected for questionnaire survey by socio-economic statuses.....	65
Table 5: Key informants by professional.....	67
Table 6: Factor loading values for GBV index	73
Table 7: Factor loading values for knowledge index	74
Table 8: Factor loading vales on respondent's response towards empowerment	76
Table 9: Factor loading values for attitude towards GBV	77
Table 10: Factor loading values for decision making index.....	78
Table 11: Loading factor values for income use.....	79
Table 12: Social demographic characteristics of respondents	88
Table 13: Age differences between husband and wife	90
Table 14: Respondent's years of schooling	92
Table 15: Main occupation of respondent	93
Table 16: Distribution of respondents by their religion	93
Table 17: Daily activities performed by men and women during the rain season (March to May)	102
Table 18: Daily activities for men and women during the dry season (June to September).....	103
Table 19: Forms of violence practiced in Serengeti District	108
Table 20: Frequency of occurrence of some forms of GBV.....	111
Table 21: Respondent's response on GBV occurrence over a period of time	112
Table 22: Index of GBV and their categorization	113

Table 23: Mean index of GBV and demographic variables	114
Table 24: Respondent's response on perpetrators of wife battery and sexual violence at different frequencies	117
Table 25: Measures taken by women towards wife battery	118
Table 26: Person intervened during wife battery	119
Table 27: Respondent's willingness to disclose about GBV	119
Table 28: Respondent's response on the meaning of women empowerment.....	121
Table 29: Respondent's response on knowledge of women towards empowerment.....	122
Table 30: Index of knowledge on empowerment and their categorization	123
Table 31: Meaning of GBV as perceived by the victims	125
Table 32: Knowledge of women on GBV	126
Table 33: Index of knowledge on gender based violence and their categorization	127
Table 34: Attitude of respondents towards GBV	130
Table 35: Social demographic factors and attitude towards GBV	134
Table 36: Decision making index and their categorization	135
Table 37: Decision making power of respondents on family issues	136
Table 38: Decision making index and social demographic variables	137
Table 39: Constraints of working in development groups	140
Table 40: Access and control of assets.....	141
Table 41: Marital status and ownership of houses	142
Table 42: The relationship between marital status and ownership of land	143
Table 43: Distribution of assets by socio economic status	146
Table 44: Housing condition by socio economic status	147
Table 45: Access to social services by socio economic groups.....	147
Table 46: Correlation matrix between access and control over resources	149
Table 47: One way ANOVA results comparing means of GBV and SES	150

Table 48: Omnibus tests of model coefficients.....	151
Table 49: Model summary	151
Table 50: Binary logistic results on the linkage between women empowerment and GBV.....	153

LIST OF FIGURES

Figure 1:	The conceptual framework adapted from Schwerin (1995).....	12
Figure 2:	GBV in the life cycle of women.....	33
Figure 3:	The Map of Serengeti District.....	60
Figure 4:	Distribution of respondents by Age category.....	89
Figure 5:	Age at first marriage.....	91
Figure 6:	Fetching water for domestic use by sex.....	104
Figure 7:	Women experienced GBV during childhood, youth and maturity.....	107
Figure 8:	Perpetrators of GBV.....	116
Figure 9:	Respondent's responses on their knowledge about WE.....	120
Figure 10:	Sources of information about women empowerment.....	124
Figure 11:	Overall attitude of respondents towards GBV.....	128
Figure 12:	Attitude towards GBV by division.....	133
Figure 13:	Benefits of working in development groups.....	139
Figure 14:	The scree plot for Eigen values showing cut-off point for the principle components.....	145
Figure 15:	Asset index distribution of respondents.....	145
Figure 16:	Perceived reasons for increase in GBV by respondents.....	154
Figure 17:	Reasons for a decrease in GBV as perceived by the respondents.....	155
Figure 18:	Physical, psychological and social impact of GBV to victims.....	156
Figure 19:	Economic impact of GBV as perceived by the women.....	157

LIST OF APPENDICES

Appendix 1: Question guide for focus group discussion	192
Appendix 2: Questionnaire on women empowerment and gender based violence	193
Appendix 3: Result from principal component analysis-means, standard deviation and component score coefficient	205
Appendix 4: Descriptive results on decision making	207

LIST OF ABBREVIATIONS AND ACRONYMS

CBHPP	Community Based Health Promotion Programme
CBO	Community Based Organization
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women
CTS	Conflict Tactic Scale
EOTF	Equal Opportunity Trust Fund
FBO	Faith Based Organizations
FEMNET	African Women's Development and Communication Network
FGD	Focus Group Discussion
FGM	Female Genital Mutilation
GAD	Gender and Development
GBV	Gender Based Violence
HIV/AIDS	Human Immuno-deficiency Virus/Acquired Immuno Deficiency Syndrome
ICDP	Integrated Community Development Programme
IMF	International Monetary Fund
KMO	Kaiser-Mayer-Olkin
MDG	Millennium Development Goal
MU	Mzumbe University
NGO	Non-Governmental Organization
NSGRP	National Strategy for Growth and Reduction of Poverty
OLS	Ordinary Least Square
PCA	Principal Component Analysis
PF3	Police Form Number 3

PFA	Platform for Action
PIP and CHANGE	Population Information Programme
PRIDE	Promotion of Rural Initiatives and Development Enterprises
RABM	Restrictive Affectionate Behaviour between Men
RE	Restrictive Emotionality
SADC	Southern African Development Community
SES	Socio-Economic Status
SNAL	Sokoine National Agriculture Library
SPC	Success Power and Competition
SPSS	Statistical Programs for Social Sciences
STI	Sexually Transmitted Infections
SUA	Sokoine University of Agriculture
TAMWA	Tanzania Media Women Association
TAWLA	Tanzania Women Lawyers Association
TGNP	Tanzania Gender Network Programme
TV	Television
UDSM	University of Dar es Salaam
UMB	Norwegian University of Life Sciences
UN	United Nations
UNESCO	United Nations Educational Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women

URT	United Republic of Tanzania
US	United States
VAEO	Village Agricultural Extension Officer
VEO	Village Executive Officer
WAD	Women and Development
WE	Women Empowerment
WEO	Ward Executive Officer
WHO	World Health Organization
WID	Women In Development
WILDAF	Women in Law and Development in Africa

CHAPTER ONE

INTRODUCTION

1.1 Background Information

The existing gender discrimination in society has been a stumbling block towards sustainable development in the world. The origin of the gender inequalities has been reported as being a consequence of power imbalances between men and women. These are manifested through gender based violence (GBV) cutting across all divisions of classes, race, religion, age groups and ethnicity in all regions in the world (Ellsberg and Haise, 2005). The word gender based violence is used due to the fact that such violence is nurtured by gender roles and status in society. Furthermore, GBV is perpetrated in the name of gender and gender order, and the victims are discriminated because of their sex (Ferguson *et al.*, 2004).

The main focus of this study was on gender based violence against women. This does not imply that women are never violent against men; it is also understood that the rate and form of such violence vary widely across cultures. Few cases have been reported where violence is perpetrated by women directed not only against boys and men but also to fellow women (PIP and CHANGE, 1999). Furthermore, boys also experience GBV under patriarchy, but they become free from GBV after maturity, girls on the other hand enter into life long process of experiencing various forms of GBV from childhood to marriage life (Kailo, 2005; Moreno *et al.*, 2005).

According to WHO (2005), about 130 million women and girls were victims of female genital mutilation (FGM) worldwide in the period between 1982 and 2004. Also, WILDAF (1995) cited by FEMNET (2001) reveals that 28% of married women in the US

and 30% in India were victims of domestic violence. However, women in Sub Saharan Africa have been severely affected by gender based violence than women in any other parts of the world (WHO, 2005). Literature show that about 48% Zambian, 40% South African, 41% Ugandan and 41% Tanzanian women experienced GBV mainly in the form of domestic violence between 1986 and 1993 (FEMNET, 2001; McCloskey, 2005; Wight *et al.*, 2006).

There are various forms of GBV which include socio-cultural violence that lead to harmful traditional practices such as cleansing of widows/widowers, early marriage, paying of bride price, marriage between two women (*nyumba ntobhu*) just to mention a few. Marriage between two women is a type of marriage practiced in Serengeti and Tarime Districts where barren women are culturally allowed to marry young girls who can bear children and take care of them in their old age (ACT-Mara, 2006). Economic violence is another form of violence that includes property grabbing by in-laws after death of a husband, depriving of women from acquiring basic needs and restriction of women from participating in production activities. Other forms of violence include sexual abuse like marital raping, political violence such as war related rape and women abuse in refugee camps and sexual harassment at work places.

Domestic violence which includes wife battering perpetuated in the secrecy of the home is believed to be one of the most prevalent forms of GBV (FEMNET, 2001). Killing of old women accused of witchcraft is commonly practiced in various African countries including Tanzania and which is currently prominent in the Lake Zone especially in Shinyanga and Mwanza regions. Just as albinos are being killed for sacred purposes in mining, since it is believed that, by using parts of their bodies, one could get rich, women are murdered in the same manner in the name of 'crime of honor' by a family member,

husband or someone else on their behalf. This type of crime is mainly practiced in the Middle East, Latin America and South Asia (Pickup *et al.*, 2001). The main cause of honor killing is suspicion of infidelity by the husband against the married woman. Such causes of death are normally not reported but camouflaged as being caused by accident (Mitra and Singh, 2008).

The origin of GBV has been attributed to patriarchal system that subordinates women and girls through social norms (Schuler *et al.*, 1998; Pickup *et al.*, 2001; Pineda, 2005; Kailo, 2005). These norms are characterized with unequal power relations between men and women in society, where the latter are treated as properties of the former through cultural practices like payment of bride price before marriage. The way boys and girls are socialized in society determine their future roles as victims or perpetrators of GBV in society. Women and men are socialized differently in society, such that women are prepared to nurture the family and reproduce, while men are socialized to lead and be served by women. Furthermore, GBV results from a combination of other factors like individual attributes, and the environment in which we live. Individual factors like biological factors such as emotions and the desire to act when coupled with external factors such as low education and low self esteem increases the chances of an individual of being either a victim or a perpetrator of GBV (December, 1999).

It is argued however that, violence exists in various levels starting from individual, interpersonal, institutional and structural level (Shrader, 2001). At the individual level, GBV originates from personal history and experience of the stressors and victims. The second level is the interpersonal relationship, which is the immediate context in which GBV occurs due to interactions within the household settings (Ellsberg and Heise, 2005). Institutional and structural level is the third level in which GBV manifests itself in society.

At this level, GBV occurs through interpersonal relationship at the workplace, in the local communities and through interactions at the household level with various consequences.

There are cultural, social and economic consequences of GBV. These can be of short or long term such as incapacitation or even death from physical injury and depression (FEMNET, 2001; Pickup *et al.*, 2001; Pineda, 2005). Other consequences include unplanned pregnancies and contraction of sexually transmitted diseases including HIV/AIDS. Other consequences include psychological problems resulting from frequent harassment and humiliation that lead to low self esteem, feeling of shame and guilt, alcohol and drug abuse, poor performance in school and at work place, fear, and anxiety among women (Pickup *et al.*, 2001).

Property grabbing by in-laws after death of a husband is one of the economic violence exacerbating poverty among women (Kailo, 2005; Merry, 2006). Furthermore, men may deny the right of women to work without genuine reasons. Men can withhold financial support; deprive women of basic necessities such as food or school fees for girls. There are severe long term consequences of GBV to children than to adults. Children in violent relationship are likely to become future perpetrators or victims of violence, since they have been witnessing or experiencing GBV practices of their parents or guardians since childhood (O'Keefe, 1998; Anderson, 2005; Goussinsky and Borochowitz, 2007; Bell and Naugle, 2008).

Faced with all these challenges, development actors including gender activists and researchers, both at the national and international levels have advocated women empowerment as a strategy in addressing GBV (Kabeer, 1999; Magar, 2003; Gupta, 2006). Strategies for women empowerment vary from one society to another depending on

the gender relations. Various international development fora including the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW), Beijing Platform for Action (PFA) of 1995, the Beijing +5 Declarations and Resolution, Cairo Programme of Action and the Millennium Development Goal (MDG) advocated women empowerment as a strategy of eliminating GBV and bringing about gender equality for sustainable development (Gupta *et al.*, 2006).

Four aspects accepted as pillars of women empowerment worldwide have been reported by Kabeer (1999) as follows: Firstly, is the disempowerment through which women empowerment can be achieved. The existence of gender inequality expressed in the form of GBV indicates disempowerment of women relative to men. Secondly, the disempowered group must claim for empowerment, no third party can do it on their behalf. Therefore, development actors cannot empower women but they can only facilitate the empowerment process. Thirdly, the empowerment process starts at individual level, and ends as a group that must have a sense of decision making on matters pertaining to their daily lives. Fourthly, empowerment is an ongoing process not a product, there is no final goal. Women empowerment is not a linear process, this means that there is no state of full empowerment, but one can be empowered or disempowered relative to others (Kabeer, 2005).

Since GBV occurs at three levels, empowerment strategies should also be directed at three levels (Gupta *et al.*, 2006). At the individual level, the process of empowerment involves awareness raising through imparting skills and building self esteem (raise the 'power within'). It expands freedom of choice and actions and increases one's authority and control over resources. This power is necessary before anything else can be achieved because without it one lacks the confidence, and therefore, fails to give own opinions as a result of long term oppression and fear of more GBV (Charmes and Wieringa, 2003).

At the community level, women learn to bring about changes in their lives and address their own interests (the 'power to') through training and be able to challenge the traditional norms exacerbating GBV in a collective manner (Mahamud, 1994). It is a generative power creating new possibilities without domination. Having the "power to" makes women economically independent as they secure their own livelihood without depending on their husbands; hence they are able to overcome some of the economic violence. Such power is acquired through education and when it is achieved creates many other opportunities. At the state level women, build the 'power with' that enable them to change the dynamics of their relationship through involvement in groups and networks, hence they can participate in decision making (Ackerly, 1995; Pickup *et al.*, 2001; Asiyanbola, 2006 and Monkaman *et al.*, 2007). Having the "power with" enables women to participate in politics and acquire leadership positions at various levels.

On the basis of the above linkage between women empowerment and GBV, Tanzania formulated laws to ensure the protection and elimination of all forms of discrimination against women and girls. These include the amendment of the constitution of the United Republic of Tanzania of 1977, which address the adoption of the Basic Rights and Duties Enforcement Act of 1994; the Penal Code Cap16 of the Laws; the Sexual Offences (Special Provision) Act of 1998; the Election Act, No 4 of 1995; the Village Land Act No. 5 of 1999, and the Labour Act, of 2003 (URT, 1998). According to SADC (2004), legal aid services to survivors of GBV in Tanzania are mainly provided by NGOs. These include counselling, mediation, drafting of court documents, court representation of GBV victims and awareness creation to the public on their rights. However, the English language used to write these laws is not known by the majority of people in the country. Similarly, there have been various strategies for women empowerment in Tanzania such as improvement of economic status of women through provision of loans for income

generating activities (Shayo, 2004). Various financial institutions such as PRIDE-Tanzania and Equal Opportunity Trust Fund (EOTF) provide loans for improving women's economic status. Furthermore, the presence of women led NGOs dealing with women empowerment in the country is a step forward towards gender equality. Such NGOs include the Tanzania Gender Network Programme (TGNP) which facilitates women network, Tanzania Media Women Association (TAMWA) which struggles to ensure that women voices are heard through the media, and Tanzania Women Lawyers Association (TWLA) that ensures awareness rising on legal rights among women (TNGP, 2004).

Despite all these efforts, GBV levels remain high in the country. This is probably due to the country's multiple religion and cultural differences that lead to the fear of alienating people's culture and faith. It also appears that some women are supporters of norms and beliefs which perpetuate their subordination. For instance, FGM practices are strongly advocated by women (Mwita, B. personal communication, 2007). Furthermore, elimination of GBV is not regularly prioritised during political discussion or debates. GBV is normally raised during political campaigns where politicians lobby for gaining women's support for a particular position.

1.2 Problem Statement and Justification

1.2.1 Problem statement

Women in Serengeti District experience high levels of poverty and low status regardless of the efforts made by the government, CBOs, NGOs and other actors on empowering them. Among others, high levels of GBV are believed to contribute to the prevailing women's low status. Moreover, the famous myth that 'wife battery is considered as the sign of love' is still prevailing giving men the right to practice GBV against women (ACT-Mara, 2006).

Since a large number of GBV crimes are not reported to the law enforcement agencies such as the police for appropriate action, the empowerment strategies are slowed down (Nestory P. personal communication, 2007). There is limited access to information on the services available to the survivors of GBV and to the empowerment projects in the area. This is a major challenge towards elimination of GBV and enhancement of women empowerment. However, the extent to which women empowerment has changed the odds of GBV in the area is not known. The specific areas where this linkage is not known include the following:

- i) Limited knowledge on women empowerment and GBV by both victims and perpetrators of GBV
- ii) Inadequate understanding of the influence of wealth status of women on GBV, and
- iii) Limited understanding of the various empowerment indicators influencing GBV.

Therefore, this study aims at filling this gap.

1.2.2 Research justification

Studies by UNHCR (2003) reveal that much of the research on GBV conducted in the past few decades described GBV in a more general way, which does not give segregated information about levels of GBV among men and women. This has led to the formulation of programs that were too general thus slowing down the scuffle against GBV. Although in recent year gender activists have described GBV in a more segregated way in regions such as Arusha, Manyara, Kilimanjaro, Dodoma and Iringa regions of Tanzania (Aboud, 2004), very little has been done in Mara Region and more specifically in Serengeti District. The reason behind this situation probably could be due to the persistent clan conflicts between the Walyanchoka and Walyanchali ethnic groups in Serengeti and

Tarime Districts and as a consequence stifling other development activities including research (Kiberenge, J. personal communication, 2007).

The current study is inline with the Millennium Development Goals (MDGs) Number 3 aiming at promoting gender equality and empowerment of women (UN, 2006). This is also reflected in the Tanzania National Strategy for Growth and Poverty Reduction (NSGRP) Number 6 on the elimination of sexual abuse and domestic violence (URT, 2005a). The study is also inline with other high level decision making organs responsible for women empowerment and elimination of GBV such organs include the Ministry responsible for Community Development, Gender and children in Tanzania which has been active in coordinating various approaches towards ending GBV through involving both the civil society and the government.

The study is also important in generating practical information on how women empowerment has changed the odds of GBV in the study area. The result from this study provide a base for planning for development projects to eliminate GBV at all levels in line with the MDGs and NSGRP as explained above. Furthermore, the study reveals attitudes of the GBV victims towards GBV which is an important component towards elimination of GBV in a society. The study provides information which is of significance to women, girls, academicians and gender activists.

1.3 Objectives of the Study

1.3.1 Main objective

The main objective of the study was to investigate the influence of women empowerment towards elimination of GBV in Serengeti District.

1.3.2 Specific Objectives

The specific objectives are:

- a) To examine the status of gender based violence in Serengeti District
- b) To assess community's perception towards gender based violence and women empowerment
- c) To examine the linkage between socio-economic statuses of women to gender based violence in the area
- d) To examine the main factors which influence gender based violence in the study area.

1.3.3 Hypotheses tested

1. Extents of GBV among women vary with their socio-economic statuses
2. Empowered and non empowered women experience the same level of GBV.

1.4 Conceptual Framework

Based on the feminist theory, GBV is a result of existing gender inequality between men and women (December, 1999; Magar, 2003; Batliwala, 2007). In light of this, women empowerment is regarded as a means to regain power from men. Therefore, the empowerment framework for this work highlights the key indicators of empowerment used to challenge the norms which enfold GBV. The conceptual framework builds on the work done by Schwerin (1995) and Magar (2003). Fig. 1 summarises the conceptual framework indicating the relationship between independent variable which is women empowerment and the dependent variable GBV.

Social demographic factors (though not included in the original framework but included in this study), like age of the victims and perpetrators, marital status and types of marriage

are posited to have an influence on empowerment and GBV. The age at first marriage, the level of education of women attained before marriage has a significant effect on women's self esteem. Empowerment is a social process aiming at creating a change at an individual and community levels; therefore, empowerment cannot happen in isolation (Pickup *et al.*, 2001; Magar, 2003). Ingredients of empowerment at an individual level include changing one's attitudes and capabilities, which in turn enhance their participation in various types of collaborative behaviour that gradually improves the group capacity.

Individual capabilities can be enhanced through acquiring knowledge and skills from various sources as well as women participation in development groups, which would in turn improve their social economic status, and awareness creation by development actors and politicians. Moreover, an individual acquires capabilities through formal and informal education. Resources such as reliable sources of information would enhance individual capabilities. Materials such as capital in the form of money and human, would improve one's capability, leading to the empowerment of an individual. Individual capabilities may be limited if a woman lack support from her in-laws, her own parents, government institutions and NGOs. However, this study used indicators for individual empowerment as independent variables.

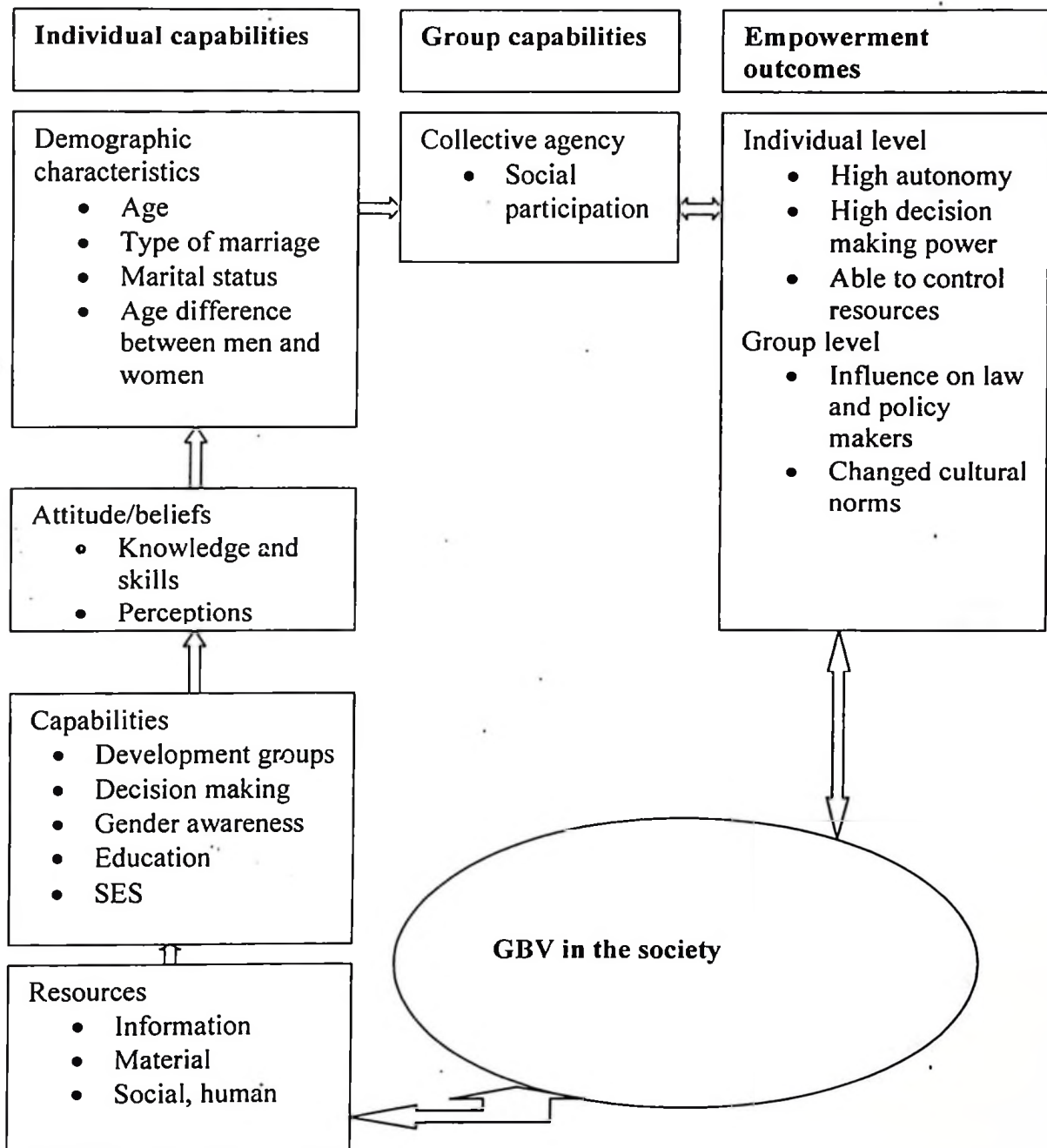


Figure 1: The conceptual framework adapted from Schwerin (1995)

Since violence damages self esteem, women's capabilities may be invisible and therefore, needs immediate support from the above mentioned institutions. Women with damaged self esteem are unable to make strategic life choices (Kabeer, 1999). The ability to make choices is explained in this framework as the ability to make important decisions affecting one's life. Moreover, access and control over resources in the form of money, assets and

inheritance of resources after the death of a husband are also indicators of making strategic life choices. Likewise, having access to social services such as water and fuel indicates the capacity of making life choices.

The transformed individuals can have the capacity to participate in development activities through collective behavioural change as a result of individual empowerment. The collective participation of women provides the framework for them to acquire support which is required to change their situation. Women in Serengeti District were assumed to be working in development groups where they could meet, share experiences and solutions for GBV problems. Thus, their self-esteem and self efficacy would be enhanced.

According to Magar (2003) empowerment outcome are the achievements that are significant after a proper empowerment process. This can be seen as enhanced capacity of women in making meaningful decisions in their lives. Improved autonomy for married women and the capacity to control resources are the qualities of individual empowerment. At group level, though not measured by this study, empowerment indicators include the capacity of women as a group to influence decisions at a policy level and the ability to have representatives at higher leadership levels and to have strong identities. Furthermore, cultural norms are being changed as a result of empowerment, such as FGM, paying of bride price, marriage between two women (*nyumba ntobhu*), and widow/widower cleansing.

Finally, the eradication of GBV in the area would be due to collective empowerment process as explained above. However, from Fig 1 the GBV and empowerment outcome and the sources of empowerment are linked with double arrows because studies have indicated opposed relationship between women empowerment and GBV. The more the

women are empowered, the more GBV in the marriage (Pickup *et al.*, 2001). The reason given is probably the husband is threatened by the sense of masculinity as they fail to be the only breadwinner or decision makers at a household level, hence more GBV (Hunt and Kasynathan, 2001).

Table 1: Variables measured by the study

Variable	Definition	Level of measurement
Dependent variable		
Gender based violence	Whether or not a woman is experiencing GBV.	Nominal (dichotomous)
Independent variables		
Women empowerment	Empowerment levels of women	Categorical
Education	Number of years a woman spent in school	Measured in number of years
Development groups	Whether or not a woman is a member of development group	Nominal (dichotomous)
Decision making	A woman having decision making power at household level	Categorical
Socio-economic status	Socio-economic status of women	Categorical
Occupation	Whether or not a woman being involved in crop production	Nominal (dichotomous)
Social-demographic characteristics		
Age	Age of the woman in the household	Age measured in years
Marital status	Whether or not a woman is married	Nominal (Dichotomous)
Age at first marriage	Age of a woman on her first marriage	Age measured in years

1.5 Organization of the Thesis

The thesis is organized into five chapters; the first chapter provides background information by detailing the problem of GBV in the world, sub-Saharan Africa and Tanzania, particularly in Serengeti District. It explains the magnitude of the problem, possible determinants and the impact of the problem on community development. The objectives of the study and research hypotheses tested by this study are also explained in this chapter.

The chapter also shows how empowerment can be used to reduce if not to eliminate GBV. Chapter Two gives a critical analysis of the existing literature on both GBV and women empowerment. The concept of GBV and the underlying theories are also given. Historical background of GBV and women empowerment is also discussed in Chapter Two. The chapter ends by indicating what has been done and what remains to be done and clearly highlighting knowledge gaps to be filled by the current study.

Chapter Three presents the methodology used in the study beginning with the description of the physical and social cultural characteristics of the people in the study area. The chapter describes the various tools used in data collection and how the data were processed. The limitations encountered during the course of this study are also given in this chapter. Chapter Four presents the major findings of the study and a critical discussion of these findings in terms of what has been found in other parts of the world. Chapter Five draws the conclusion based on the results and recommendations at various levels including household, district and policy implications.

CHAPTER TWO

LITERATURE REVIEW

2.1 Overview

This chapter reviews literature concerning women empowerment and GBV. The chapter starts by defining various concepts on women empowerment and GBV. It explains what has been done and the knowledge gaps around these two areas. Analytically, the chapter details various theoretical frameworks towards gender and development, historical background on women empowerment and the origin of violence against women. Theories of GBV in Africa and globally are discussed too. Linkages between women empowerment and GBV and the determinants of GBV of men against women are critically examined. The status of research on WE and GBV in Tanzania is also discussed and finally is a review of responses of women during and after GBV events.

2.2 Definition of Key Concepts

2.2.1 Women empowerment

Women empowerment means differently to various people. Datta *et al.* (2005) defines empowerment as the process of increasing the capacity of individuals or groups of people to make choices and to transform those choices into desired outcomes. Women empowerment as defined by UNHCR (2003) is a process of creating power balance between men and women through raising awareness among girls and women to exercise control over one's self image. In the current study, women empowerment is viewed as the process of creating awareness among women and girls in order to eliminate GBV through increased access to and control over resources and improvement of women's self esteem. Empowerment process expands freedom of choice and actions and increases one's authority and decisions that affect their lives.

2.2.2 Gender based violence

Since GBV originates from gender relations, then it is worth defining gender. According to FEMNET (2001) and Anderson (2005), gender is defined as the socially constructed roles assigned to men and women by the society; acquired through socialization and varies from one culture to another. In contrast, sex is the biological attribute assigned to men and women given by birth. Therefore, GBV is the deliberate use of physical force, against an individual or community that results into injury, death, psychological harm and underdevelopment (USAID, 2006). FEMNET (2001) defines GBV as any form of violence that happens to women, girls, men and boys, because of the unequal power relations between them and the perpetrators.

2.2.3 Violence against women

According to the Beijing Platform for Action (PFA) (1995) and Russo and Pirlott (2006), violence against women is defined as any act of violence that results into physical, sexual or psychological harm to women and girls including threats like coercion or arbitrary deprivation of liberty, occurring in public or private life of the victim. Therefore, the study took GBV to be forms of violence occurring to women and girls including threats like deprivation of productive resources, wife battery and harmful cultural practices occurring in the public or private life of the victim.

2.3 Forms of GBV

There are various forms of GBV occurring at different stages of life of a woman worldwide. It is estimated that one in three married women in the world has experienced violence in her lifetime from her husband (WHO, 1999; December, 1999). Ferguson *et al.* (2004) list various types of GBV including physical violence from an intimate partner or husband in the form of domestic violence, sexual violence such as marital rape, economic

violence such as lack of right to own resources, cultural violence such as female genital mutilation, psychological violence such as depression and trafficking of women and girls.

Physical violence is believed to be the most common form of violence threatening women's life at a household level. Physical violence in the form of domestic violence is practised in terms of wife beating, using abusive language, child defilement and child labour. Trafficking of women and girls is another form of violence which is growing relentlessly around the globe. Trafficking is a form of physical violence whereby perpetrators use deception language, physical coercion or force to recruit a person in order to use or exploit that person against his/her will for sexual trade or forced labour. Victims are taken in Europe and the Arab world where they are exposed to torture (FEMENET, 2001). In Africa, especially in the cities, young girls are trafficked as housemaids, and they are sometimes used as second wives by the so called 'father' of the house. Some girls from remote rural areas are caught in prostitution after being taken as housemaids by men and women in the cities.

Sexual violence includes various forms of sexual coercion such as marital rape resulting from the state where married women perform the sexual act without their consent. This type of violence is culturally not regarded as GBV by the perpetrators. From the traditional definition, marital rape means a man having sexual intercourse with a female not his wife without her consent (Yllo and LeClerc, 1988). From the definition the husband cannot be guilty of a rape committed by himself upon his lawful wife, for their mutual matrimonial consent and contract. In light of this, once married, a woman does not have the right to refuse sex with her husband. However, marital rape, sexual harassment, demands for sex in return of favours is commonly practised against women and girls leading to psychological and health problems. Sexual abuse of young girls, mentally

retarded and disabled women is devastating. Sexual violence is practiced both in the family and in the public (FEMNET, 2001).

Economic violence is another form of violence manifesting itself in different facets as a result of economic dependence of the victim on the perpetrators. Men can withhold financial support from the family with no apparent reason. Such kind of violence is a punishment to children and the wife. Child labour is another manifestation of economic violence in which children are subjected to work in order to subsidize the family income (Pickup *et al.*, 2001). Some of the girls are forced into early marriage in exchange with bride price in order to fill the family's economic gap. Sometimes, women and girls are forced into prostitution in order to take care of the family. Denial of the right to work or attending a certain income generating endeavour especially for married women is another form of economic violence (December, 1999; Fawole, 2008). In other cases, women are forced to surrender their monthly income to the husbands or male partners on the notion that whatever income the wife earns belongs to the husband. In light of this, if the husband dies, the husband's relatives grab all the properties of the deceased. The widow would also be inherited as part of the deceased property (FEMNET, 2001; Ferguson *et al.*, 2004).

Female genital mutilation is associated with culture; hence the practice varies from one ethnic group to another. Although FGM is practised in almost all countries in the world, it is highly practised in Asia and African countries (Ellsberg and Heise, 2005). Cultural identity is used as a justification for practising FGM in the societies. In the northern part of Tanzania (Arusha and Manyara regions), FGM is practised in order to prevent women and girls from diseases such as genital warts commonly known as *lawalawa* (Aboud, 2004). In some parts of Mara Region, FGM is regarded as a sign of maturity among young girls. In Asian countries, FGM was justified by Prophet Mohamed who favoured sunna

mutilation (minor cutting of the genitalia) in order to reduce sexual pleasure and hence advocate fidelity among women (Khafagi, 2001). However, apart from the perceived good reasons for FGM, there are detrimental effects to girls and women's physical and psychological health. FGM is painful to a victim and therefore it is against human rights.

Widow inheritance is an acceptable cultural practice in which a widow is inherited as a wife by one of the late husband's close relative. The widow is inherited because of the belief that she cannot take care of herself, children and properties accumulated by the deceased. With all these good intentions, widow inheritance is unsafe practice because of HIV/AIDS epidemic where both the widow and the inheriting husband are at risk. In view of this, widows tend to resist from being inherited as a result the in-laws grab all the properties from the deceased family, leaving them in high poverty and homelessness.

Widow/ritual cleansing is a cultural practice used for expressing grief and show respect to the deceased. In some African societies the mourning and burial rituals are inherently gendered. The reason behind these rituals is to applaud the position of the dead man, and his widow is expected to grieve openly and demonstrate the intensity of her feelings in formalized ways. The widow may be forced to have sex with one of her in-law in order to exorcise the evil spirits associated with death. It is believed that if the widow resists, either her children would suffer from the same cause of death or the widow would sustain mental disorder (Malungo, 2001). These rituals humiliate, degrade and are life threatening to the widow. They cause serious health hazards including the spread of HIV/AIDS.

In almost all African cultures bride price is paid before marriage. The reason behind this practice is to do with making the bride have more respect to the husband, in-laws and the society at large. Others regard bride price as a sign of cultural acceptance of the groom

and a blessing from the bride's parents to the union. While to others, bride price is a sign of maturity of the groom and that he has the means of taking care of himself and the bride. The number of cows and goats paid to the bride's parents are negotiated between the two families. Currently, the mode of payment is changing from paying cows and goats to paying cash equivalent. However, bride price is regarded as a cost which the bride has to repay after marriage. After payment of bride price, the woman loses control over a number of things including decision making on various issues such as sexual health where she cannot decide on a number of children to bear. Women who try to sever violent relationship face resistance from their parents out of fear that the parents may be asked to return the bride price.

Another aspect is honour killing which is the murder of a young female member by one of the family or clan member or a group of male family members. Honour killing is practiced in order to protect the family or community from dishonour (Chesler, 2010). The perceived act of dishonour include wearing indecent dress which is unacceptable to the family, choosing ones own man (fiancé) for a husband, engaging in certain sexual relations with boys and engaging in sexual acts with same sex partner. The reason for honour killing is mainly to safeguard people's culture often reinforced by religious fundamentalism (Pickup *et al.*, 2001). Killing of old women on suspicion of engaging in witchcraft is also practised in Africa specifically in some parts of Tanzania (Shinyanga and Mwanza Regions). Marriages between two women are also one of the discriminating African cultural practises. Others include the discriminatory dietary practices in which women and girls eat after men and boys have eaten, or they eat inferior food and take little share as compared to the share taken by men and boys. However, women empowerment is believed to be one of the strategies towards elimination of GBV in the society.



0565655

2.4 Perspective on Women Empowerment

The following section explains the historical background and perspective on women empowerment (WE). The theoretical perspectives of power indicate how the internal power, developed through empowerment could transform one's status and improve women's self esteem towards ending GBV. Also discussed in this section are policy approaches to empowerment indicating the five stages of empowerment namely, welfare, equity, antipoverty, efficiency and empowerment.

2.4.1 Historical background of women empowerment

The historical background of WE is discussed through various policy interventions starting from the modernization theory up to the era of WID, WAD, and GAD. During this period development actors made a lot of assumptions as regards to the causes of gender discrimination so as to formulate policies that could address the problem.

The history of women empowerment is interwoven with the history of policy interventions in developing countries and with the history of the women's movement around the globe. The experiences of policymakers and activists gave rise to revised theoretical formulations of development and feminist concerns (Koda and Ngaiza, 2004). In the current study, the history of WE is traced from way back to 1930s, when the development actors put more emphasis on modernization theories through the adoption of western technologies. Their assumption was that development is a linear process whereby communities, especially in the developing countries would disregard their historical impediments and embrace modern values. Under the modernization theory, the main assumption was that modern life of men would automatically trickle down to women (FEMNET, 2001). During 1940s and 1950s, development planners designed projects aimed at modernizing the colonies all over the world. Many of these projects failed due to the fact that, many countries became

independent during this period. Thus, the post colonial governments hired development experts from their former colonial governments. The process of modernization coincided with the emergency of the United States as a super power of the postwar era (Boserup, 1970).

The US used different approaches in formulating policies and conducting research in developing countries. After some years, western development specialists assumed that the formulated policies would improve people's livelihoods (men and women) in the developing countries. According to Boserup (1970), the development project undermined women's economic opportunities and autonomy. The author challenges the trickle down effect that stimulated women movements in the developing countries. She further challenges the modernization theory and formulates a new concept known as 'women in development (WID) approach.

During WID period, development planners were encouraged to include women in the development arena, especially in development projects and thus, deliberate efforts were taken to ensure that women have access to education, training, property, and credit and to more and better employment (Muro, 2003). WID approach was criticized by many academicians and activists (mainly NGOs) who assert that introducing women projects that were separate from men's should be carefully implemented in order to avoid marginalization and resistance from men who are among the important stakeholders in the elimination of gender inequalities in society (Brown, 2006).

Due to this development, another approach known as women and development (WAD) was formulated which recognized special responsibilities of women in the development process, as being the instrumental in agricultural production in many areas of Africa.

However, their contribution was not counted (Koda and Ngaiza, 2004). The WAD perspective believed that men could be used to alter gender inequalities; hence they recognized the contribution of men in the process of women empowerment (FEMNET, 2001). WAD recognized further that there are marginalized men in the society although they failed to offer corrective measures on how to integrate such men in the process of eliminating gender inequalities. In the 1980s, some of the developing countries and the western countries feminists and development actors challenged both the WID and the WAD approaches, on grounds that they did not address the basic issues exacerbating gender inequalities. Hence another perspective was formulated known as gender and development (GAD) perspective (Muro, 2003).

GAD approach holds that women's status in society is greatly affected by their material conditions of life and their position in the national, regional, and global economies (Boserup, 1970; Shayo, 2004). GAD recognized that women are deeply affected by the nature of patriarchal power at all levels. Likewise, women's material conditions and patriarchal authority were both defined and maintained by the accepted norms and values that define gender division of labor. GAD focuses on relationships between women and men, not on women alone (Muro, 2003; Kassim, 2004). The GAD approach focuses on the interconnection of gender, class, and race and the social construction of their defining characteristics. Similarly, Moser (1989) asserts that women experience oppression differently, according to their race, class, colonial history, culture, and position in the international economic order. GAD recognizes the differential impacts of development policies and practices on women and sees women as agents, not simply as recipients of development. The central aspect of GAD was to transform the practical gender needs into strategic gender needs as a tool for empowerment. The GAD approach provides a way of analyzing policies and organizational efforts to determine which ones would meet short-

term practical needs and help change the structures of subordination (strategic gender needs).

The tremendous worldwide economic restructuring such as the new economic restructuring including policies of structural adjustment, free trade, 'export-led industrialization and globalization have different implications for women and men in societies (Brown, 2006). There was a feminization of the labor force throughout the 1980s in the industrialized countries. This in part, accounts for the increase in female labor-force participation, as men were less willing to take these low paying jobs. In many countries, female unemployment rates in the 1980s declined relative to male unemployment rates. Although working conditions were bad for many workers, they were particularly worst for women. Most women were forced into low-paying, low-skill, part-time jobs and also not withstanding the fact that they have a second, unpaid job of caring for the family, hence, increased workload and domestic violence among them.

2.4.2 Theoretical perspectives about power and empowerment

Lukes (1974) and Kabeer (1994) cited by Pickup *et al.* (2001) explain the theoretical perspectives of power in the form of the '*power to*' focus on the needs of individual of being at liberty to make decision, to express themselves, or to earn an income and be economically independent. Another theoretical perspective about power is the '*power over*' which refers to power possessed by some people to the detriment of others (Charmes and Wieringa, 2003): The power group wielding may control the actions, thoughts and beliefs of the subordinate groups; making these groups believe that the situation of domination is natural or ordained by religion or culture (December, 1999). Men's power over women emanates from beliefs about gender relations that accord men the control over women's bodies, behaviour, mobility, access to and control over material resources.

Men's power over women can be expressed in the form of GBV (Pickup *et al.*, 2001; Hur, 2006). The power expressed by a violent man restricts the woman's '*power to*'.

On the other hand, the 'power within' is the power used for transforming a situation that an individual can gain through becoming aware of how '*power over*' operates, and how oppression is internalised (Magar, 2003). It is important to note that unequal power relations are not natural and inevitable and hence it should be challenged. It is through working together in supportive groups that individuals can gain knowledge about how the 'power over' operates to change the whole society. The 'power with' is an energising force that acts as a catalyst for change without being dominating (Pick up *et al.*, 2001). The 'power with' can be developed through empowerment process, and can be achieved through supporting women against violence aiming at repairing the psychological harm and damage to self esteem. This is done through the participation of women in group activities, which would in-turn, enable them to maintain a point of view, or continue an activity in the face of overwhelming opposition and takes a serious risk. It is through the acquired "power within", which offers explanation of women's confidence in holding on their gains in the face of increasing threats of GBV by men who fear of losing their position of dominance. The 'power to' can be developed through training and provision of resources. The 'power to' brings about changes to people's lives to meet their own interests and needs. An individual with 'power to' participates more effectively in the wider process of socio-political development than the case otherwise (Malhotra, 2003; Mosedale, 2005).

2.4.3 Policy approaches towards women empowerment

Since empowerment challenges one's power, women empowerment is a development issue and hence, included as one of the policy approaches to women and development.

According to Moser (1989), empowerment is the last component of the five policy approaches to women development. Others are the welfare policy approach that focused on women's welfare through provision of practical gender needs in women's conventional roles as wives and mothers. The welfare approach was famous during women's decade of 1976-1985, and which considered women as passive recipients of development activities (Karl, 1995). Equity approach is the second policy approach characterised by development strategies that further the goal of fair treatment in the eyes of the law (equity) between men and women. Forms of GBV against women addressed by this approach include FGM, honour killing and some of the outdated cultural practices that are against human rights (Karl, 1995).

Antipoverty policy approach is the third approach, which focuses on women's economic status. Therefore, its interventions aimed at moving women and their dependants out of poverty by increasing their roles in production. The type of violence addresses by this approach is lack of women's access to and control over resources. The fourth policy approach was the efficiency, which is characterised by development interventions that experienced inefficient working relations between men and women. Following this perspective, development actors (government institutions, NGOs and CBOs) must struggle at creating a working environment where women's potential is fully exploited. Efficiency approach advocate development intervention that justifies efforts in ending GBV against women in terms of the costs of that violence to the public systems or in terms of the amount of women's labour lost as a result of violence (Mitra and Singh, 2008).

The fifth policy approach was empowerment which was developed by southern women feminists to criticize the already developed model of global development from a gender perspective. The policy stresses women's potential for self-reliance, and the importance of

grassroots mobilization to effect changes in power relations in favour of women in the South. Since empowerment can be self-generated, the role of development organization is to provide women with the support to enable them transform their own lives (December, 1999). Any strategy addressing women violence under empowerment approach would focus on building women's self-esteem and capacity to protect themselves from violence and their ability to challenge oppressive gender relations and end violence against them.

2.4.4 Indicators of women empowerment

a) Working in Development Groups

Many researchers have indicated that development group is an accepted vehicle towards women empowerment (Rowland, 1997; Kabeer, 1999; Magar, 2003; Thorp *et al.*, 2005). This is probably because empowerment is a process that brings changes to an individual, group and to society as a whole. It is a transformation process happening in collective expertise and therefore, it cannot happen in isolation. As Njuki (2001) contends women working in groups are able to have a collective voice that could be heard by both local and high government authorities. Thus working in groups is a step towards acquiring the "power with" that would spearhead women's involvement in higher decision making organs. This type of power is acquired through education and other trainings.

b) Socio Economic Status

Improvement in women's economic status is believed to be an important indicator for women empowerment. There are various ways of improving women's economic status which include provision of loans through microfinance. The majority of women regard soft loans as a solution to their problems (Tesoriero, 2006; Kim *et al.*, 2007). Similarly as Kim *et al.* (2007) reported that microfinance improved women's economic status in rural South Africa. As suggested by Sen (1999) income and capacity empowerment of women is a necessary tool for poverty reduction. However, for the rural poor the money obtained

through loan could be used for daily household's consumption. Provision of loans has little improvement in income poverty among women. Similarly, women with little awareness in development issues would make little improvement in their livelihood. Therefore, GBV was anticipated to be high in low income families (Pickup *et al.*, 2001), Hence there is a mutual relationship between improved income and GBV (December, 1999).

2.5 Historical Background of Gender Based Violence

The historical background of GBV was explained from the religious point of view within the patriarchal system. GBV originated from the existence of cultural institutions (patriarchy system) that undermine women worldwide (Shuler *et al.*, 1998; December, 1999; Pickup *et al.*, 2001; Kassim, 2004). Various laws and policies like the English common law supported GBV where the husband had a legal authority to attack his wife physically using anything not thicker than the width of his thumb, hence the term "the rule of thumb" (Robbin, 1992; Lentz, 1999). Following the 'rule of thumb', there was a rule of the husband and legitimacy of punishment of the wife by the husband originating from the religious institutions. Lentz (1999) posits that during the 12th Century, the church law reinforced the rule of husband arguing that women were not created from the image of God instead; they were created out of the Adam's ribs. Furthermore, women are blamed for bringing sins in the world and for causing the fall of man. In so doing, it was correct for them to be under the control of men so that they may not fall into sin for the second time.

The identity of woman was merged by that of the man such that after marriage, the wife has to change her surname to reflect that of her husband. The husband was responsible for the actions of the wife. Therefore, under the British law for instance, women were

restricted to own any family property (Lentz, 1999). The husband as a master was responsible for keeping orders of the family. In case of any disobedience, the husband was allowed to punish his wife (Robbin, 1992). The family was regarded as a small state due to the fact that GBV was considered private, and became public only when the neighbours and other community members had to intervene to rescue the GBV victim.

The rule of the husband continued until the 16th century, during the emergence of Protestants. Public debate was carried out in England to condemn the rule of the husband and punishment of women (Lentz, 1999). Legal instruments like the judiciary system joined hands to revile punishment of the wife by the husband. In the 17th century, there was a shift in people's attitude towards the rule of husband, only moderate punishment was allowed in Europe (Robin, 1992; Amussen, 1994). This was mainly prompted by religion, social and political turmoil during the reformation period which decided the fate of supremacy of the Roman Catholic Church.

However, the categorization of GBV practices into acceptable and unacceptable forms emerged; the notion which was not supported by the majority. As stated by Merry (2006), the criteria used for categorization of GBV practices into acceptable and unacceptable were not known. Similarly, Johnson (1995) indicated the differences between "common couple" (the acceptable) type of GBV and "patriarchal terrorism" unacceptable type of GBV. The common couple include verbal GBV and other minor types of violence, while the "patriarchal terrorism" was the unacceptable type of violence including violence such as heavy beating, sometimes leading to serious injury or death of the victim. After a long time debate on condemnation of wife beating, women were no longer bound to the story of Eve, and the status of women was uplifted though subordination continued (Lentz, 1999). Men who continued with the subordination of women were regarded as low status people

in the society. However, the situation in Africa and other developing world remained unchanged until in the 19th century when feminist reformers started women movements towards women equality (Boserup, 1970). For the past three decades, academic researchers, gender activists and other development actors in the developing world started advocating for bringing GBV to an end in society. Currently, there is awareness among communities about GBV although subordination still continues.

2.6 Gender Based Violence in the Life Cycle of a Woman

FEMNET (2001) reveals that girls/women experience GBV from childhood to adulthood. Unlike some boys who experience GBV during childhood and become free from GBV after maturity, girls are the victims of GBV throughout their life cycle as it is summarised in Fig. 2. In every woman's life stage, there is an agent of socialization perpetrating GBV. For instance, at the age of 0-5years, low value is bestowed to girls through selective abortion of girls before birth in family settings. Girls are socialized to be timid and submissive; hence they experience low self-image and lack confidence in their lives (Mahamud, 1994; Schuler *et al.*, 1998; Magar, 2003). Spousal battery affects children psychologically and nutritional neglect for girls during childhood leads to poor healthy condition and make them susceptible to diseases (Pick up *et al.*, 2001). Girls have little opportunities to play as boys do, with role-playing reinforcing stereotypes of girls being subordinate to boys. Girls play with dolls, while boys are given car toys and computer games, conforming to boyhood and girlhood in terms of gender roles.

At the age of 6-12 years, there are many socialization agents including the family and schools. Girls are denied their right to education as they are not valued as family assets. As soon as women get married and move to the husbands' homes, they are not regarded as being part of the biological families, thus parents do not invest in them through education.

In some cultures, girls and women eat after the boys and men, in so doing girls and women suffer from nutritional problems. Forced early marriages for young girls practised in some cultures deny their rights for choosing husbands and these results into early pregnancies putting them at risk of health complications during child bearing (FEMNET, 2001).

At the age of 13-18 years, girls accept low status through patriarchy; they experience heavy workload to the extent of withdrawing from school or scoring low grade in school subjects or ending up as total failures. Sexual experiments place girls and boys at risk of STI infection and pregnancy. Girls face intimidation from boys because of chauvinism that is entrenched into boy's attitude, and it is at this time when boys assume family headship (FEMNET, 2001). In the community, girls are under constant threat of rape and sexual assault, and other cultural practices such as female genital mutilation. Trafficking of girls for sexual exploitation (sexual trade) in cities is also a threat at this age. Girls are also used for domestic chores beyond their age (Ellsberg and Heise, 2005). At the age of 18-35 years, women assume marital responsibility and internalize low self-esteem. Women face the actual GBV at this age like heavy workload, physical battering, marital rape, withdrawal of sexual intercourse, silence of intimate partner, withdrawal of economic support and many other violent practices (FEMNET, 2001; Kailo, 2005; Pineda, 2005).

Religion as an agent of socialization encourages the culture of tolerance from marital violence and submissiveness of women to men to uphold the commands of God (Lentz, 1999; Merry 2006). Schools/colleges/workplace as agents of socialization perpetuate GBV for girls and women through sexual exploitation by teachers/ tutors/lecturers/managers.

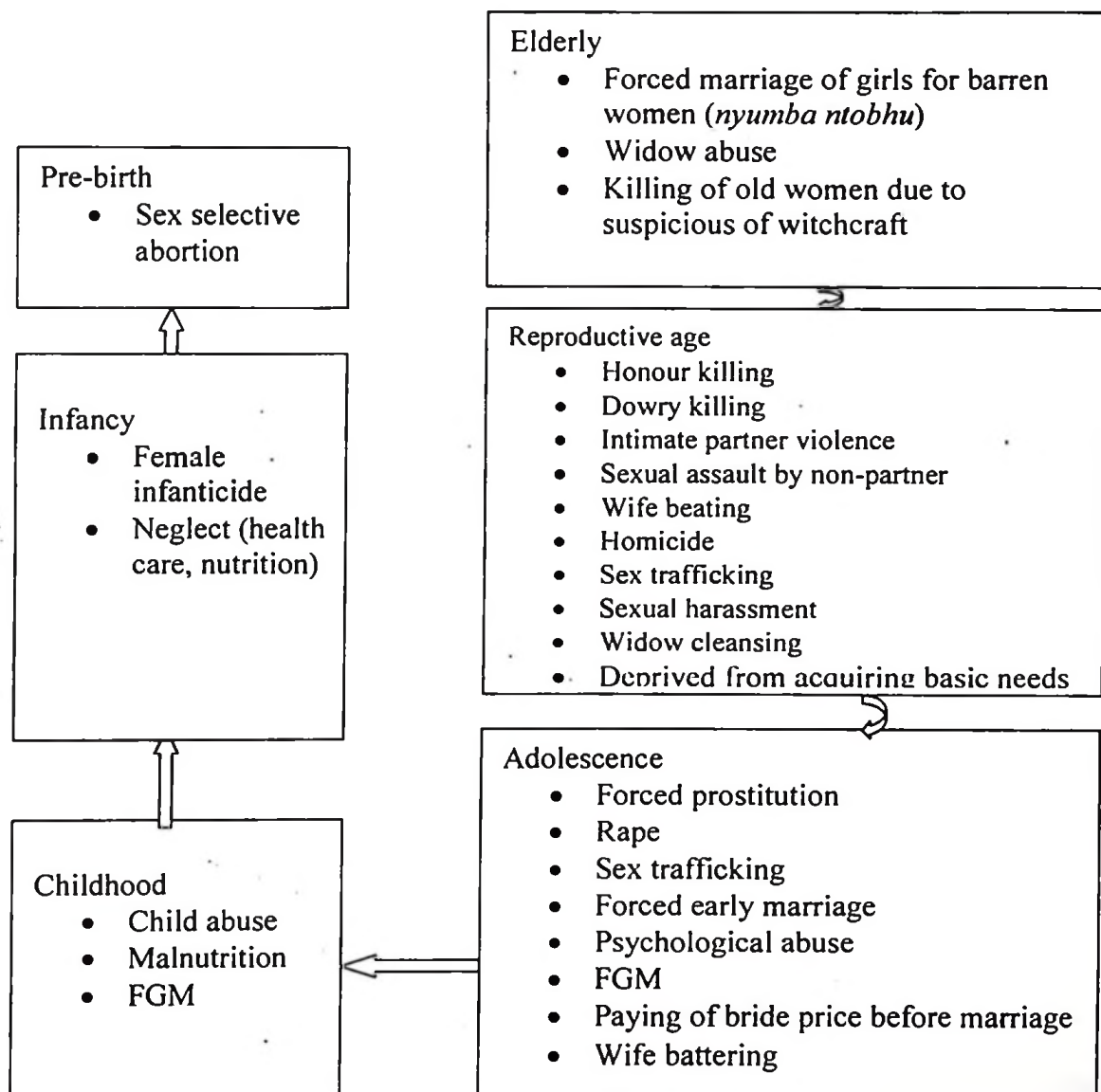


Figure 2: GBV in the life cycle of women
Adapted from Moreno *et al.* (2005)

Other agents of socialization include the society at large which considers GBV as domestic/individual affair and which does not need official intervention (December, 1999; Merry, 2006). At the age of 36 and beyond, all forms of GBV are at their pick at the family level. In case of the death of a husband in some cultures, the woman is forced to be inherited by in-laws (Kailo, 2005). Property grabbing and lack of support from the in-laws

is another form of GBV which confronts women at this age. The killing of old women by their children or close relatives on suspicion of witchcraft is also another form of GBV (Aboud, 2004).

Fig. 2 shows that various forms of violence such as FGM, forced early marriage, psychological abuse and paying of bride price begin at the adolescent stage. Forced prostitution, rape and human trafficking for sexual exploitation did not feature in the study area. At the reproductive age, violent practices include widow cleansing, sexual harassment, wife battery, deprivation from acquiring basic needs and in some few cases young women forced into marriage to old women (*nyumba ntobhu*). At the old age, some women are culturally forced to live with young girls as their care givers, traditionally termed as their daughter in-law, and some had permanent scars on their bodies as a result of wife battery.

2.7 Theories Related to GBV in African Societies

Theories explaining the origin of GBV are discussed in this section. Different scholars have different perceptions with regard to the origin of GBV. These include the Feminist and cultural based theories, Rights based theories, society-in transition and the culture of GBV explanations (Sokoloff and Pratts, 2005). Other theories on gender based violence include the Gender role conflict theory, interactionist and structuralist approaches to GBV.

2.7.1 Right-based theories

One of the principles of human rights states that “all individuals are equal as human beings by virtue of the inherent dignity by each human person, no one, therefore, should suffer from discrimination due to color, race, age, gender, language, religion, sexual orientation, political or other status as established by human right standards” (UNFPA,

2005). According to the right-based theory, violent practices such as FGM, early marriage, widowhood rites and inheritance of widows are acts that are against human right issues. Although gender based violence is practiced by individual citizen rather than states, gender activists assert that the role of protecting its people (men and women) lies in the hands of the government (Thomas and Beasley, 1993) cited by Merry (2006). GBV is considered as the most pervasive and socially tolerated human right violation. It reinforces inequalities between men and women while compromising dignity, security and autonomy of the victims. Studies on human rights indicate that human right principles are universal in the sense that every human being is entitled to them since all human beings are born free and equal in dignity and rights (UNHCR, 1995; Moreno *et al.*, 2008; Schuler *et al.*, 2008).

Other principles include interdependence and interrelatedness of human rights. This means that fulfillment of one human right principle may depend on the other. For instance, the right to education may need the fulfillment of the right to overall development. Accountability and the rule of law are among the principles of human rights in which government leaders are obliged to observe in their respective countries. Participation and inclusion are also among the important human rights principles that seek the right of every individual to participate in the decision making process affecting their lives. All groups (children, women and men, minorities, disabled and all disadvantaged groups) have the right to participate fully in the decision making process. These rights are well documented in various international instruments such as the Universal Declaration of Human Rights, the International Covenant on Economic, Social, and Cultural Rights, the Convention on Political Rights of Women, the Convention on the Rights of the Child, the Convention on the Consent to Marriage, Minimum age of marriage and Registration of Marriage, the Convention against Torture and other Cruel practices, Inhuman or Degrading Treatment or

Punishment and the Convention on the Elimination of all forms of Discrimination against Women (CEDAW) (December, 1999).

Through one of its committees CEDAW explicitly recommends for the ending of GBV. As Merry (2006) indicates, women violence was initially discussed as a human right violation in the 1980 during the Copenhagen meeting. Furthermore, the Nairobi forward looking of 1985 critically identified women violence as a basic agenda in the peace making process. Following the 1993 Vienna Declaration and Programme of Action and the 1994 Declaration on Violence against Women was stated as a violation of human right issues (Merry, 2006). In 1994, the UN Commission appointed a special representative on violence against women, to seek for information on the cause, status and the impact of violence in society from various governments, non-government organizations, inter governmental institutions and other organs to suggest measures for rectifying the situation. However, regardless of the recognition of the principles of human rights, GBV is widely practiced worldwide and many women of different age groups are killed while the perpetrators go unpunished (UNFPA, 2005).

The Fourth World Conference on Women held in Beijing in 1995 stated the need for the state's attention towards elimination of GBV (UNFPA, 1995). The UN Development Fund for Women (UNIFEM) has played an extensive role in the elimination of GBV through campaigns pressing governments to implement their objectives of the campaigns because many states especially African heads of states signed the CEDAW and other conventions towards elimination of GBV, yet nothing has been done at the national level. These declarations condemn various acts of GBV that are against human rights issues such as sexual abuse and rape (including marital rape), physical violence like wife battery which is predominant in the African settings. Others include psychological violence, and other

forms of violence that impair the enjoyment of women of their human right and fundamental freedom (Merry, 2006; Schuler *et al.*, 2008).

2.7.2 Feminist theories on GBV

Feminism is the organized movement, which promotes equality for men and women in various development spheres such as political, economic and social aspects. They believe that women are oppressed based on their sex under the patriarchal ideology (December, 1999). Patriarchy is the system, which oppresses women through its economic, political and social institutions based on power imbalance between men and women (Nielsen, 1990). Historically, men have had greater power in all spheres of life; hence they have created boundaries that prevent women to penetrate in both private and public institutions. Various theories have been posited by feminists including the liberal, radical, Marxist and socialism feminism.

According to the Liberal feminism, all human beings are equally created by God deserving equal rights. They believe that women are oppressed because of the way men and women are socialized based on the directives of the patriarchy ideology. The oppression is expressed through GBV. Liberal feminists believe that both men and women have the same mental capacity, therefore, women should also be given an opportunity to participate equally in politics, economic, and social aspects of development.

Radical feminism advocates that women are great beings due to their power of reproduction. The other opposing idea propounded by Radical feminism is that reproduction and femininity limit women's capacity to contribute to production activities (December, 1999). Thus, women lack the capacity to control assets, hence they suffer from economic type of violence. They also advocate artificial means of reproduction

which would make women spend more of their time devoted to production activities (Anderson, 2005).

Socialist feminism advocates that there is a direct link between class structure and the oppression of women. Development actors reward men due to their role in the production sphere where they produce tangible products with monetary value while domestic chores performed by women have no monetary value and, therefore, not valued (Njuki, 2001).

Marxist feminism argues that the economic power and GBV are historically linked to the accumulation of capital. The theory is based on Engel's' thinking that women's oppression is a result of transformation in production, where men control the income in terms of private property and capital (December, 1999; Sokoloff and Pratts, 2005). The proponent of Marxist theory envisages that as capitalism grows, women will be pushed out of the production system into a private and unpaid reproductive labor to safeguard their husbands in the competitive market.

Women's loyalty of nurturing the family subsidizes the husband's income. Capitalists used the family as an important institution for their success in production. The family is one of the major units where rigid gender division of labour is practiced for the interest of the patriarchy and the capitalists. Family issues are strictly regarded as private, separated from public for easy manipulation of women by the patriarchy and the capitalists. Therefore, GBV continuously encroach the family in the umbrella of culture and traditions. In view of this, family is a central locus for women's oppression in the articulation of patriarchal and capitalists interests (Sokoloff and Pratts, 2005). It is a common knowledge that patriarchy existed long before capitalism; therefore, its utility depends on the consent of the patriarchy. Early authors of Marxist theory clearly indicated

that patriarchy is an invisible capitalist society (Mies, 1986, cited by December, 1999). The union of patriarchy and capitalism marginalizes women from the production process by promoting the belief that a family is a traditional and a natural unit. Strategies used by capitalists to oppress the proletariat are congruent to those used by the patriarchy to oppress women (December, 1999). On the other hand, Marxist feminism contends that when there is a need for cheap and easily controlled labor, women are encouraged to join the production process (Pickup *et al.*, 2001). The constant manipulation of women in the patriarchal society, render them prone to GBV as they are dependent on their husbands economically.

According to December (1999), almost all feminists' theories advocate that the family is naturally maintained by patriarchy. In so doing women have been automatically excluded from political and economic power. Further, the patriarchy ideology is struggling to destroy women's consciousness and their potential power as human beings. Women lack self confidence in various aspects hence are prone to GBV which is institutionalized in African traditions. For instance, a woman is not allowed to inherit resources from neither the husband nor her own family (Jackson, 1999; FEMNET, 2001). After the death of the husband, a woman could be given a marginalized and unproductive land by her family. This could probably be one of the sources of poverty among women in both urban and rural areas.

2.7.3 Cultural explanation on GBV

Cultural explanation on GBV asserts that there is power of tradition and norms within African culture perpetuating GBV. Culture is a complex entity with no single definition. Lindhorst and Tajima (2008) define culture as any group of individual having a common heritage and history and these groups must have identified socio-political boundaries.

Culture as defined by Merry (2006) is a stable pattern of beliefs, thoughts, traditions and values which are passed from one generation to another through socialization. Boys and girls are socialized differently as far as culture is concerned. While boys are socialized to control the family, girls are raised to be dependent and obtain security from men (Anderson, 2005).

Although culture is regarded as being stable, it is not static; it can be shared through experiences and commonalities that evolve under changing social and landscapes (Lindhorst and Tajima, 2008). Violence against women is embedded in culture through institutions like the family and its components such as marriage, divorce, bride price, inheritance of resources, child custody, just to mention a few. Socio-cultural theories of violence assert that GBV is a result of a reflection of attitude shared by a group of people governing interpersonal interaction in the patriarchy society (Jackson, 1999; Nayak *et al.*, 2003; Anderson, 2005). Since culture is rigid and untouchable, GBV is said to be natural; therefore, ending violence requires cultural renovation.

Merry (2006) asserts that cultural norms have been divided into two main categories the 'acceptable and unacceptable cultural practices' which result into acceptable and unacceptable GBV. The former is in the name of discipline of women by the husband, while the latter is termed as abuse (Johnson, 1995; John, 1999; Anderson, 2005). Gender and human right activists question the legitimacy of a proper definition of GBV in the cultural context. Literally, GBV practices are detrimental to the victim since there is no demarcation between soft (acceptable) and hard (unacceptable) violence. The argument that there is soft violence defends the culture of violence of men against women. Furthermore, it supports the idea of masculinity/bullying of men against women in the society as explained by Wolfgang & Ferracuti (1967) cited by Nayak *et al.* (2003).

Culture as defined by Merry (2006) is a stable pattern of beliefs, thoughts, traditions and values which are passed from one generation to another through socialization. Boys and girls are socialized differently as far as culture is concerned. While boys are socialized to control the family, girls are raised to be dependent and obtain security from men (Anderson, 2005).

Although culture is regarded as being stable, it is not static; it can be shared through experiences and commonalities that evolve under changing social and landscapes (Lindhorst and Tajima, 2008). Violence against women is embedded in culture through institutions like the family and its components such as marriage, divorce, bride price, inheritance of resources, child custody, just to mention a few. Socio-cultural theories of violence assert that GBV is a result of a reflection of attitude shared by a group of people governing interpersonal interaction in the patriarchy society (Jackson, 1999; Nayak *et al.*, 2003; Anderson, 2005). Since culture is rigid and untouchable, GBV is said to be natural; therefore, ending violence requires cultural renovation.

Merry (2006) asserts that cultural norms have been divided into two main categories the 'acceptable and unacceptable cultural practices' which result into acceptable and unacceptable GBV. The former is in the name of discipline of women by the husband, while the latter is termed as abuse (Johnson, 1995; John, 1999; Anderson, 2005). Gender and human right activists question the legitimacy of a proper definition of GBV in the cultural context. Literally, GBV practices are detrimental to the victim since there is no demarcation between soft (acceptable) and hard (unacceptable) violence. The argument that there is soft violence defends the culture of violence of men against women. Furthermore, it supports the idea of masculinity/bullying of men against women in the society as explained by Wolfgang & Ferracuti (1967) cited by Nayak *et al.* (2003).

As observed by Lindhost and Tajima (2008), there is a patriarchal behavior and cultural behavior as far as GBV is concerned. Wife battery is patriarchal behavior and not cultural behavior. According to December (1999), women are culturally regarded as children hence they deserve punishment as a corrective measure. Most of the victims of violence have to abide by the cultural norms in order to preserve their marriage. Researchers on cultural explanation have a challenge of exploring how women can be protected against violence while at the same time maintaining marriage and cultural norms.

2.7.4 Violence as explained in the society in transition theory

According to Sokoloff and Pratt (2005), a society in transition explains violence as emerging from the fact that African societies are in transition from traditional culture to modern urbanized society. In the process to acquire the modern life style, perpetrators and victims trigger more violence. New life styles emanate from the existence of enormous changes in the world's economy. The continents have been affected differently with the prevailing economic transformation (December, 1999). Developing countries including Tanzania have been compelled by the International Monetary Fund (IMF) and the World Bank to activate exports so as to generate income for servicing their foreign debit (Vickers, 1991; Aslanbeigui *et al.*, 1994; Turshen, 1994; Gazder, 2008). Nevertheless, it was necessary for the countries to abide by the market liberalization and privatization system.

Developing countries faced high prices of both local and imported goods and services, high rate of unemployment and more poverty among their people (Gazder, 2008). This led to an out migration of men for greener pastures. The upshot of these to women is high compared to men as there is high workload for women due to their struggle into filling the gap left by out migrating men. This has impacted negatively on few family resources

including human resource and has increased poverty among family members. Women are forced to produce both food and cash crops for the survival of the family. The prolonged absence of the husband from home is associated with high rates of divorce and separation leading to increased female headed households and single parenting in the society. For those who reconcile, there are chances of experiencing GBV when they challenge the husband regarding unfulfilled expectations such as financial support.

2.7.5 Gender role conflict theories on GBV

Gender role conflict theory is based on psychological state of an individual in which socialized gender roles have negative consequences on the person or others (ONeil, 1997; Burke, 2000). The gender role conflict occurs due to the existence of inflexible and unjust gender roles that result into restriction, devaluation or violation of others or self (ONeil, 1981) cited by Burke (2000). Gender role conflicts entail cognitive, emotional, unconscious, or behavioral problems caused by socialized gender roles learned in an unjust patriarchal society. Such conflicts occur when men and boys violate gender role norms and when they try to meet or fail to meet gender norms of masculinity. Men are expected by the patriarchal society to be the heads of the households and breadwinners. Early authors of gender role conflicts contend that such conflicts result from the discrepancies between men's real self-concepts and their ideal self concepts based on gender roles stereotypes.

Other situations in which men experience gender role conflict are when there is personal devaluation/violation or experience of self devaluation, restriction or violation from others. Similarly, men and boys may devalue, restrict or violate one another because of gender role stereotypes. In the process of developing gender role conflict scale, ONeil used four factor analyses. Based on the current study, there are three patterns of gender

role conflicts, which activate men's violent behaviour against women. These include Success, Power and Competition (SPC). Burke (2000) elaborates SPC as being the state of constant worries about personal success in terms of wealth, academic/general competence, failure and constant uphill in life as opposed to their counterpart. Failure to fulfil the role of nurturing the family, men ends up in GBV towards their wives (Fawole, 2008).

The proponents of the Gender Role Conflict Theory used the term power as the state of being oriented towards acquiring authority, dominance, and influence over others (ONEil, 1997). Likewise, Burke (2000) observes that the majority of men struggle to have a power over others. Those who fail to influence other men outside their families, tend to direct their anger to their wives. The last component of the scale is competition, where violence perpetrators strive to beat others in gaining something or in comparing oneself with others. Restrictive emotionality (RE) is one of the scales closely related to GBV. It is the state where men have difficulties and fear about expressing one's feelings and fail in finding better words to express their basic emotions (ONEil, 1997). This is associated with types of gender based violence such as sexual harassment and marital rape as perpetrators can just act without the consent of the partner.

Another scale on gender role conflict related to GBV of men against women is the Restrictive Affectionate Behavior between Men (RABM). This scale entails the state where men have little or limited ways of expressing emotions and feelings with other men as well as difficulty in exercising their strength over other men. Nevertheless, the gender role conflict theory failed to explain dating violence, male gay's abuse, lesbian battering and violence of women against men (McHugh, 2005).

2.7.6 Interactionist approaches to GBV

The interactionist approach regards gender as characteristics of social interaction rather than of an individual person (Anderson, 2005). Through individual's interaction, practices of masculinity and femininity are carried out in order to conform to the societal needs. Therefore, from the interactionist point of view, violence is not a gender neutral behavior. In the African culture, violence is perceived as masculine behavior; men use it to show others that they are real men. As stated by McHugh (2005) and Anderson (2005) that men become violent against their wives or partners in response to the perceived challenges to their position or authority.

According to interactionist approach, a violent act conveys masculinity. The same GBV act can be interpreted differently depending on whether the actors were men or women. In this regard, when GBV are practiced by men they are viewed as normal behavior, whilst if they are practiced by women it is considered abnormal and women who engage themselves in such acts are shunned by the society. On the other hand, GBV of women against men is normally not reported, because men are expected by the society to stand up on their partner's violence as 'real men'. Men who are victims of violence from their wives have their masculinity threatened. It is a cultural embarrassment for a man to be a victim of GBV from his own wife.

2.7.7 Structuralist approaches to GBV

The structuralist approach asserts that gender is a form of social structure in the sense that it organizes social institutions, identities, attitudes and interaction (Anderson, 2005). The proponents of structuralist approach posit that women and men are unequally categorized according to responsibilities and occupation in the society (Risman, 1998 cited by Anderson, 2005). They argue further that, gender exists as a social force that operates

independently of individual wishes. 'Men and women are forced to live a gendered life or to support men dominance, they often find themselves compelled to do so by the logic gendered choices'.

In the structuralist approach, gender structures influence women and men's opportunities and rewards towards the use of violent behavior. For instance, marriage is organized by gender, in the marriage life, women and men are assigned different roles, therefore, they experience marriage differently. Since men control family resources, women would be economically dependent on them, hence, this become a barrier to avoiding violent relationship. The role of nurturing the family given to women is bondage for them to remain in violent relationship.

In line with structuralist approach in Tanzania for instance, kitchen parties are organised in order to prepare young women before marriage. Women are taught various norms within the marriage institution, including nurturing the husband and being tolerant to violence. Anderson (2005) contends that women experience high consequences of injury, fear, depression and low self esteem resulting from violence than it is for male victims. This is linked to differential training in the sense that men are trained to be strong and harsh, to be able to defend themselves, while women are trained to be weak. Explaining a variation in the rates of GBV across structural contexts the theory holds that more women perpetrate dating GBV more than is the case with men. Women are also believed to be the perpetrators of GBV in cohabitation relationship compared to permanent marriage.

2.8 Linkage of Women Empowerment and GBV

There is a mutual relationship between women empowerment (WE) and GBV. Empowerment indicators like education and economic status are believed to have negative

connotation to GBV. As Schuler *et al.* (1998) report the more women become empowered the higher the level of violence against them. This is because an empowered woman can easily challenge the husband on subordination aspects, hence, more violence.

Similarly, Mitra and Singh (2008) indicate an inverse relationship between high levels of education as part of women empowerment and GBV. The author argues that education fosters pride, increases freedom of movement and expression among women. It also installs aspirations. All these are threats to violent men. Since education is a means to employment, it is anticipated that the income of women would be improved. Economically empowered women could easily divorce and remain independent (Fawole, 2008). However, there are more negative effects of divorce to women than there are for men. Normally, rearing of children is shouldered by women after divorce; this adds more workload to women. Such women suffer from loneliness, exhaustion and depression (Mitra and Singh 2008). Culturally, divorced women are seen as outcasts in the society, as people who are unable to respect the husbands.

Due to economic transformation and long-term empowerment process in the world, redefining of gender roles at family level becomes imperative (Karl, 1995). Currently women are active in the production role which was initially meant for men and this has resulted into railing against women. Underemployed or unemployed men may have a feeling that their role is being undermined as daily bread winners at home (December, 1999). Men's confidence is undermined when they fail to perform their role as breadwinners. This is what Whitehead (2006) calls 'threatened masculinity' due to economic crisis at family level. In order to restore power at home, majority of men opt to become violent against their wives. On the other hand, women in the subordinate position in the economic sphere are increasingly exposed to the risk of violence through sexual

exploitation. Less economic power increase tolerance of women to violent relationship. Re-examination of the existing GBV status of women should be broadly interpreted in terms of economic conditions, social and cultural norms in Tanzania.

2.9 Determinants of GBV

There are various theoretical explanations on the origin of GBV as explained in section 2.7 of this chapter. Koda and Ngaiza (2004) explain the causes of GBV as conceived by the Feminist as resulting from unequal power relations between men and women. The power imbalance is reinforced by culture, customs and beliefs. Girls and women are praised for being consistent to these values. Other determinants of GBV include political conflicts which sometimes lead to sexual abuse against women and girls in the refugee camps (Pickup *et al.*, 2001). Tanzania is among the countries hosting large numbers of refugees from Burundi and other neighboring countries. Women in the refugee camps in Kigoma Region were reported to have been victims of sexual violence such as rape (UNHCR, 1995).

However, there are myths used to justify GBV. One of such myth is that GBV is caused by psychological and physically impaired men. This has led to a wrong perception that violence of men against women is out of men's control while the impaired masculinity is learned through socialization in violent relationship of the parents (Pickup *et al.*, 2001; FEMNET, 2001; Shuler *et al.*, 2008). Myths are passed as a truth and are usually never challenged under the patriarchy system. Statements like 'Rapists have mental problems, they are uncultured men' are not true because majority of women are raped by close relatives, their dating partners, husbands, father, teachers, colleagues or guardians (FEMNET, 2001). All these are people with no mental problems, thus the statement is merely used to justify GBV. Statements like 'marital rape is non existent' are used to

justify rape among married women. Since rape means doing sex without one's consent, it is possible that the majority of married women are raped by their husbands. It does not matter whether it is done by the husband or any other man. There is a myth in Mara region that 'wife battery is a sign of love' such statements broadly imply that women enjoy being beaten as an expression of love from their husbands (ACT-Mara, 2006). According to FEMNET (2001) wife battery is an offense, and therefore it should not be rationalized.

There is also another myth that women would say 'NO' when they mean 'YES'. Such a wrong perception is used to justify acts of rape and other violent practices against women. Men argue that violence against women is an inherent part of maleness or is a mark of masculinity, unfortunately victims of violence also agree with such statements to justify their tolerance in violent relationships and abide by the patriarchy ideology. Effective strategies towards eradication of violence should focus on replacing these myths by facts (Pickup *et al.*, 2001). Changing people's perception towards these myths (both the perpetrators and the victims of violence) is crucial for elimination of GBV.

Various institutions including the judicial system and religious organizations are said to be among the causes of GBV as they use delaying tactics in dealing with violence. GBV cases reported in the church normally end up without tangible resolutions because the victims are told to be obedient and pray for their husbands (Lentz, 1999). It is written in the Holy Bible that the husband is the head of the family; he should be respected in the same way as Jesus Christ is respected (Ephesians 5:22-23). These teachings are often offered to girls and women approaching their marriages. Girls are told to be good wives, speak softly to the husbands, take care of the house, and cook nice foods for the husbands and many other nurturing issues of the families. Pickup *et al.* (2001), report of similar experience in Cambodia, where practical advice about how to nurture the family is given to young married women.

Policies and practices are said to be among the causes or rather exacerbating violence against women. FEMNET (2001) contends that the phenomena constitutions of many countries provide equality to every individual to be free from any form of violence. The Tanzania constitution is also committed to establish violence free communities. However; the pace of amending the existing laws and policies is very slow to the dissatisfaction of victims of GBV. The vivid example is the marriage Act of 1971 of Tanzania which makes a provision of fifteen years as a legal age of consent in marriage for girls. Gender activists and human rights proponents are devoted in seeing changes happening through lobbying and advocacy (TGNP, 2002; Kassim, 2004).

There are individual and shared causes of GBV in the society that when properly addressed would lead to the elimination of GBV (Charmes and Wieringa, 2003; Wright *et al.*, 2007). The shared causes of psychological violence include poor communication skills among partners that can end up in GBV and undermining of women's self confidence by the husband leading into low self esteem. These may result into feelings of guilt, and shame, embarrassment among women, leading to more isolation and vulnerability (Wright *et al.*, 2007; Sa and Larsen, 2007). Social psychological violence is caused by high level of tolerance of physical violence by women, extreme jealousy and possessiveness of women by the husband. On the other hand social cultural violence is caused by the existence of patriarchy ideology, advocating male supremacy with the right to punish women (Lentz, 1999; Pick up *et al.*, 2001).

As for individual causes for psychological violence these include traits like shyness, depression, withdrawal, low self esteem, insecurity and anxiety all of which leading to vulnerability. According to Wright *et al.* (2007), past experience of GBV increases chances for the children becoming victims or perpetrators of violence during adulthood.

Likewise, social psychological violence is caused by lack of experience in marriage life among young men and women. For older women, fear of divorce and the waste of time invested in the relationship and lack of personal resources to start an independent life are the causes of perpetual tolerance to violent relationship.

The immediate causes of GBV as perceived by Ellsberg and Haise (2005) include the failure of the wife to prepare food for the husband in time, because one of the main roles of the wife is to ensure that well cooked food is available for the husband in time. Other causes of GBV worldwide include disobedience to the husband, arguing back/raising ones voice when the husband is speaking, not caring for the children adequately, questioning the husband about family money or extra marital affairs, leaving the house without permission from the husband, refusing having sex with the husband and suspicion of infidelity by the husband.

2.10 Women's Response to GBV

Strategies towards elimination of GBV depend much on the response of the victims during and after the violent acts. The response of women towards GBV has been described by various scholars including Lampert (1996) whose theoretical framework indicates three progressive stages used by women to cope with GBV. The first stage occurs at the family level; each partner tries to keep the violence invisible (face serving strategies as a way of averting public attention of the GBV), preserving integrity of the family and pretending to have a cheerful home. This is because women in violent relationships experience both embarrassment and frustration about their abusive situation and try to conceal the situation. The second stage is characterized by recognition of harmful and unrealistic expectations, although there is a desire to contain violence and protect personal agency (Wright *et al.*, 2007). This is accompanied by unpredictability, frequency and severity of

GBV that necessitate the victim to seek for some external assistance. However, this measure would depend on the level of awareness and support (financial and other resources) that a woman has. The third stage is characterized by making GBV more evident depending on the context and culture in which the violence occurs. Village leaders, friends, police and health centers are regarded as important places where violence can be reported for taking initial actions. Later on, a woman gains more confidence for re-establishing her own requirements and eventually leaves the violent relationship. On the other hand, as Bargai *et al.* (2007) reveal learned helplessness which is a psychological trait, which theoretically results from repeated exposure to GBV, contributes to submissiveness and reluctance to leaves the abusive relationship. Learned helplessness includes issues taught during childhood such as “women must always obey men”, “making decisions on family matters is the role of men” just to mention a few. Women were made to believe that they are inferior and helpless, hence, remained dependent on men.

2.11 Methodology Used in GBV Studies

Challenges in researching GBV arise from methodological, ethical and conceptual issues. Since GBV is complex in nature, a variety of methodologies has been applied in studying the subject. Both cross sectional and longitudinal research designs are appropriate in researching GBV. In the practical guide for researchers in GBV, Ellsberg and Haise (2005) argue that using appropriate tools, cross sectional surveys provide information about the proportion of women experiencing GBV now and in the past. Such a tool makes easy to define the context in which GBV is practiced by looking at the characteristics and dynamics of abuse. It is also possible to see the attitude of both men and women towards GBV. Gender relations can be approached from such issues as decision making power and control over resources. Some of the characteristics of cross-sectional research design

include its ability to provide snapshots of a population as far as GBV is concerned. It can provide retrospective information in the lives of the victims and perpetrators. Since cross sectional research design is relatively cheap, easy to design and implement, it can therefore be applied at a community level. However, there are some limitations with this design as it is difficult to determine the causality of events in violent relationships (Ellsberg and Haise, 2005).

Longitudinal research design is also useful in researching GBV since it classifies the community under study in two groups namely the group of people that have not been exposed to a potential cause or risk factor and those exposed to the risk of violence. Ellsberg and Heise (2005) describe longitudinal studies as a follow up of the individual over time. The design is able to study so many outcomes in a single or multiple exposures; it can be prospective or retrospective. It is the best in determining causes and effects of GBV hence it is used to study the effectiveness of intervention over time. However, cohort/longitudinal studies are expensive in terms of time required to conduct the research and money as large samples are required in order to have a true representative of the population.

Researchers are still debating on which method is appropriate in GBV related studies. According to Kishor and Johnson (2004) and Wright (2007), qualitative methods and ethnographic research studies are required to document the real life stories that allude to violence against women. This can be achieved through in-depth discussion where cultural norms, beliefs and behaviors are underscored. Using participatory approaches, the assessment of community needs, designing violence campaigns and planning for interventions can be done. Qualitative methods are also useful in exploring attitudes of victims and perpetrators of violence in the study area. Quantitative methods have been

useful in collecting data for statistical analysis in order to bring the matter to the attention of the public, policy makers and activists for appropriate interventions. A number of tools can be employed in researching GBV including 'The conflict Tactic Scales (CTS) (WHO, 2005). This tool in a combination with other tools has been widely used by researchers. However, underreporting (false negative) and over reporting (false positive) problems have been reported in various studies in relation to CTS (Hamby, 2005; Russo and Pirlott, 2006).

False negative reporting is caused by forgetting and sometimes concealing GBV practices such as marital rape. Hamby (2005), in one of the studies using criminology data in the US, found that differences in reported GBV events at the police and incidents of GBV reported by people through survey was less by 29%. The causes of underreporting are many, but memory failures were found to be one of the limiting factors in the interpretation of GBV rates. Other factors include reporting load; the tendency of the respondents to omit some of the valuable information. Poorly or direct worded questions such as marital rape or abuse scare some of the respondents, thus neutral or legal terms like sexual assault are advisable instead in such circumstances. Social stigma attached to violence is one of the reasons for underreporting as respondents become adamant in reporting as a victims or perpetrators.

False positive is a phenomenon where an incidence reported is higher than the actual situation or where the reported cases at the police are lower than to what is reported in the survey. In some cultures, women are not allowed to report violent practices to the police for fear of more GBV or divorce. Therefore, false positive in the survey report is always the case. More reasons on CTS for not being able to address injuries resulting from GBV victims were given by McHugh (2005). The CTS tool is also reported as being unable to

tackle GBV consequences and motive for violence, hence, ignoring a large part of gender inequalities. Therefore special training is needed for enumerators before starting research before conducting GBV studies as confidentiality and safety of respondents must be preserved. However, this study employed a cross sectional research design because as stated above this design is cheap in terms of time and money and easy to design.

2.12 Research on Women Empowerment and GBV in Tanzania

2.12.1 Research on women empowerment

In the past three decades, Tanzania has been struggling towards empowerment of women (TGNP, 1994; Shayo, 2004). Women in development (WID) approaches were employed through the introduction of projects directly targeting women alone. These projects focused mainly on social and economic empowerment. WID projects were believed to meet practical gender needs or welfare needs of women rather than strategic and long term gender needs. WID projects are regarded as being out of fashion, instead gender in development (GAD) programme took over. As Brown (2006) concedes, currently there is an enormous number of development projects run by the government, international donors, and local NGOs targeting women alone in Tanzania. After the assessment of WID and GAD approaches, it was suggested that although GAD projects are superior to WID the two must run parallel (TGNP, 1994).

One of the studies on WID approach includes the empowerment through participation of women in safe motherhood in north western Tanzania conducted by Ahluwalia (2003). Participation of women was achieved through a community capacity building and empowerment by the Community Based Reproductive Health Project (CBRHP). The outcome of the approach was positive due to the fact that women had to mobilize themselves on matters related to obstetric problems.

2.12.1.1 Political empowerment

For many years women have largely remained as implementers of decisions made by men due to limited participation of the former in politics and public life (Koda, 2004). By definition, politics is the science and art of governance and thus it is related to decision making at various levels of governance from the household to the public level (Koda, 2004). Gender activists and researchers have been engaged in political empowerment and involvement in the decision making in Tanzania. Therefore, there has been limited participation of women in political and social spheres for example Kiondo (2003) report a relatively low representation of women in the electoral commission of the 1995 election. Out of the seven members of the committee there was only one woman. Similarly, only 5% of women contested for parliamentary seats for the 1995 election in Tanzania. Currently, there are 30% women representatives in the Parliament and the majority of these became representative through the affirmative action under special seats.

The identified barriers to women's participation in politics include among others, low self esteem resulting from unequal power distribution in the society. The power imbalances between men and women also impart fear of divorce for married women because some women politicians are seen as uncultured and prostitutes (Koda, 2004). Most of the researches on women empowerment that has been done so far focused on political and economic empowerment which entails involvement in decision making at high levels, such research has left out the relationship of women empowerment to GBV at a household level. The current study therefore focused more on women empowerment and its relationship in addressing GBV.

2.12.2 Research on GBV in Tanzania

Research on GBV in Tanzania started in the past three decades. Until recently, researchers have been gathering information on violence regardless of the sex of the victims or

perpetrators (UNFPA, 2005). This approach contributed to the development of general programs that address violence in society as a whole. This is notwithstanding the fact that gender activists have been in the frontline studying GBV specifically on women. Specific information gathered by researchers includes the cultural practices such as FGM.

According to Aboud (2004), there were 6.3 million Tanzanian women who had undergone FGM by 2002 mainly practiced in Arusha, Manyara, Dodoma, Mara, Kilimanjaro, Singida and Iringa Regions. It is documented that about 99% of married women in Arusha experienced domestic violence and about 293 women died of domestic violence in Kilimanjaro alone. Out of these, 187 committed suicides due to frustrations and about 399 people were killed in Shinyanga and 43% of the deaths were associated with witchcraft (Aboud, 2004). Also McCloskey (2005) reveals that 21% of women were subjected to domestic violence in Kilimanjaro Region. Women have been subjected to violence specifically relating to FGM, with the prevalence rate of 44% more specifically in Tarime and Serengeti Districts in Mara Region (ACT-Mara, 2006). According to Musendo (2002), about 20-25 girls undergoing FGM annually die of haemorrhage and secondary infection in Mara Region. Marriages between two women are culturally practiced in Serengeti and Tarime Districts exacerbating high poverty levels among women. According to the ACT-Mara (2008), widow/widower cleansing is also practiced in Serengeti District. There are also many undocumented but reported cases of GBV by the media in the study area. There is also scarcity of prevention policies, victim support and effective legal measures to deal with GBV in Tanzania in general (Muro, 2003; TGNP, 2004). Apart from fragments of information from a single region or district the study on contradictory sexual norms and expectations for young people in rural Northern Tanzania which was conducted by Wight *et al.* (2006), found that 41% of Tanzanian women reported having experienced physical or sexual violence by intimate partners.

There are a number of studies on the impact of GBV to health in Tanzania. For instance, a study by Poulin (2007); Sa and Larsen (2008); Pronyk *et al.* (2008) found that economic vulnerability of women and girls increases their risk of acquiring HIV/AIDS and of being tolerant in violent relationships. Moreno *et al.* (2008) in the study by WHO on women's health and domestic violence underscored various health impairments resulting from GBV among women of different age groups.

Similarly, Lugalla (1999) in a study relating to social and cultural contexts of HIV/AIDS transmission in Kagera Region noted that rich men can cheaply buy sex from poor women, while poor men who cannot afford to keep/maintain the family delay getting married, but meet their sexual desire by having a number of casual sexual encounters with a high risk of acquiring HIV/AIDS or infecting others. In addition, the study underscored the cultural phenomenon of men having a control over women as far as sex is concerned. Women are socialized to be objects for sexual pleasure for men hence propagating marital rape.

These studies have been relevant since they assisted in breaking the silence on the impact of GBV in Tanzania. Further, they have informed the community at large, development actors, and the policy makers on matters related to GBV and assisted them on designing strategies towards eliminating GBV in the country. Most of these studies were based on demographic related studies. For instance, the study by McCloskey (2005) in Kilimanjaro Tanzania, gave quantitative data on domestic violence and women fertility, highlighting on the relationship between women having large numbers of children and the risk of experiencing GBV. On the other hand, there are also health based studies by WHO (2005) which show the linkage between GBV and HIV/AIDS. Apart from these studies, most of the GBV practices are reported by the media but not documented. However, there is no

specific study conducted relating GBV and women empowerment; this is the identified research gap for the current study.

2.13 Summary

This chapter reviewed the form of GBV in a life cycle of a woman and the determinants of GBV. Theoretical orientation of gender based violence and empowerment was reviewed and revealed the major concerns which include the perpetuation of unequal power relations between men and women exercised through GBV. Review on various studies has been done in order to establish the missing information on GBV situation. Based on the above observations, there has been no study which has linked GBV with the on going empowerment processes in Tanzania.

In view of this, the current study reports the effort of determining how empowerment has changed the odds of experiencing GBV in the study area. In order to accomplish this goal, the study included the social-cultural violence in particular marriages between two women and FGM. Other economic related violence focused in the study include women's lack of control over resources and limiting women by husbands from acquiring basic needs and paying of bride price before marriage.

Domestic violence in the form of wife battering and its relationship with empowerment indicators was also quantified and reported. In so doing, this thesis has contributed to re-examining the status of GBV in the study area using various quantitative and qualitative research methods and their relation to empowerment. This relationship helps to fill the gaps in research on how empowerment has changed the odds of GBV in Tanzania using Serengeti District as a study area.

CHAPTER THREE

METHODOLOGY

3.1 Overview

This chapter describe the methods used in data collection and analysis. The chapter is divided into five sections. The first section describes the geographical location of the study area. The second section provides a description of the study area including population, administrative issues and socio economic conditions. The third section describes the research design used in the study; this is followed by section four which focused on the sampling and data collection procedures. The fifth section describes the data management procedure and models used for data analysis.

3.2 Description of the Study Area

3.2.1 Geographical location of Serengeti District

Serengeti District is located on the Eastern part of Mara Region (Fig. 3). The district share boarders with Kenya to the East and Ngorongoro District of Arusha Region to the East west. Bariadi District of Shinyanga Region to the South East, Bunda District to the South West. Musoma District to the West and Tarime District to the North West. It is located between $1^{\circ} 30^1$ S $2^{\circ} 40^1$ S of Equator and $34^{\circ} 15^1$ E $35^{\circ} 30^1$ E of Greenwich Meridian (URT, 2002). The district occupies a total land area of 10 373 km², of which 7000 km² is the area occupied by Serengeti National Park, 189. 68 km² Ikorongo Game Reserve, 68.37 km² Gurumeti Game Reserve and 2456 km² is an open area (URT, 2002). Serengeti National Park is one of the world's famous game sanctuaries in the country. The remaining 659 km² is the area used for agriculture, livestock keeping, and residence (URT 2005b).

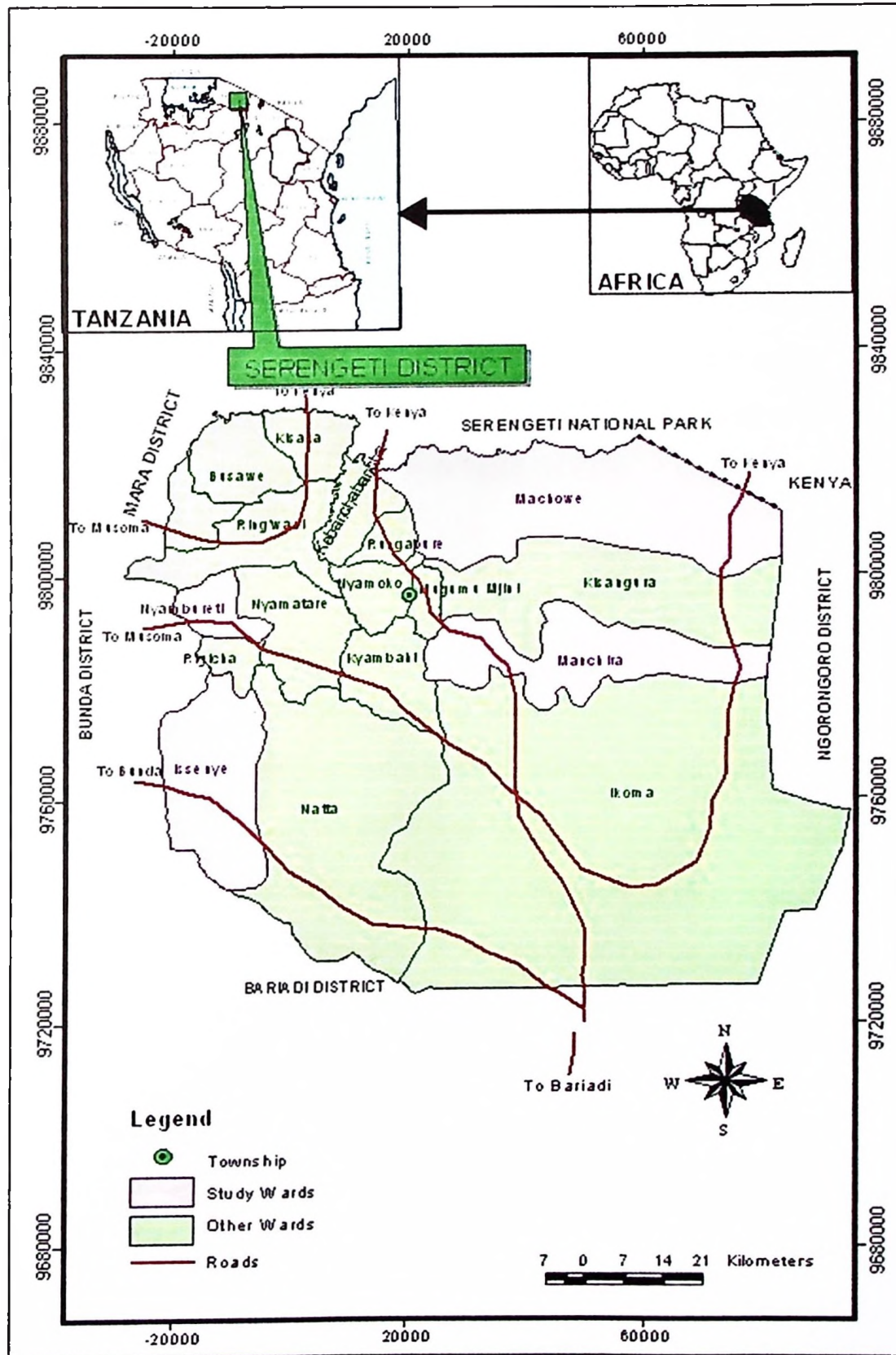


Figure 3: The Map of Serengeti District

3.2.2 Justification for selection of the study area

The research was conducted in Serengeti District of Mara Region because of the high prevalence level of GBV; hence the region is among the leading five regions in GBV in Tanzania (Aboud, 2004). Others are Manyara, Arusha, Dodoma and Kilimanjaro. The prevalence rate of 44% was reported by ACT-Mara (2006). Furthermore, Serengeti District is a bit land-locked compared to other districts in the region, therefore most of researches on GBV has been conducted in other regions such as Manyara, Arusha, Kilimanjaro and other regions but little has been done in Mara Region. Similarly, there is a famous myth that women regard wife battery as a sign of love and it is associated with jealousy by the husband (ACT-Mara, 2008).

3.2.3 Climate and ecology

The district highlands receive an average annual rainfall of 1200 mm, while the middle plateau receives an average annual rainfall of between 1000 to 1200 mm. The lowlands receive an average annual rainfall of between 600 to 1000 mm. The temperatures in the district depend on the rainfall patterns. The district receives short rains in the months of August and December and long rains in the months of February and April. The average temperature is 24⁰C, which rises to 26⁰C in the dry season.

The district is divided into three agro ecological zones; the first is the highlands with altitude ranging from 1860 m to 1960 m above sea level. The second ecological zone is the middle lands with altitudes ranging from 1401 m to 1860 m above sea level, while the third ecological zone is the lowlands with altitude ranging from 1200 m to 1401 m above sea level (ACT-Mara, 2006).

3.2.4 Administration

Administratively, the district is divided into 4 divisions, 18 wards, 75 villages, 319 sub villages and 31 388 households. According to the population census conducted in 2002, the district population was 191 862 (URT, 2002).

Table 2: Population and household distribution by Division, Ward and Sex

Division	Ward	H/holds	Men	Women	Total
Rogoro	1. Mugumu	3282	8973	9835	18808
	2. Kisangura	1977	6298	6633	12931
	3. Machochwe	2298	7266	8027	15293
	4. Nyamoko	1679	5058	6033	11091
	5. Manchira	1863	5512	5796	11308
	Sub total	11099	33107	36324	69431
Ikorongo	6. Rung'abure	1375	3909	4580	8489
	7. Kebanchabancha	1812	5557	6341	11898
	8. Ring'wani	1794	5073	5715	10789
	9. Nyambureti	1834	5089	5681	10769
	10. Nyamatatare	2145	6200	6687	12886
	Sub total	8960	25828	29004	54831
Ngoreme	11. Kenyamonta	1625	4852	5499	10351
	12. Busawe	1800	5501	6040	11542
	13. Kisaka	1449	4389	5224	9613
	Sub total	4874	14742	16763	31506
Gurumeti	14. Ikoma	1418	3658	3388	7046
	15. Natta	1229	3737	3773	7510
	16. Issenye	1335	3773	4164	7937
	17. Rigicha	1170	3474	3660	7134
	18. Kyambahi	1128	3222	3245	6467
	Sub total	6280	17864	18230	36094
	GRAND TOTAL	31213	91541	100321	191862

Source: Serengeti District Council (2002)

3.2.5 Socio-economic and cultural aspects of people in the district

The Kuryas are the main ethnic group in the district and are mainly agro pastoralists. Culturally, kurya are keen adherents of traditional customs and practices including male circumcision and female genital mutilation. The Luo are the second main ethnic group in the area and are also mainly agro pastoralists. The Luo also firmly uphold their cultural beliefs including widow cleansing and early marriage for girls. The major economic activities in the district include farming, livestock keeping, small business enterprises, small scale industries, employment in various organizations and conventional tourism and ecotourism.

3.3 Research Design

In this study a cross-sectional research design was employed. The design was considered appropriate based on its adequacy in testing the research hypothesis. It is suitable for descriptive analysis as well as for determining the relationship between and among variables.

3.4 Sampling Procedures

3.4.1 Sampling design

A multistage cluster sampling was employed so as to allow geographically dispersed populations to be covered adequately. Hence, a combination of probability and non probability sampling methods were utilized sequentially. Purposive sampling was used to obtain the district and divisions while simple random sampling was used to obtain wards, villages and respondents.

Three divisions out of the four divisions in the district were purposively selected; these include Rogoro, Ikorongo and Grumeti. The divisions were selected based on the

assumption that GBV is intense where the culture of the people is very strong. Therefore, Rogoro division was purposively selected because it is occupied by majority of the people from Kurya ethnic group. Grumeti division was selected based on its proximity to the high way with a mixture of tribes, while Ikorongo division was purposively selected because it is occupied by the Luo and Sukuma ethnic groups. Two wards were randomly selected from Rogoro, one ward was randomly selected from Ikorongo and one ward was purposively selected from Gurumeti because the village was found to have a mixture of tribes (Sukuma, Luo and Kurya) making a total of 4 wards. Two villages were randomly selected from each ward making a total of 8 villages as indicated in Table 3.

Table 3: Sampling scheme

District	Divisions	Wards	Villages
Serengeti	Rogoro	Machochwe	Nyamakendo
			Machochwe
	Gurumeti	Manchira	Miseke
			Rwamchanga
		Issenye	Nyamisingisi
			Issenye
Ikorongo	Nyambureti	Maburi	
		Nyambureti	

3.4.2 Sample size

The sample size for this study was determined using Cochran's formula based on the level of precision, degree of confidence and variability of the population as described hereunder

$$n = \frac{N}{1} + N(e)^2$$

Where:

n = Sample size

N = The population size

e = The level of precision or sampling error. This is the range in which the true value of the population is estimated to be. It is often estimated in percentages (0.05).

According to Table 2, the population size is the total number of women in the district given at 100 322.

The sample size was determined as follows:

$$n = N/1+N(e)^2$$

$$n = 100\,322/1+100\,322(0.05)^2$$

$$n = 100\,322/1+250.805$$

$$n = 100\,322/252.805 = 398$$

$$n = 398.$$

However, due to budget constraints, the sample size was reduced to 240 based on the description given by Bailey (1994), where a sample or sub-sample of 30 respondents is the bare minimum for studies in which statistical data analysis is to be done regardless of the population size. Based on this principle it was decided that a sub-sample of 30 respondents from each village was reasonable enough for the survey. Since there were 8 villages, a total of 240 respondents were involved in the questionnaire survey (Table 4).

Table 4: Respondents selected for questionnaire survey by socio-economic statuses

Village	Respondents for questionnaire survey by SES		
	Low SES	Medium SES	High SES
Nyamakendo	15	7	8
Machochwe	15	8	7
Miseke	15	7	8
Rwamchanga	15	8	7
Nyamisingisi	15	7	8
Issenye	15	8	7
Maburi	15	7	8
Nyambureti	15	8	7
Total	120	60	60

3.4.3 Sampling for questionnaire-based survey

It was necessary to select households from each village involved in the study. Although women experience GBV throughout their lives, the sampling frame for this study involved women aged from 15 years and above with different marital statuses (single, married, separated, widows, divorced and cohabitating). Women/girls aged below 15 years were not selected because they were presumed to have had little experience on GBV. The main focus for this study was women. The lists of the total number of households were obtained from the village chairperson's office in each study village.

Given the assumption that women with low socio-economic status (SES) experience high levels of GBV (December, 1999), three groups including low, medium and high SES were identified from each village. The majority (50%) of the respondents were from low SES, 25% from medium and 25% from high SES. Wealth ranking was done in order to obtain a sample of households which was a true representative of the communities' socio-economic groups. The criteria used in wealth ranking were given by the villagers. The respondents from high SES were selected based on ownership of such assets as having modern houses with walls made from cement blocks or burnt bricks roofed with corrugated iron sheets and the possession of a good number of livestock (cattle, goats and sheep). Further, the criteria used to select respondents from medium SES include the possession a bicycle, moderate house roofed with corrugated iron sheets with walls made from mud and having a moderate number of livestock. The respondents from low SES group were selected through ownership of poor quality houses made of walls from mud with roofs covered with thatch. These people had no livestock.

Thereafter, sampling of the respondents for the interview was done. From the category of a married couple under the monogamous type of marriage, the wife was purposively

selected. In case of female headed households, the head of the household was selected. For the polygamous households a lottery method was used to select one of the wives. Pieces of paper equivalent to the number of wives were prepared; only one piece was written “yes” the rest were written “no”. The wife who picked the “yes” piece of paper was included in the interview exercise. This was the procedure used to obtain 240 respondents from the study villages.

3.4.4 Selection of key informants

Purposive sampling was used to obtain 29 key-informants (men and women according to their role in the district). These included the District Community Development Officers, District Medical Officers, Rural Medical Officers and the nearest Police Officers. These were visited and interviewed individually. Ward Executive Officers (WEOs), Village Executive Officers (VEOs) and Village Agricultural Extension Officer (VAEOs) and the representatives from NGOs working in the area were interviewed at the ward office as indicated in Table 5.

Table 5: Key informants by professional

Attribute for selection	Number of respondents
District Medical officer	1
District community development officer	1
District Planning Officer	1
Rural medical officers	2
Police officers	3
Ward executive officers	4
Village Executive Officers	8
Village Agricultural Extension Officers	8
Representatives from NGOs working in the area	1
Total	29

3.4.5 Selection of respondents for focus group discussions (FGDs)

Focus group discussions were one of the methods used for data collection in the 8 villages. Six to eight participants were purposively selected from each village to represent the entire community. These included GBV victims known by the village leaders and non-victims, traditional leaders, traditional health attendants including those who carry out FGM locally known as “*Ngaribas*”. The term “traditional health attendants” was used to capture the *ngaribas* anonymously, known to the village leaders.

The respondents selected for FGD were 24 from each village making a total of 192 respondents. FGDs were done twice in each village. The first FGD was carried out before the actual survey, this involved only one group of men and women put together in order to get a broader picture of the area. This exercise was intended to enable the researcher set questionnaires, checklist of questions and modifies the problem statement. The second FGD was carried out during the actual survey involving three groups of men alone, women alone, and a mixed group of men and women. FGDs carried out after the questionnaire survey aimed at consolidating information collected through structured interview.

3.4.6 Selection of respondents for in-depth discussion

The respondents for the in-depth discussions were selected using the snow ball technique, where the earlier interviewed respondents directed the researcher to another GBV victim in the area. The first respondent was purposively selected by the assistance of village leaders. These were those respondents who were severely affected by GBV, two of whom were involved in the discussion from each village, making a total of 16 respondents for the study. A checklist of items for an in-depth discussion is indicated in Appendix 1.

3.4.7 Recruitment of enumerators

Two experienced staff from the District Community Development Office of Musoma District were selected for questionnaire administration. Additionally, four women and two men staff from an NGO called Community Based Health Promotion Programme (CBHPP) based in Serengeti District were also purposively selected for administering structured questionnaires. Six enumerators administered the questionnaire while two men assisted in note taking during focus group discussion. Two out of the six enumerators were graduates from Sokoine University of Agriculture. Apart from their experience, a two-days training was carried out to all enumerators in order to improve their capacity in administering questionnaires.

3.5 Data Collection

3.5.1 Primary data collection

Both quantitative and qualitative methods were used to collect data addressing the objectives of the study. The methodology used in collecting of quantitative data included semi-structured questionnaires (Appendix 1) and structured questionnaire (Appendix 2). Qualitative data was collected through focus group discussion, in-depth discussion and physical observation. It was necessary to use a combination of all these techniques in order to enable the researcher to obtain sufficient and insightful information about women empowerment and GBV.

a) Preliminary survey

Preliminary survey was done before the main survey in order to explore some basic information from the local people. During the preliminary survey, discussions with village leaders, ward leaders and district officials were held. Institutions working in the study area were visited. These include the nearest police station, dispensaries and health centres,

district offices such as Community Development Offices and the NGOs dealing with women affairs. Individuals with specific roles in the village such as village elites, traditional health attendants and *ngaribas* were also included in the study. The information obtained from these sources helped the researcher to construct the questionnaires and clearly define the research problem.

b) Pre-testing of the questionnaire

Before collecting the primary data, pre-testing of questionnaire using 20 respondents was done in order to test the validity and reliability of questions. Minor corrections of the questionnaire were done before the actual survey. The structured questionnaire administered was initially formulated in English and translated later into Kiswahili to facilitate effective communication. The questionnaire is attached as Appendix 2. Each interview was expected to take about 30 to 45 minute; practically this was not possible because sometimes a woman had to attend other agent domestic matters such as feeding a child and therefore delaying the interview. After the interview session, discussions between the researcher and all the enumerators were held every evening, to check for any problem encountered during the survey.

c) Focus group discussions

FDG was useful because it helped the researcher to countercheck some of the issues raised from other methods like structured questionnaire survey. It also informed the researcher about the emotional feelings and interpretations of participants as they were engaged in the discussion. Furthermore, FGD aimed at providing detailed information on various cultural norms and practices exacerbating GBV in the area. The perception of the communities towards GBV and empowerment was also assessed. The determinants of GBV and the response of women towards violence were also assessed. FGD were also

used for the purposes of wealth ranking of the respondents into their respective groups according to their social and economic statuses.

d) Observation

Based on the nature of the study, it was difficult to observe GBV practices at home during the survey. However, the outcomes of GBV such as scars on the victims' bodies were visually observed on some of the respondents who were willing to reveal them to the researcher during the in-depth discussion.

e) In-depth interviews

According to Shrader (2001), sensitive issues such as sexual abuse, marital rape and frequency of wife battery required an in-depth discussion in order to get the intended information. This type of information was collected by the researcher alone this was because of sensitive nature of issues under investigation and of the fact that the respondents involved were few (16). The collected information included life stories of the respondents, the type of GBV practiced and the response of both in-laws, biological parents, the victims and the perpetrators.

3.5.2 Secondary data

Documentary sources including published and non-published materials were reviewed from previous research reports from the Ministry of Community Development Gender and Children and at the local government offices, Libraries including SNAL, UDSM, MU and UMB, non-governmental organizations such as TGNP, TAMWA, TAWLA, CBOs, health centres and the police posts where GBV cases were assumed to be reported. The information reviewed includes all relevant issues such as GBV prevalence, prevention strategies, forms of GBV practiced in various cultural settings, responses of the victims

and the perpetrators of GBV and the extent at which women empowerment has helped women and girls to eliminate GBV.

3.6 Data Management Procedures

The information collected through questionnaire was processed and analysed using the Statistical Package for Social Sciences (SPSS) computer software. The quantitative data were analyzed descriptively to obtain the means, percentages and frequencies of various variables. These were used to construct frequency distribution tables for the interpretation of the results. The factor analysis was used for data reduction before further analysis.

3.6.1 Factor analysis

The factor analysis consists of a number of statistical techniques aimed at simplifying complex sets of data (Kline, 1994). In other words, factor analysis is a statistical technique aimed at presenting a set of variables in terms of smaller numbers which can easily be understood. It is a multivariate statistical technique used to help researchers make sense of large bodies of interrelated data. In the current study, factor analysis using principal component analysis (PCA) was used to formulate various indices such as socio-economic status of women, attitude, decision making, knowledge, Income use and GBV index.

3.6.2 Development of index variables

It was necessary to develop indices for the following variables: GBV, asset, attitude, knowledge, decision making and income use which are a result of aggregate effects of a number of individual factors. Sometimes, an individual factor determining certain variables may be expressed in different units. In order to develop single number variable representing aggregate effects of a number of individual factors, conversion of units into a common one was needed. This might sometimes involve a complex and time consuming

procedure and needs a formulation of assumptions, which may not hold true in the real situation. In order to avoid all these, indices were formulated. Other researchers elsewhere, used indices in various studies like Alavalapati *et al.* (1995), Senkondo (2000) and Simon (2006) in determining the adoption of agroforestry technologies.

3.6.2.1 Determination of GBV index

GBV index was developed using a list of 6 variables as forms of GBV which was included in the questionnaire. These variables include: whether or not respondents experienced FGM, early marriage, raped by in-laws, lack of support from the husband on basic household requirements, beating during pregnancy and deprivation of inheritance from family resources after the death of the husband (Table 6). Respondents were asked to indicate whether or not they have experienced any of such forms of GBV. The respondents who indicated to have experienced GBV were assigned 1 and 0 for who indicated otherwise. The respondent's responses were added to form an index which was used for further analysis. The values of the obtained index were then categorized into low, medium and high levels of GBV. The cut off point was 3 and the highest score was from 3.1 to 6 while the lowest score ranged from 1 to 2.9.

Table 6: Factor loading values for GBV index

Variables	1	2
Forced sexual intercourse	0.755	-0.109
Early marriage	0.669	-0.467
Wife beating	0.632	0.444
Raped by in-laws	0.632	0.026
FGM	0.553	-0.448
Deprived basic necessities	0.464	0.744

From Table 6, all variables of the first component were selected for further analysis as they had values above 0.3 (Kline, 1994). The estimated index of GBV was further used to

examine its relationships with social demographic variables. The F-test was used to determine the levels of significance of the association between GBV index as a dependent variable and social demographic variables as independent variables.

3.6.2.2 Determination of knowledge index

In order to measure knowledge of women towards GBV, various statements were constructed and included in the questionnaire. The statements indicating positive and negative response towards GBV were included as follows: a woman wearing revealing clothes is asking for rape, GBV occurs to women only, GBV is a mark of masculinity among men, son preference is part of GBV, exclusion from decision making is part of GBV, widow inheritance is part of GBV and control of earning/employment of women by the husbands is part of GBV. The respondent's response was assigned weights ranging from strongly agree, agree, undecided, disagree to strongly disagree. A strongly agree response was given a weight of 5, agree was given a weight of 4, neutral/undecided response was assigned a weight of 3, disagree response assigned the weight of 2 and strongly disagree was given a weight of 1 (Kothari, 2004).

Based on the first component, son preference and widow inheritance after the death of the husband being part of GBV were not selected following the suggestions given by Kline (1994) that a factor loading below 0.3 indicates less correlation of the variables (Table 7).

Table 7: Factor loading values for knowledge index

Variables	1	2	3	4
wearing revealing clothes is asking for rape	0.767	0.223	-0.269	0.196
GBV occur to women only	0.738	0.097	-0.408	-0.108
GBV is a mark of masculinity	0.613	-0.118	0.464	0.010
Son preference is part of violence	-0.163	0.737	0.371	0.016
Lack of decision making is part of violence	-0.592	-0.199	-0.270	0.526
Widow inheritance is part of violence	-0.190	0.579	-0.274	0.639
Control of earning is part of violence	0.393	-0.198	0.608	0.519

Women wearing revealing clothes expose themselves to risk of rape, GBV occur to women only and GBV is a mark of masculinity were selected because they were above 0.6 indicating high correlation of the variables and the factors. Exclusion from decision making and control of earning/forbidden of employment of women as part of GBV were selected because they were moderately correlated (Kline, 1994).

Furthermore, knowledge of the respondents was determined through assessing their ability to define GBV and women empowerment and the sources of information they have access to. Various information sources were included in the questionnaire such as newspapers, radios and TV programs. Other sources of information include institutions like government offices, NGOs, CBOs, neighbours, schools, religious leaders, politicians, and peer groups. The respondents were asked to respond to questions like whether or not they have the ability to access various sources of information.

3.6.2.3 Determination of empowerment index

The determination of empowerment index was necessary in assessing women's understanding of empowerment. A list of eight statements indicating positive and negative responses towards empowerment were formulated and included in the questionnaire. These statements were women involvement in development groups would eventually improve their status, economic empowerment alone would not improve women's status, women have access and control over resources in the area of study, there are more opportunities for economic development for women than there are for men, women are less empowered due to lack of access and control over resources, women involvement in development groups add more workload to women, and economic development of women depends on their access to soft loans. The respondents were asked to indicate their preference regarding these statements. The respondent's responses were assigned weights

ranging strongly agree, agree, undecided, disagree to strongly disagree. A strongly agree response was given a weight of 5, agree was given a weight of 4, neutral/undecided response was assigned a weight of 3, disagree response was assigned a weight of 2 and strongly disagree was given a weight of 1 (Kothari, 2004). From Table 8, the first component indicates that all variables had the factor loading of above 0.3; therefore all of them were used for the determination of empowerment index.

Table 8: Factor loading vales on respondent's response towards empowerment

Variables	Components	
	1	2
Women's development groups will improve women's status	0.709	-0.467
Economic empowerment alone will not improve women's status in	0.675	-0.465
Women have access and control over resources in this area	0.610	0.556
Women have many economic opportunities than men	-0.497	0.413
Women are less empowered due to lack of control over resources	-0.494	0.441
Development groups add more workload to women	0.376	0.571
Women's economic dev. depend on their access to soft loans	0.370	0.535

3.6.2.4 Determination of attitude index

Attitude index was developed using the same procedures as described in section 3.6.2.2. Various statements related to positive and negative attributes on GBV were constructed and included in the questionnaire. These include the following: the belief that violence is a private issue thus an outsider is not allowed to intervene, the myth that wife battery signifies love, women accept violence to maintain their marriage, bride price should be paid before marriage, wife battery is not a sign of love, the culture of women marrying fellow women in the area should be allowed, victims to be encouraged to report GBV practices for action, allowing old women to marry young girls to maintain their clan, paying bride price increases levels of GBV and marriage between two women increases chance for HIV/AIDS. The responses were assigned weights as indicated in section 3.6.2.2. The principal component analysis was done to select variables that influenced attitude of women towards GBV as shown in Table 9.

Table 9: Factor loading values for attitude towards GBV

Variables	Components			
	1	2	3	4
Wife battery is a sign of love	0.799	0.215	-0.236	-0.224
Wife battery is not a sign of love	-0.790	-0.236	0.319	0.211
Barred women must marry young girls	-0.484	0.073	-0.428	0.344
Women accept GBV to maintain harmony at home	0.469	-0.112	0.341	0.373
Paying brides increases GBV among women	0.283	-0.743	-0.303	0.173
Bride price must be paid before marriage	-0.087	0.574	0.463	0.181
GBV is not a private issue, it must be reported	0.192	0.571	-0.361	0.187
Marriage between two women increase HIV/AIDS	-0.121	0.456	-0.350	0.442
GBV is a private issue, no one should interfere	0.440	0.103	0.550	0.216
There is no harmony in violent relationship	-0.362	0.306	0.044	-0.627

According to the findings of the study as presented in Table 9, variables with a factor loading below 0.3 were not selected for further analysis. Using the first component factor loading, variables such as wife battery is a sign of love, wife battery is not a sign of love, old women be allowed to marry young girls, women accept GBV to maintain their marriages, GBV is not a private issue and lack of harmony in violent relationship were selected for index determination.

The findings reveal that the majority of the respondents indicated either strongly agree (point 5) strongly disagree (point 1) or neutral attitude point 3. Very few of the respondents indicated disagree (point 2) or agree (point 4). Therefore, the researcher decided to merge point 4 into 5 and point 2 into 1 to obtain three Likert points instead of five points. The high attitude was computed by multiplying the 8 statements with 5 to obtain 40 scores, and the low attitude was obtained by multiplying the 8 statements to 1 to obtain 8 scores. Therefore the cut off point was 24, and the respondents who scored from 24.1 up to 40 were regarded as having a positive attitude towards GBV, and the respondents who scored below 24 were regarded as having a negative attitude towards GBV scored from 8 to 23.9.

3.6.2.5 Decision making index

Decision making power was used as one of the empowerment indicators. Other scholars including Al-Riyami *et al.* (2003); Castro *et al.* (2008), have used decision making index as one of the important variables in measuring empowerment of women. Before developing an index for decision making, principal component analysis was run in order to select variables for further analysis and the principal component analysis was used to construct decision making index, which was used for further analysis (Mathew *et al.*, 2006; Kamal *et al.*, 2006).

In order to determine the suitability of data for factor analysis, visual inspection was done to see whether or not there was adequate number of correlations. A statistical test was carried out to ascertain whether or not would be appropriate to proceed with the factor analysis. The Bartlett's test, was also used to test the null hypothesis that there is no relationship between items within the correlation matrix (Pett *et al.*, 2003). In this study, Bartlett's test was significant ($p < 0.0001$), indicating that there was significant relationship among variables in the correlation matrix, hence, allowing factor analysis. As stipulated by Hair *et al.* (1995) and Mathew *et al.* (2006), the Kaiser-Mayer-Olkin (KMO) which is a measure of sampling adequacy should be above 0.6. In the present study, KMO was 0.83 and hence the sample was adequate for further analysis.

Table 10: Factor loading values for decision making index

Variable	Component	
	1	2
Involved in decisions about crops to grow	0.808	-0.256
Involved in decisions about children's education	0.706	-0.390
Involved in decisions about resources allocation	0.702	0.394
Involved in decisions on family income use	0.677	-0.213
Involved in decisions on number of children	0.620	-0.006
Involved in decisions about children's marriage	0.457	0.775

From Table 10, using the first component values, all the variables had a factor loading of above 0.3; therefore all of them were used for the determination of decision making index. These variables included the decision making about children's education, the type of crops to grow in the field, the number of children to bear, family resource allocation, and the use of family financial income and selection of who to marry their daughter. The responses were such that for those involved in the decision making scored 1 and those who were not, scored 0. The first component factor explaining the highest variability to the original data was used to obtain the decision making index (Mwageni *et al.*, 2005).

3.6.2.6 Determination of index on income use

An income use was one of the empowerment indicators used in this study; the assumption was that the empowered women use family income in accordance with a mutual agreement between the husband and the wife.

Table 11: Loading factor values for income use

Variable	Component		
	1	2	3
Purchasing clothes for myself	0.765	0.279	-0.108
Purchasing daily requirements	0.762	0.065	-0.280
Purchasing school uniforms	0.675	-0.158	0.232
Keeps in personal account	-0.302	.201	0.245
Send the money to my biological parents	0.041	0.833	0.055
Income is put in family account	-0.018	0.675	0.231
Husband plans for the use of my income	0.026	-0.056	-0.645
Purchasing food for family	0.365	-0.319	0.635

From Table 11, the first component indicates variables such as sending money to the women's biological parents, putting money in the family account, and the husband plans for using the income earned by the woman were not used in the determination of income use index because of having values below 0.3 as it was suggested by Kline (1994).

3.6.3 Determination of socio-economic status of respondents

Socio-economic status of respondents was assessed using assets owned by the respondent. Use of assets as a measure of socio-economic status was considered to be important because it was assumed that empowerment increases with increase in number of assets one has access to and control over. During focus group discussions, key informants agreed that empowered women have access to and control over some of the resources. Other researchers support the use of assets as a measure of socio economic status (Gwatkin *et al.*, 2000; Filmer & Pritchett, 2001; McKenzie, 2003; Mwangeni *et al.*, 2005; Vyas & Kumaranayake, 2006; Moser and Felton, 2007).

Although, measures of SES are usually through income and expenditure information, the collection of accurate income and consumption data requires an extensive resource and extensive protocol for household surveys. Furthermore, there are difficulties in acquiring accurate income levels from the community who are mainly farmers and who depend on agricultural production for family income.

Vyas and Kumaranayake (2006) assert that farmers can have income in kind, such as the trading of crops, hence, making it difficult in measuring income for self or transitory employed farmers. Further, farmers might face accounting problems and seasonality of farming activities. As Moser and Felton (2007) posit, using a snap shot income assessment at one point in time during the survey may not produce a realistic and reliable picture of farmers' wealth. There is a high possibility of making errors in data based on the recollection and value of all sources of income. This implies that income itself does not necessarily provide a reliable measure of wealth. Therefore, an asset index is useful for people working in the informal sector such as farmers. In this study, assets like bicycles, refrigerators, television sets, radios, radio cassettes, wall clocks, sofa sets, beds,

mattresses, houses, land, poultry, cattle, goats, satellite dishes, ironing machines, water pumps, and sewing machines were used in the determination of SES. Access to services like water, fuel used for cooking, the use of rainwater harvesting system and the type of toilets used were included in measuring SES. The type of houses in terms of walls, roofs and floor were among the variables used in assessing socio-economic status of women in the study area. The list of assets was included in the questionnaire which was administered to the respondents.

The principal component analysis (PCA) was used to determine the factor loadings that attached weights to assets. The first principal component is the linear index of variables with the largest amount of information common to all of the variables (Gwatkin, *et al.*, 2000; McKenzie, 2004; Mwangeni *et al.*, 2005; Vyas and Kumaranayake, 2006; Antai and Antai, 2008). The following formula was used to compute the asset index as adopted from Filmer and Pritchett (1998) cited by Mwangeni *et al.* (2005).

$$A_j = f_1x(a_{j1}-a_1)/(S_1) + \dots + f_Nx(a_{jN}-a_N)/(S_N).$$

Where:

- F_1 Is the scoring factor or weight for the 1st asset or services
- X Is the variable asset or services
- a_j Is the value of the asset or services
- a_1 Mean of the asset or services
- S_1 Standard deviation of assets or services

3.7 Determination of the Linkage between Women Empowerment and GBV

The linkage between women empowerment and GBV was determined using the binary logistic model.

3.7.1 Reasons for using binary logistic model

There are three types of logistic regression namely binary logistic regression, ordinal logistic regression and multinomial logistic regression. Ordinal logistic regression is a form of regression that is preferred to multinomial logistic regression where multiple classes of the dependent variable can be ranked. Multinomial logistic regression can be applied when the dependent variable is having more than two classes. Therefore, logistic regression which assumes that variables are not linear was suitable for the study.

Linear regression was not used because of its assumption that variables are linearly related while under normal circumstances they are not. In the case of independent variable used in this study, three outcomes of women empowerment were expected: reducing the odds of GBV in the area, increasing the odds of GBV and remaining unchanged (resistance). Therefore it is not linear

3.7.2 Use of Binary Logistic Model

Binary logistic model was used to measure the linkage between women empowerment and GBV. The model was an ideal for cases where the dependent variable is a dichotomous. When respondents experience GBV is assigned 1 and not experiencing GBV it is assigned 0. The model was expressed as:

$$\text{Logit}(p_i) = \log(p_i/1-p_i) = b_0 + b_1x_1 + b_2x_2 + \dots + b_kx_k$$

Where:

Logit (pi)	Is the natural log of the odds of an event GBV to be practiced
Pi	The probability that the event will occur
1-pi	The probability that an event will not occur
b ₀	Constant of the equation

b_1 to b_k	Coefficients of the independent (predictor) variables
K	Number of independent variables
x_1 to x_i	Independent variables entered in the model
X_1	Education measured in number of years one spent in school
X_2	Age at first marriage measured in years
X_3	Decision making index
X_4	Socio-economic status index
X_5	Member of development group (woman working in development group assigned 1 and 0 otherwise)
X_6	Income use index
X_7	Occupation (crop producer 1 and 0 otherwise)

3.8 Qualitative Data Analysis

Qualitative information obtained through observation, verbal discussion, reports and other documents were analysed using content analysis. With content analysis, the recorded discussion was broken into units of information or themes to synthesize meaning, values and attitude. Qualitative information on gender role division was analysed using Harvard Analytical Framework also called the Gender Role Framework or Gender Analysis Framework. Its major aim includes mapping the work of men and women in the community and highlighting key differences. The activity profile is based on the concept of gender division of labour.

3.9 Limitations of the Study

The findings presented in this study were obtained from a survey conducted in Serengeti District. Based on the cultural and socio-economic differences of the country, the findings cannot be used to draw a generalized conclusion representing the country. Therefore, more

case studies in terms of districts and regions are required in order to obtain enough evidence to draw firmer conclusions.

The inability of the respondents to recall GBV practices led to false negative reporting. This was noted through FGDs with ward and village leaders, clearly indicating many GBV events in their areas. False negative reporting is a situation where the reported cases are less than the actual situation. The respondents attributed false negative reporting of GBV due to the community's attitude of treating GBV as a private affair. This anomaly was addressed by ensuring confidentiality and through using alternative terms to avoid a direct reference to violent or antisocial behaviour.

The criteria used for grouping women into their respective SES categories during focus group discussions were not giving a true picture of the wealth of women. Using focus group discussions did not make it easier to sort out assets belonging to the husband or the wife instead, asset index was used to measure socio-economic status of women. However, the asset index was not able to capture the quality and life span of the asset in measuring socio-economic status (SES). Assets like sofa set may last for ten years depicting one's wealth in 10 years back.

The time estimated for interview was 30-45 minutes; the actual time taken was 1-2 hours because sometimes the interview had to stop for a while to allow time for the respondent to attend to other urgent domestic matters. Therefore, more resources like time and money were allocated for the household survey. Additionally, from the fact that data were collected only from women may have introduced bias into the data. Thus, a woman might under estimate or over estimate when reporting about the husband's age. The study recommends further studies involving men and women.

During quantitative data collection, a large number of questions were of “Yes/No” type which might have imposed a number of limitations on women’s responses to the interview questions. Such limitations include the quality and continuity of the stories and the narrative quality of information collected. Therefore in order to mitigate this limitation, detailed qualitative data were collected. Other limitations include when the study intended to look at the role of empowerment towards ending GBV. However, women’s empowerment does not generate homogenous changes among women’s relationship because changes might include adaptation, resistance and/or more GBV.

3.10 Ethical Considerations

Research ethics was considered because GBV is regarded as private affairs, which requires some confidentiality and informed consent before embarking on the actual survey. It was necessary to have the community informed and get their consent through reporting to the district, ward and village leadership, explaining the purpose of the study. Individual consent was ensured in order to have respect for the respondent’s privacy and to avoid more vulnerability of women. Individual consent was obtained from each respondent and for the married women, from their husbands as well. Before the interview, women were assured of the confidentiality and that their participation was voluntary. Women were informed beforehand about some of the questions that were to be asked and which were personal and therefore, somehow difficult to answer. Therefore, they were assured of being free to end the interview at any time or skip any question they did not want to answer.

Interviews were conducted using questionnaires administered to women in their homes but away from distraction where a woman was comfortable. These places were like under the tree near the main living house. In cases of children’s distraction, some sweets were given to keep them busy and away from their mothers.

During focus group discussion, it was necessary to have separate groups of men and women to avoid more vulnerability of women. Thereafter, combined groups of men and women were organized for general clarification of issues. This was done in order to allow freedom of speech, as it was pointed out by Lyon and Trost (1981), cited by Huvisa (2003) who observed that participants often feel secure in the company of people who share similar opinions, attitudes and behaviour. In this case women were more comfortable in the group of fellow women. Culturally, Kurya men and women cannot discuss issues of GBV such as sexual violence in the public.

3.11 Summary

The chapter describe the study area in terms of its geographical location, boundaries and administrative set up. This is important because it gives the reader an overview of the study area. It was important to discuss the socio-economic and cultural aspects of the inhabitants in the study area, because it gives an overview of some of the cultural issues exacerbating GBV and inhibiting women empowerment. Similarly, the socio-economic aspects give the first hand information on the type of activities performed in the area as one of the socio-economic empowerment process.

Furthermore, the chapter has narrated various appropriate methods and approaches used to get the intended information. The aim was to obtain sufficient data for the analysis and drawing conclusions according to the objectives of this study. Given the sensitivity of the issues in the study, ethical considerations were also discussed in order to ensure confidentiality and informed consent from the district, ward, and village leaders and individual respondents. This was done to avoid more vulnerability and subsequent repercussions to women involved in the study and the community at large.

CHAPTER IV

RESULTS AND DISCUSSION

4.1 Overview

This chapter presents the results and discussions of the data analysed from the study. The chapter is divided into six sections. The first section presents the characteristics of the respondents who participated in the study. In this section, social and demographic factors such as age, marital status, marriage types, religion, education and occupation are presented and discussed. The second section describes the qualitative information on GBV and women empowerment. The third section discusses the status of GBV in the area in which various types of GBV practiced in Serengeti District are narrated. The fourth section discusses the attitude of respondents towards GBV, while the fifth section focuses on the responses of women towards GBV. The last section looks into the association between GBV and women empowerment.

4.2 Socio-Demographic Characteristics of Respondents

Socio-economic characteristics of the respondents discussed here focused on marital status, the type of marriage, and age of the respondents. Others include years of schooling, occupation, age at first marriage and religion of the respondents.

4.2.1 Marital status and types of marriages

In this study majority (71.6%) of the respondents were married and only (7.9%) of the respondents were divorced. During focus group discussion, it was found that married women are culturally respected among the respondents (Kurya). On the other hand, unmarried women were shunned by the community and regarded as prostitutes. Therefore, every woman would desire to be married whether as a second or third wife. Findings as

indicated in Table 12 reveal that the percentages of the respondents who are separated from their husbands and those who are cohabitating is the same that is 4.2%.

Table 12: Social demographic characteristics of respondents N=239

Marital status	N	%
Married	170	71.6
Widowed	28	1.7
Single	19	7.9
Divorced	10	4.2
Separated	11	4.2
Cohabitating	1	0.4
Total	239	100.0
Type of marriage		
Monogamy	134	56.1
Polygamy	78	32.6
Never married	15	6.1
Women to women marriage (<i>nyumba ntobhu</i>)	12	5.2
Total	239	100.0

Similarly, data in Table 12 indicate the types of marriages practised among respondents. About 56.1% were monogamous and 32.6% polygamous. The risks of marrying one wife as indicated by male respondents include lack of someone to take care of the husband in the absence of one wife. There are also motives behind polygamous marriage which includes a source of prestige for men. Polygamists are regarded as “real” men. A group of men discussants added that marrying more than one wife made life enjoyable because women compete for love from the husband. Also some men prefer marrying more than one wife because they regarded wives as working human power for production purposes. Other reasons given by men to support polygamy, was unproportional number of males to females in the country. They argued that there are more women than men in the country. This argument is supported by evidence from the national census of 2002 which showed that the ratio of men to women was 49:51 (URT, 2003). Men also argued that polygamous practices helped to satisfy women’s sexual needs and ensured continuity of the

reproduction process. The study results in Table 12 also show that 5.2% of young women were married to fellow women in the study area, this is a type of marriage practiced by women in Serengeti and Tarime Districts (see also section 4.3.1).

4.2.2 Age

The mean age of the respondents was 33 years while the minimum and maximum ages were 15 and 82 years respectively. The minimum and maximum ages of respondents indicate that the study cuts across all age groups ranging from those not married to the very old ones. For example, the largest proportion (41.7%) of women were at the age of 25-34 years old implying that majority of the respondents were young and in their active reproductive age, where GBV is expected to be high (Fig. 4).

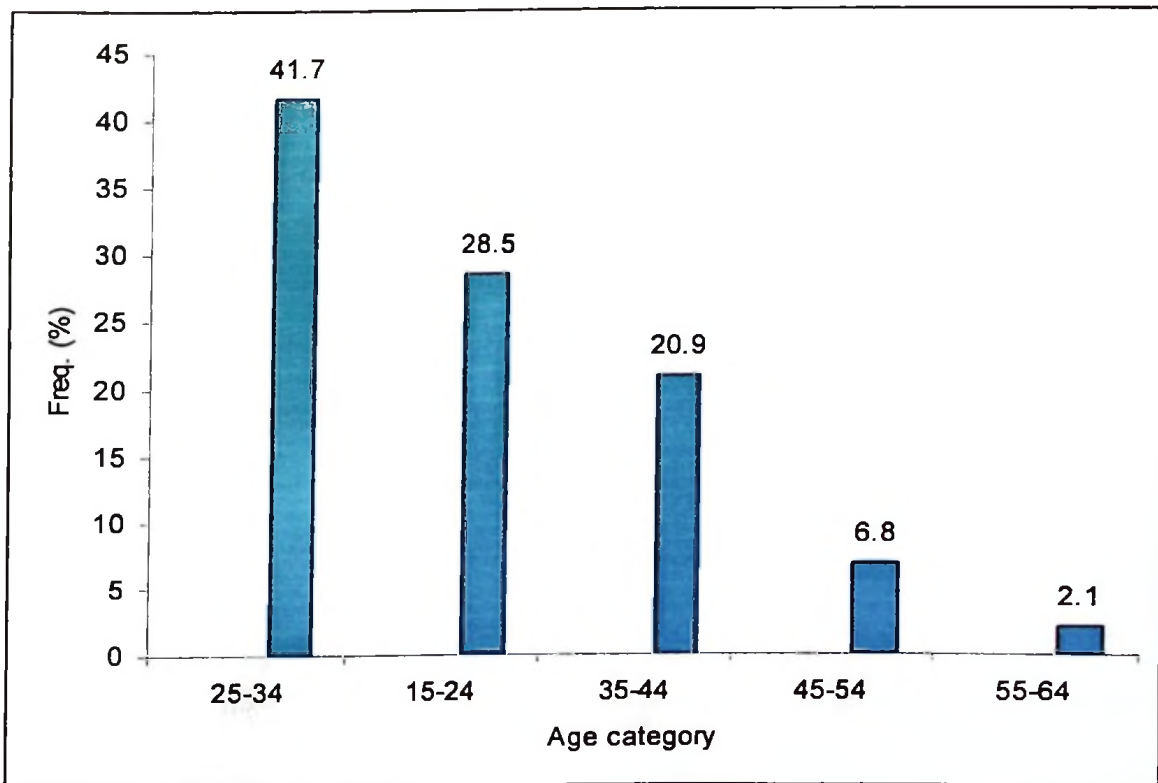


Figure 4: Distribution of respondents by Age category

4.2.2.1 Age differences between husband and wife

The findings as indicated in Table 13 show the age differences between wife and husband. Nearly a half (48%) of the respondents was married to husbands who were between 15-20 years older than these women's age.

Table 13: Age differences between husband and wife N=239

Number of years of the husband above his wife	n	%
15-20	114	47.5
10-14	60	5.0
7-9	30	12.5:
3-6	30	12.5
1-2	5	2.5
Total	239	100.0

The mean age difference was 15 years indicating that the majority of women were married to older men. It was assumed that big age differences might also explain the differences in perceptions between men and women towards life and this account for the high rate of GBV.

4.2.2.2 Age at first marriage

The findings from the study show that majority (69.0%) of women interviewed were first married at the age of 15-18 years (Fig. 5), which is below the estimated age of 19.8 years for Mara Region (URT, 2006). Further, the study shows that 24.0% of women were married at the age between 19-21years. These findings conform to the observations by TGNP (2004) which reported of teen pregnancies and early marriages leading to the expulsion of many young girls from school. However, in the Tanzanian Marriage Act of 1971 the legal age for consent in marriage is 15 years, which is contrary to the constitution of Tanzania. The constitution states that maturity age of 18 years give the right to a man or woman of choosing leaders and decide on the type of life they would want to live. That is

why there have been campaigns to increase the legal age for consent in marriage for girls in order to allow more time for them to mature and complete at least their primary school education.

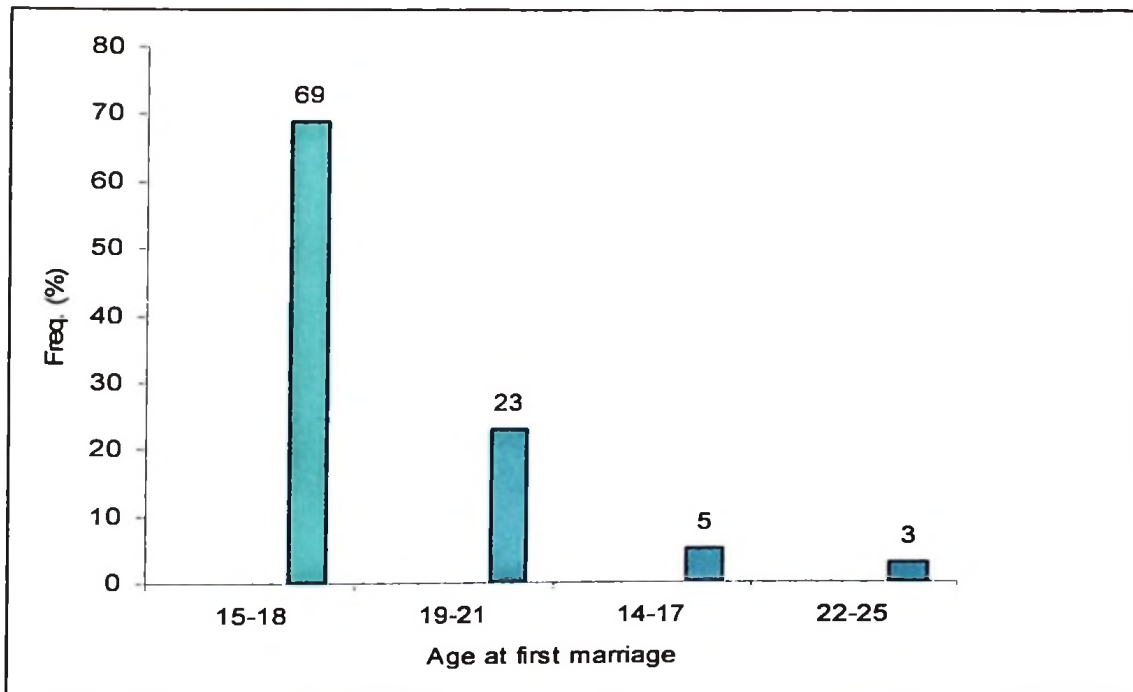


Figure 5: Age at first marriage

4.2.3 Years of schooling

The average number of years of schooling for women was 6.6. The minimum and maximum years of schooling were zero and 12 respectively. The data in Table 14 indicate that 73.9% of women had completed primary school level of education in line with an increase in enrolment for primary school education in Tanzania in which half of the girls accounting for 48.6% were enrolled in 2002 (URT, 2005d). However, about 11% of the schooling girls did not complete primary school education probably, because of teen age pregnancy and early marriages.

The results also show that a few (6.7%) had no access to secondary school education due to various reasons. The results also indicate that 5% of women had no formal education. This is likely to slow the empowerment process in the area, as many women are unable to acquire knowledge through reading various sources of information through various media such as newspapers. Furthermore, lack of formal education would affect their level of involvement in decision making on various family matters. Additionally, low education might limit the women from accessing some of the legal institutions for actions against GBV perpetrators. There was also another small proportion (2.9%) of female respondents who had not completed secondary school education at the time for this study. This aspect was also attributed to teenage pregnancies and early marriages among other reasons.

Table 14: Respondent's years of schooling (N =239)

Number of years	n	%
Primary school (7 years)	176	73.9
Less than 7 years in primary school	26	10.9
Secondary school	16	6.7
Zero years of education	12	5.0
Less than four years in secondary school	7	2.9
Standard 8	2	0.6
Total	239	100.0

4.2.4 Occupation

Results show that majority (64%) of women were farmers. It was further noted that selling of grains like maize and other staples was the major source of income for majority of women. Crop and livestock keeping accounted for about 30.6% of the respondent's occupation in the study area (Table 15). Since women were encouraged to perform the non farm activities to supplement their family incomes, they were asked to mention various non-farm activities practiced in the area. The results indicated that only 2.1% of the women were self-employed, while 2.1% of the respondents were engaged in petty businesses such as food vending, selling of milk, vegetables, fish and retail charcoal

selling. In addition women were sometimes involved in casual labour especially during the time of food insecurity. The respondents reported that majority of the self-employed women were those who had never been married, widowed or divorced. Married women rarely engage in such activities because their husbands would not allow them to do so because of jealousy.

Table 15: Main occupation of respondent N=240

Main occupation	n	%
Crop producers	154	64.0
Crop and livestock keeping	72	30.0
Self employed	5	2.1
Doing petty businesses	5	2.1
Livestock keepers	4	1.8
Total	240	100.0

4.2.5 Religion

In terms of religion, majority (90.8%) of women were Christians while 7.1% of them had no attachment to any denomination (Table 16). The respondents were asked to say whether or not religion influences the marriage institution and to explain how and where it does. They reported that although Christians believe in the myth of creation that Eve was taken from Adam's ribs, some of the committed Christians also believed that women must be under the control of men. This concurs with what Lentz (1999) study on the relationship between patriarchy and religion which reveal that women in patriarchy religious communities were ordered to respect men and hence justify GBV.

Table 16: Distribution of respondents by their religion N=240

Type of religion	n	%
Christians	218	90.8
Do not belong to any denomination	17	7.1
Moslem	4	1.7
Traditional religion	1	0.4
Total	240	100.0

4.3 Qualitative Information on the Status of GBV

One of the specific objectives of this study was to identify the status of GBV in the area. This was addressed through both quantitative and qualitative data collection. The quantitative data was collected through questionnaire survey while the qualitative data were mainly drawn from FGDs and in depth discussions. The information collected based more on the forms of GBV, the determinants and cultural practices exacerbating GBV. Also information on life stories was collected through in-depth discussion.

4.3.1 Forms of GBV

In the beginning of every discussion, the discussants provided the meaning of GBV which was satisfactory to all the discussants. Under the guidance of the researcher, gender based violence was given an operational definition as a form of violence occurring to women and girls. Such forms include wife battery, deprivation from access to and control over productive resources, outdated cultural practices prevalent in the public or private life of women and girls. Further clarification on common couple and patriarchal terrorism was given (Johnson, 1995; Johnson, 1999; Anderson, 2002; McHugh, 2005; Anderson, 2005). For instance some of the GBV forms such as wife battery were classified as patriarchal terrorism while the normal verbal abuse was termed as common couple violence. The respondents admitted that both forms of GBV were practiced in the area.

a) *Wife battering*

The respondents were requested to comment to the prevailing famous myth in Serengeti District that wife battering is a sign of love. Women discussants in all the eight villages reported that the myth was not true. They argued that beating may result into injuries and permanent disabilities, therefore nobody enjoy being beaten. On the other hand, when asked to clarify the myth; some male discussants admitted that normally women enjoy

being beaten because it is associated with jealousy, assuming that men must beat their wives to prove that they love them. Therefore, men use false myth in order to justify GBV. Further, men should also prove to the society that they are real men by beating their wives. Men use such myths to justify GBV against women. This is inline with Kim *et al.* (2007) who observes that in some of the African cultures, men are respected by the society by being able to exercise power over their wives through beating. Men are honoured as being able to discipline their wives and keep their homes in orders. Therefore, abusive men are valued in the community and violence is normalised.

In one of the FGDs, men related beating a woman to beating a pair of oxen during training in the field by saying “*for an oxen to be able to plough properly, the trainer must have a stick in his hand, likewise, a woman without a stick cannot respect and act according to the husband’ commands*”. Another man added “*Most women are beaten because of laziness and misuse of resources; it is a way of disciplining them*”. Surprisingly, some of the aged women regard battery as part of their culture and they contribute to its perpetuation. When asked the reasons for wife battering, they insisted that “*the husband is culturally allowed to punish his wife as long as she is not obedient*”.

In case of severe injuries, women give false information to the police in order to get the Police Form Number 3 (PF3) which is a necessary document for an injured person to be treated at the hospital. One of the key informants at the police office reported that the victims of wife battering normally give false statements like “I was kicked by a cow during milking or I fell on the slippery bathroom”. It was therefore envisaged that women lie in order to protect their marriages. The respondents explained further that high poverty levels among women and the stigma attached to divorced women are among the factors pushing women into tolerance of violent relationships. When asked on the determinants of

wife battery, female respondents indicated that suspicion of infidelity by men and even women was one of the reasons. They further revealed that men feel proud of having extra marital relationships especially with concubines commonly known as *nyumba ndogo* literally meaning “small house” or *ekinyambareka* or *kitungo* in local Kurya language. The woman’s probing husband’s extra marital behaviour triggers more violence from the husband. Other determinants mentioned include failure to accomplish their assigned gender roles, arguing back and asking for explanation about the use of family income.

b) *Early marriage*

During in-depth discussions, one of the discussants reported that she became pregnant while she was at primary school. Her parents forced her to marry an aged man who was to pay these parents some cattle as bride price. She said, “*When I resisted, my parents challenged me that no young man would marry me. I deserve marrying an old man.*” She was seen as an outcast in the society and no one in the family supported her. This is in line with Fawole (2008) who observes that some of the parents/guardians take their daughters from school and arrange marriage to solve some financial problems at home.

During in-depth discussions, one of the female discussant’s life histories revealed how her marriage was arranged while she was still in her mother’s womb. She said:

“When my mother was heavily pregnant, she had to look after a big herd of cattle in the field. One day she failed to hold a calf, which was born in the field because of pregnancy. There was an old man who assisted her to carry it on her way home. The old man told her that if she gave birth to a baby girl, he would marry the girl to his grandson. If it was a boy then the boy would be his friend. When I was born and grew up, the old man followed up and made all the required traditional arrangements for me to marry his grandson. At the age of 5 to 7 years, my mother used to tell me to go to the old man’s family to spend a day

and would return home in the evening. After completing my primary school education, which was compulsory, I asked my parents to allow me to re-sit for standard seven examinations because I was very much interested in further education. My parents refused to buy me school uniforms instead they ordered me to go to the old man's family.

My prospective fiancé went for further education in a vocational school in Morogoro for one year. I stayed with my mother-in-law until I attained maturity (first menstruation). When my fiancé completed vocational education, my father-in-law ordered me to join his son's house and start independent life as husband and wife. I was shocked, but since I knew our culture, I had to accept the man who was not of my choice. We managed to bear three children. Thereafter, he abandoned me and the children".

After marriage, young mothers normally face double violence after being forced by their parents to marry men who are not of their choice. They expect love from their husbands; instead, they face other forms of domestic violence such as wife battering, deprivation of basic necessities for the family and abandonment. Adolescent mothers (with little or no formal education) depend upon their husbands economically. If the husband fails to provide for the basic needs, the wives have to look for other means of livelihood; one of which is commercial sex, which is often unsafe. This action put them at risk of acquiring HIV/AIDS as noted by Lugalla (1999) and Kayunze (2008). When they negotiate a divorce, the woman's parents would not allow separation because of the bride price they had received. The only alternative is submission to all forms of violence throughout their marital relationship. These findings concur with what December (1999) calls forced tolerance in a violent relationship due to poverty among African women.

c) *Marriage between two women (nyumba nthobhu)*

This is the type of marriage commonly practiced in Serengeti and Tarime District in Mara region by barren women and those who gave birth to girls only. Men married to such women, have to re-marry and abandon their first wives. In so doing, these abandoned women have to marry young girls for the purpose of getting children for the barren women as well as having sons for those with girl children only. The woman must have enough cattle to pay bride price to the girl's parents. She must ask for a man from her clan, to serve as a husband for the young girl who will be regarded as her daughter in-law. Therefore, from this point of view, there is no real marriage between the two women as the woman who pays for the bride price has to find a man from her clan who would act as a husband for the young girl with whom she can bear children. Marriage is defined through bride price paying and not intimate relationship between the two women.

The man is chosen for reproductive purposes only. The children belong to the old woman and use her name as their family name. The woman would be responsible for taking care of the young woman and children as well. The man chosen must have his own family and should have no control over the young woman. Apparently, young women in such marriages are free to have sexual relationship with other men of their choice. Sometimes they divorce and leave the old women alone; in rare cases they conspire with their boyfriend to kill the old woman in order to inherit the available resources. During focus group discussion, participant reported that in most cases after the divorce, the young women re-marry as second or third wives. Such types of marriages are believed to contribute to the spread of sexually transmitted diseases including HIV/AIDS. On the other hand, participants reported that old women who marry young girls are unable to take care of these young girls. Surprisingly, during in-depth discussions, it was revealed that

this type of marriage was preferred by women because it constitutes no GBV from an intimate partner.

Marriage between two women is regarded as being violence to an old woman, a girl married to the old woman, the selected husband and children born in such type of relationships. For the old woman, this type of marriage is regarded as violence because she is forced by the culture to marry as the husband, and the community at large scorn her since she either cannot bear children or give birth to baby girls only. Similarly, it is violence to the young woman because she is denied her freedom to marry the man of her choice. Furthermore, she is responsible to raise her children as a single parent, when the old woman is too old to care for the family. This increases single parenthood and poverty among women in the society. It is also some kind of violence and unfair to the chosen man (husband for the young woman) because he reproduces children not belonging to him and enters intimate relationship with someone who is not of his choice. It is a form of violence to children born from this type of marriage as they lack parental care from their biological father.

d) Female genital mutilation (FGM)

The respondents revealed that FGM is still practiced in the area and that FGM serves as a promotion exercise for the girls that they are ready for marriage. This is done because girls are regarded as sources of income in the form of bride price. Further, they ascertained that FGM is a sign of maturity. It was also reported that those who are not mutilated for whatever reason, are not married unless they move away from the area. The social stigma attached to those who are not mutilated is another motive for girls to seek to be mutilated. While gender activists and human rights proponents fight against FGM as brutal and violate basic human rights, girls in Serengeti District wish to be mutilated. Other

motivating factors include traditional ceremonies after the mutilation process in which gifts are given to these FGM graduates.

e) Widow/widower cleansing

Widow/widower cleansing is a cultural ritual which is practiced after the death of the husband/wife. The respondents reported that the process of ritual cleansing is done through sexual intercourse with someone else who is not known to the widow or a close relative of the deceased husband. Although both men and women do ritual cleansing, it is more prominent among women than it is for men. Since women are culturally not allowed to propose for sexual relationship to men; the widow must travel far from their home, which would normally be areas where there are a lot of men. In most cases it would be the beaches of Lake Victoria at fishermen's work stations and in the mining areas. It is culturally agreeable that the act of cleansing through sexual intercourse should be performed once. After the act, the widow must leave the area immediately. These findings compares with the one in Malungo's (2001) study which reveals that sexual penetration is a way to cleansing widows in Zambia.

Further, respondents revealed that the process of widow cleansing is a bit more complicated among the Luo. This is because if a widow dies before she is cleansed, then it is necessary that a sexual act be done to the dead body before its burial. Any man from the clan should be approached and paid money (200 000 Tshs) and one bull for cleansing the dead body. Two old women from the clan should witness the act and prove that the job has been done as required by the traditions. Since the process is complicated and costly, widows are encouraged to undergo ritual cleansing soon after the death of their husbands.

f) Polygamous system

Polygamous system is not one of the GBV forms mentioned by the respondents, but it was reported to be one of the factors exacerbating GBV. From focus group discussion, it was revealed that before marrying younger women, Kuryan men must ask permission from the first wife who is culturally known as *Nyakisaho*. The name indicates high values to the first wife by the husband and she is given all the administrative power in the house while the husband approves all the decisions she makes. In case of any public event the husband must be accompanied by the first wife. She acts as an advisor to the husband and she is the one who arranges marriage between her husband and the second wife by negotiating the amount of bride price to be paid. She also selects cattle for the bride price payment. In this regard, the first wife (*nyakisaho*) is culturally forced to allow the husband to marry other women. It was noted that majority of men prefer marrying more than one wife, because women normally compete for love. Although the co-wives compete for love from the husband, it cannot stop the husband from mistreating them. This argument is consistent with the findings by McCloskey *et al.* (2005) which reveal the prevalence of high events of violence within implicit and explicit polygamous types of marriage due to extramarital relationships of the husband.

4.3.2 Determinants of GBV

Failure to accomplish gender roles which is culturally assigned to women was mentioned as one of the causes for wife battery. Therefore, workload distribution assessment among men and women was done indicating differences in time allocation on daily activities during the rain and dry seasons. In addition, the time spent and who fetches water for domestic use was also assessed.

4.3.2.1 Gender roles at household level

Gender roles distribution was assessed by asking participants in FGDs to list down the activities performed from the time they wake up to the time they go to bed. The summary of the daily activities performed by men and women during the rainy season is summarized in Table 17.

Table 17: Daily activities performed by men and women during the rain season (March to May)

Time in hrs	Women's schedule of activities	Time used (hr)	Men's schedule of activities	Time in hrs	Time used
5.00-6.00am	Wake up and clean the house and the surroundings, Milking of cows	1	Wake up and Prepare for oxen ploughing	5:00am-5:30am	30min.
6.00-6.30am	Prepare children to school	30min.	Oxen ploughing	5:30-8:00am	2.30
6.30-10.00am	Work in the field and fetching firewood	3.30	Taking breakfast mainly porridge	8:00-8:30	2.30
10.00-6.30pm	collecting water, Lunch preparation, Having lunch and washing dishes	2.30	Land clearing and preparation	8:30- 11:00	2.30
6.30-1.00	Resting	30min.			
1.00-5.30pm	Looking after cattle in the field	4.30	Looking after cattle while the wife is cooking	11:00-12:30	1.30
5.30-6.30pm	Milking cows	1	Charting with friends (drinking local brew)	12.30-6:00	5.30 resting
6:30-9:00pm	Preparing water for the husband to take bath and preparing dinner	2.30	Inspecting the herd from the field	6:00-6:30pm	30min.
9:00-10:00pm	Having dinner Cleaning of dishes	1	Waiting for dinner	6:30pm-9:00pm	2.30 resting
Working hours		16.30			8
10:00-05:00	-sleeping	7		9:00pm-5:00am	8
Resting in day time		30min.			8hrs
Total		24hrs			24hrs

It was revealed that women had more workload than men because women had only a half of an hour of resting in the day time as opposed to men who had 8 hrs of resting. While women had 16.30 hrs of working in the rain season, men had only 8 hrs. The respondents in the focus group discussion pointed out that women had little time of resting because they are overworked during the daytime, resulting into too much stress and exhaustion.

This make them to lose sexual desire which lead to more violence from the husbands. In addition to heavy domestic chores and all the reproductive roles, women were also responsible for the productive roles such as farming, looking after cattle and milking. During survey, it was observed that some of the lactating mothers with babies on their backs were looking after herds of cattle in the field along the road. Workload distribution in the dry season was also studied and the results are presented in Table 18. From these results there were slight differences in workload distribution among men and women in the dry season. The working hours for women in the dry period decreased from 16.30 to 14.30 hrs as opposed to those of men which decreased from 8 hrs to 7 hrs. The results show that generally women are overworked in all seasons.

Table 18: Daily activities for men and women during the dry season (June to September)

Time in hrs	Activities done by women	Time used (hr)	Activities done by men	Time in hrs	Time used
5.00-6.00am	Wake up, clean the house and the surroundings	1	Wake up for inspection of the surroundings	5:00am-5:30am	30min.
6.00-7.00am	Preparing children to school	1	Go back to sleep	5:30-8:00am	2.30 resting
7.00-8.00am	Preparing breakfast (porridge)	1	Taking breakfast (porridge)	8:00-8:30	30min.
8.00-9:30pm	Fetching water	1.30	Look after cattle	8:30- 12:30	4
9:30-11.00	Resting	1.30	Charting with friends, drinking local brew	12:30-6:00pm	5.30 resting
11.00-12.30	Milking of cows	1.30			
12:30-1:30	Lunch preparation	1	Inspecting the herd of cattle	6:00-7:00pm	1
	Cleaning dishes				
1:30-5.30pm	Looking after cattle in the field	4			
5:30-7:00pm	Preparing water for the husband to take bath and dinner	1.30	Waiting for dinner	7:00-8:30:00	1.30 resting
7:00-9:00	Having dinner	2	Having dinner	8:30-9:00pm	30min
	Cleaning dishes				
working hours		14.30			7hrs
9:00-05:00	Sleeping (hrs)	8		9:00pm-5:00am	8
	Resting in day time	1.30			9
Total hrs		24 hours			24 hours

It was assumed that through empowerment, men would be engaged in performing some of the physical reproductive roles which were culturally and primarily done by women. In order to verify this assertion, workload distribution on fetching water for domestic use among men and women was examined. It was obvious from the findings as indicated in Fig. 6 that fetching water for domestic use was mainly done by women and girls. Married men very rarely fetch the water. In addition, it was revealed that boys fetched water for commercial purposes and not for domestic use.

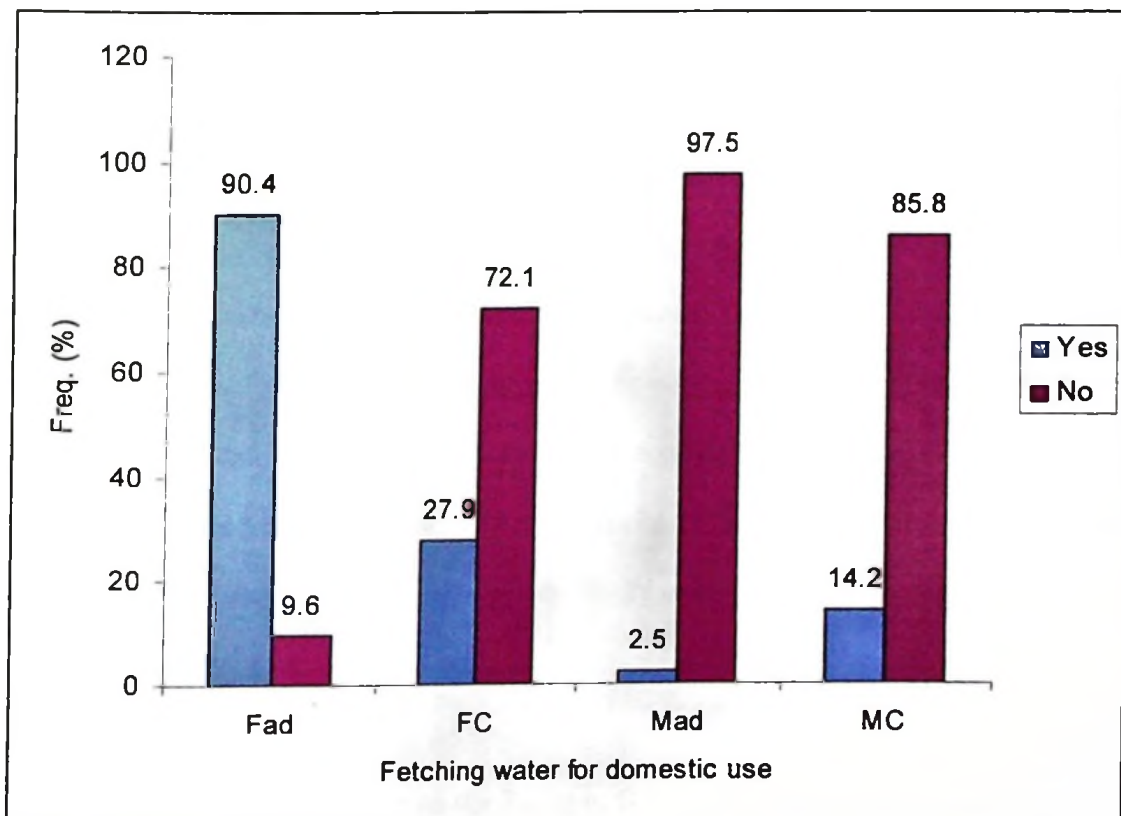


Figure 6: Fetching water for domestic use by sex

Key: Fad-Female adult

FC-Female child

Mad-Male adult

MC-Male child

4.3.3 Explanation about women empowerment

When asked whether or not there were any empowerment programme targeting women in the area, the respondents revealed of there being no empowerment programme apart from some of the development actors who visited them and promised some loans for income generating activities. The respondents ascertained that they would usually be asked to open bank accounts. However, development actors from Mugumu town never fulfilled their promises of assisting the people more specifically women.

The respondents revealed that the unfulfilled promises by the development actors increased risk of more GBV among women. Those who were granted permission by their husbands to participate in developmental group activities faced dire consequences. They further explained that sometimes men would associate regular meeting of women in development groups with infidelity. Similarly, the respondents also reported that some men were jealous. Therefore, the majority of women that would participate in groups would be those who are divorced/separated or single. Married women would rarely participate in development group activities. Generally, the respondents from all the 8 villages reported of having had few opportunities of working in development groups which would have otherwise improved their family income and give them the opportunity to access information.

4.4 Quantitative Information on the Status of GBV in the Study Area

Quantitative results of the status of GBV were given in this section. It was revealed that almost all women in the study area experienced and or witnessed GBV at different stages in their life time. Such forms of GBV include FGM, early marriage and pregnancies, expulsion from home due to early pregnancies and unequal division of gender roles. More than a half (55.2%) of the respondents admitted of witnessing violence during childhood

(Fig.7). They acknowledged of having witnessed quarrels between parents/guardians or from the neighboring families. Children in such relationships were usually the first victims. This concur with the available literature supporting the argument that children who witnessed or get involved in violent practices during childhood are likely to become future victims or perpetrators (PIP and CHANGE, 1999; Pickup *et al.*, 2001; Whestone, 2001; Pineda, 2005; Anderson, 2005; McHugh, 2005; Russo and Pirlott, 2006; Goussinsky and Borochowitz, 2007).

The evidence from this study indicates that majority (72.8%) of the respondents experienced GBV in their adulthood. Women respondents mentioned some of the determinants for GBV in the area such as arguing with the husband, not preparing food in time, not taking care of cattle, delaying milking of the cows, questioning the husband about family money, going somewhere without permission from the husband, refusing making love with the husband, suspected of infidelity and questioning the husband about his extramarital affairs. The findings are inline with the observations made by Ellsberg and Haise (2005).

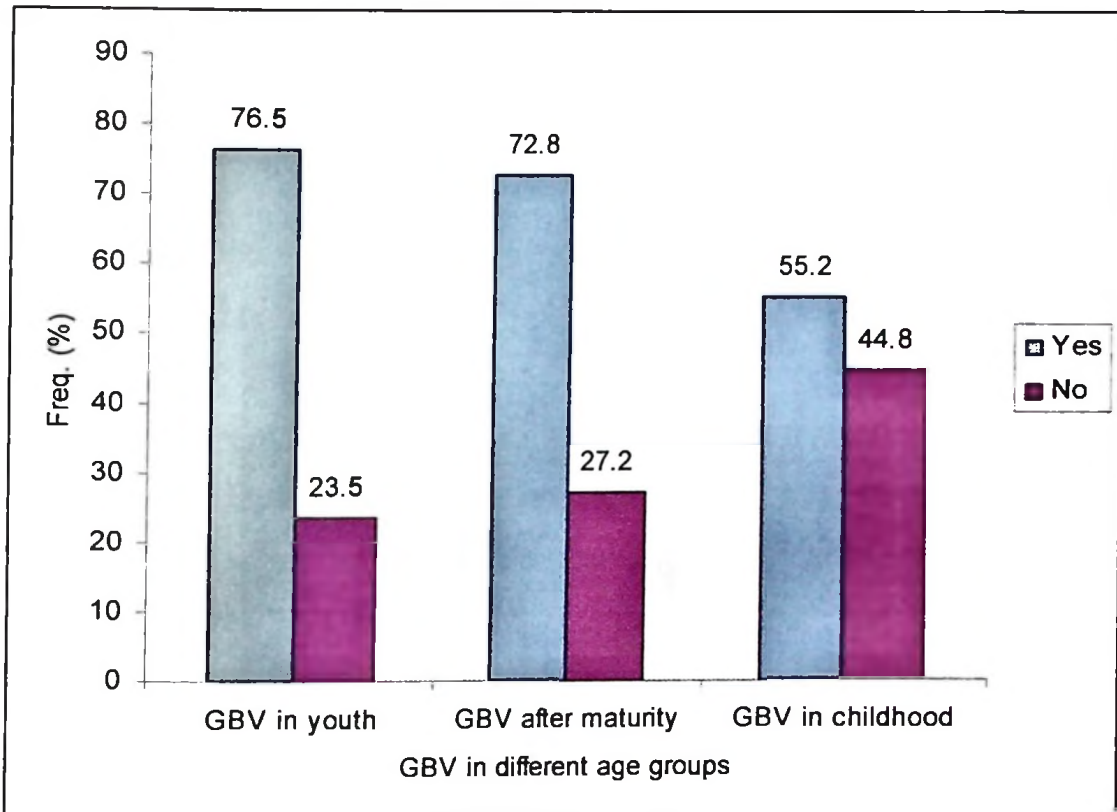


Figure 7: Women experienced GBV during childhood, youth and maturity

4.4.1 Forms of Violence practiced in Serengeti District

4.4.1.1 Wife battering

The study results as shown in Table 19 indicate that 85.8% of the respondents had experienced wife battery. Female respondents revealed that men were naturally cruel and that they consider wife beating as part of their culture. Similar findings have been reported by Aboud (2004) which show that 99% of women in Manyara and Arusha experienced domestic violence in the form of wife battering. Furthermore, the findings conform to the cultural based theory which categorizes wife battery as patriarchal behaviour and not cultural behaviour (Lindhost and Tajima, 2008).

Table 19: Forms of violence practiced in Serengeti District (N=239)

Form of GBV	Yes (%)	No (%)
Wife battery	85.8	14.2
Early marriage	61.1	38.9
Deprived from acquiring basic needs	61.1	38.9
Marital rape	53.1	46.9
Female genital mutilation (FGM)	44.6	55.4
Lack of right for inheritance	35.1	64.9
Widow cleansing	34.0	66.0
Hit during pregnancy	32.9	67.1

4.4.1.2 Depriving women from basic necessities

Depriving women of basic necessities by their husbands was one form of GBV practiced in the area. About 61.1% of the respondents testified of being deprived of basic needs like food, clothing and other requirements (Table 19). This implies that women were dependent on their husbands economically. Traditionally, women are the caregivers for the family and men control the family income. Therefore, they must ask for money from their husbands for the daily nurturing of the family. Similar observations were made by Erman (2002) who reveal that economic dependency of women reduces their decision making power and self esteem. These are important elements for the elimination of GBV among women. This study contributes to the extension of knowledge on GBV and the strategies of addressing it, as borrowed from Marxist feminist theory which regards women as dependants of men and hence endure from economic violence. Similarly, the gender role conflict theory stipulates that GBV is an outcome of men's failure to meet gender norms of masculinity where men are anticipated to be the bread winners of the household.

The results from focus group discussions revealed that the main economic activity performed by women in the study area is farming. In most cases, women are responsible in cultivating food crops while men cultivate and prefer dealing with the cash crops.

The only cash crop grown in the district is cotton, which is not doing well in some of the seasons. Therefore, selling of the food crops is the only alternative source of income for women. Similar findings come from Njuki (2001) in the study on gender roles in agroforestry which show gender imbalances in labour provision and ownership of cash and food crops in Kenya whereby women were found to dominate in food crops while men were found to dominate cash crops. Male respondents reported of having had other sources of income such as selling of livestock. In addition, men were reported to control the income obtained from the main sources of income while women remained economically dependent on men. Upon being asked to explain why they do not involve their wives on the family income, male respondents reported that women could easily misuse the money.

4.4.1.3 Female Genital Mutilation (FGM)

The study findings as indicated in Table 19 reveal that 44.6% of the respondents admitted that FGM was still practiced. The findings is in-line with the ones from Aboud (2004) study which show that FGM is practiced in 10 out of 26 regions in Tanzania and the overall prevalence was found to be 18%. Aboud (2004) also revealed further that some individual regions like Manyara had a prevalence of up to 81% apart from there being some effort to stop FGM by NGOs, CBOs, gender activists and government institutions. Upon being asked as to why FGM was practiced, the female respondents said that FGM was their cultural identity and was used as a sign of maturity. They added that mutilated women are loyal to their culture since FGM is practiced by women as predetermined by the cultural based theory. Although FGM is practiced by women, the motive behind is to safeguard men's interests because it is believed that mutilated women are not sexually active and hence they remain loyal to their husbands.

4.4.1.4 Widow/widower cleansing

The results from the study as indicated in Table 19 indicate that 34% of the respondents informed that widow cleansing is practised in Serengeti District. After the death of the husband or wife, the widow/widower is regarded as culturally unclean. According to the respondents if the widowed/widower is not culturally cleansed, other individuals from the same clan may suffer from the same disease and finally die. In order to get rid of this evil, one must be cleansed as explained in section 4.3.1 subsection (e) of this thesis. Similar findings by Malungo (2001) in Zambia showed that a widow who is not cleansed is generally regarded as an outcast and as it is believed, she can also become mad.

4.4.1.5 Marital Rape

Marital rape commonly known as domestic rape was defined to the respondents as any unwanted sexual acts by a spouse or ex-spouse, committed without the consent and/or against a person's will. After defining it, they made such statements as like "I have never heard a husband raping his wife". This is probably due to the assumption that a man cannot rape his wife in both developed and developing world (December, 1999). However, more than a half (53.1%) of women supported the statement that there was marital rape among women in the area (Table 19).

4.4.1.6 Getting hit during pregnancy

Results as presented in Table 19 show that one third (32.9%) of women indicated that they were hit by their husbands during pregnancy. Other researchers elsewhere have reported that GBV intensify during the first pregnancy in some of the families (Kalichman *et al.*, 2007; Schuler *et al.*, 2008). This is probably due to hormonal changes that lead to a change in behaviour of women during pregnancy. There are multiple health problems including foetal and maternal death, retarded growth of the child, premature labour,

miscarriage, foetal distress and pregnancy bleeding, which are reported as resulting from violence.

4.4.2 Frequency of occurrence of some of the GBV

The respondents were also asked to report the frequency of occurrence of some of the common GBV in the area. Accordingly wife battering was reported by the biggest group (16%) of respondents; hence it was the most frequently practiced form of GBV (Table 20). Deprivation of basic needs for the family was mentioned by 15.4% of respondents and reported as the second highest form of GBV followed by early marriage (13.3%). This information confirms results given in section 4.4.1 of this thesis as indicated in Table 19.

Table 20: Frequency of occurrence of some forms of GBV

Forms of GBV	n	Sum	%
Wife beating	217	872	16.0
Deprived basic necessities	208	837	15.4
Early marriage	164	725	13.3
Marital rape	145	693	12.7
FGM	170	685	12.6
Married to fellow women	151	623	11.4
Lack of inheritance of resources after the death of husband	172	581	10.7
Forced sexual intercourse by in-laws	138	430	7.9
Total		5446	100.0

4.4.3 GBV occurrence over a period of time

The respondents were asked to recall GBV events in a given time. Study results in Table 21 show that nearly one third of women (28.3%) were able to recall GBV events which occurred in the past seven days as opposed to the events which occurred in the past one year. For instance, women recalled events such as being expected by their husband to ask for permission before doing anything (Table 21). This is inline with the findings by Hamby's (2005) study which indicated that the problem of forgetting GBV events leads to false negative reporting. The findings also show that women must be instructed by their

husbands before doing any thing. The results concur with what December (1999) and Pickup *et al.* (2001) noted that women are regarded as children and therefore men must guide them. It was further revealed that women were insulted by their husbands (21.3%) and humiliated in front of people (17.9%). Such acts are likely to make women suffer from psychological problems such as low self esteem, lack of confidence, feelings of guilt and shame.

Table 21: Respondent's response on GBV occurrence over a period of time n=240

Type of GBV	One week %	Past 6months %	Past 1 year %
Woman must ask permission	28.3	22.1	20.8
Insulted her husband	21.3	15.8	17.2
Restricted movement	19.6	16.3	19.2
Humiliated her in public	17.9	10.8	15.0
Intimidated her for a purpose	17.9	13.3	15.8
Restricted speech with men	17.5	17.1	12.9
Restricted from seeing friends	15.4	12.5	17.1
Threatened to hurt	14.2	10.0	11.7

4.5 Gender Based Violence Index

In order to analyse further the status of GBV in the study area, an index was developed using the six forms of GBV as explained in section 3.6.2.1 of this thesis. Respondent's responses were recorded as "Yes" for those who experienced GBV and "No" for those never experienced GBV.

For each statement, a value of '1' was assigned for the "Yes" response and '0' for the "No" responses. The scores and percentages of GBV index are summarized in Table 22. GBV was categorized into low, medium and high. Therefore, the lowest score was from 0 to 2.9, while medium score was 3.0 and those with high level of GBV scored from 3.1 to 6. The scores were converted into percentage as indicated in Table 22. Almost a half (47.7%) of the respondents was in the high category and that all forms of GBV used to

formulate GBV index were practiced in the area. Few (24.3%) respondents experienced the medium level while almost a quarter (28%) experienced low level of GBV. The mean index was 3.7 which is categorized as high level of GBV suggesting that GBV is high in the area.

Table 22: Index of GBV and their categorization (N=239)

Score	n	%
1	31	12.5
2	38	15.5
3	59	24.3
4	39	16.7
5	40	18.0
6	32	13.0
Total	239	100.0
Mean index 3.7		
Categorization of GBV		
Low	67	28
Medium	58	24.3
High	114	47.7

4.5.1 GBV and social demographic factors

The obtained GBV index was used as a dependent variable to assess the relationship of socio-economic and demographic variables of the respondents. These include: age of the respondents, education level, religion, marital status, type of marriage, age at first marriage and main occupation. *F*-test was used to determine the significance levels of association between these as indicated in Table 23. The results show that out of the five variables believed to influence GBV, age at first marriage indicated statistical significance at $p = 0.025$ suggesting that the majority of the girls marry at younger age, than they should and therefore, experience high GBV. This is probably due to the fact that they have longer time in marital relationship. The study findings support the argument by Castro *et al.* (2008) who observed that GBV is at its peak among the youngest women aged between 15 and 19 years and declines linearly with the increase of the women's age.

Table 23: Mean index of GBV and demographic variables

Variables	Mean index	F-value	P-value
Education			
7years of schooling	3.6		
4 years in secondary school	3.3	0.624	0.681
Zero years of education	4.3		
Less than 4 years in secondary school	3.6		
Standard 8	6.0		
Religion			
Christians	3.7		
Do not belong to any denomination	2.5		
Moslem	3.0	0.491	0.689
Tradition religion	3.6		
Marital status			
Single	3.1		
Married	3.8		
Divorced	3.5	1.175	0.320
Widowed	3.1		
Cohabiting	1.0		
Separated	3.7		
Main occupation			
Crop producer	3.8	2.523	0.042
Livestock keeper	2.8		
Self employed	3.6		
House wife	2.2		
Both cropping, livestock and business	3.9		
Age at first marriage			
12-14	2.2	2.230	0.025
15-18	3.6		
19-21	3.9		
22-25	3.0		

Similarly, the results show that old women, traditionally known as *mkungu*, were comparatively more free from GBV than was the case with other women. Through probing, it was revealed that those women receive protection from their sons. These findings are inline with TGNP (2004) and Aboud (2004) studies which reveal that girls who marry at a very young age experience high levels of GBV. Moreover, the estimated marriage age by URT (2006) for Mara Region was 19.8 years, the age at which most teenagers both males and females are supposed to be attending secondary school education in Tanzania. However, FGD reported rare cases of older women experiencing different forms of GBV such as death resulting from being suspected of practising witchcraft in some cultures.

The occupation of the respondent was significantly related to GBV at ($p=0.042$), mainly because women, whose contribution to the family income was significant were likely to be subjected to more GBV from their husbands. Since women shoulder the primary responsibility of caring for the children thus this may probably give rise to complaints from among women against male partners who may respond by beating. Similarly, McCloskey *et al.* (2005) in a study conducted in Kilimanjaro Region revealed that men who contribute very little to the family income are more violent to their wives than other categories of men. As December (1999) asserts, men in the patriarchy society are expected to be the breadwinners, and when they fail to provide for the family, they feel inferior and hence, resort to more GBV against their wives as a cover up for their failures. Furthermore, women with informal sources of income may also experience GBV from their husbands. This is because some of the income generating activities involve extensive travelling making these women become a subject of suspicion of infidelity by the husbands. In view of this, sometimes married women fail to accomplish their assigned gender roles leading to more GBV.

4.6 Perpetrators of Violence

The results summarized in Fig. 8 show that 65% of the respondents supported the argument that the majority of violence perpetrators were the men against their wives, concurring with the result from a study by Jackson (1999) who observed that male partners normally perpetuate GBV against their wives. Other reported perpetrators include fathers against their daughters (14.2%). Male parents were expected to exercise control over children especially girls. Justification of violence by fathers against daughter was due to the fact that, girls were prepared to become good future wives and mothers. Although male children experience violence the fact that they are culturally regarded as being able to control themselves as compared to girls makes the former experience less GBV as

opposed to the latter. The study also reported 2.2% of violence from the father against boys.

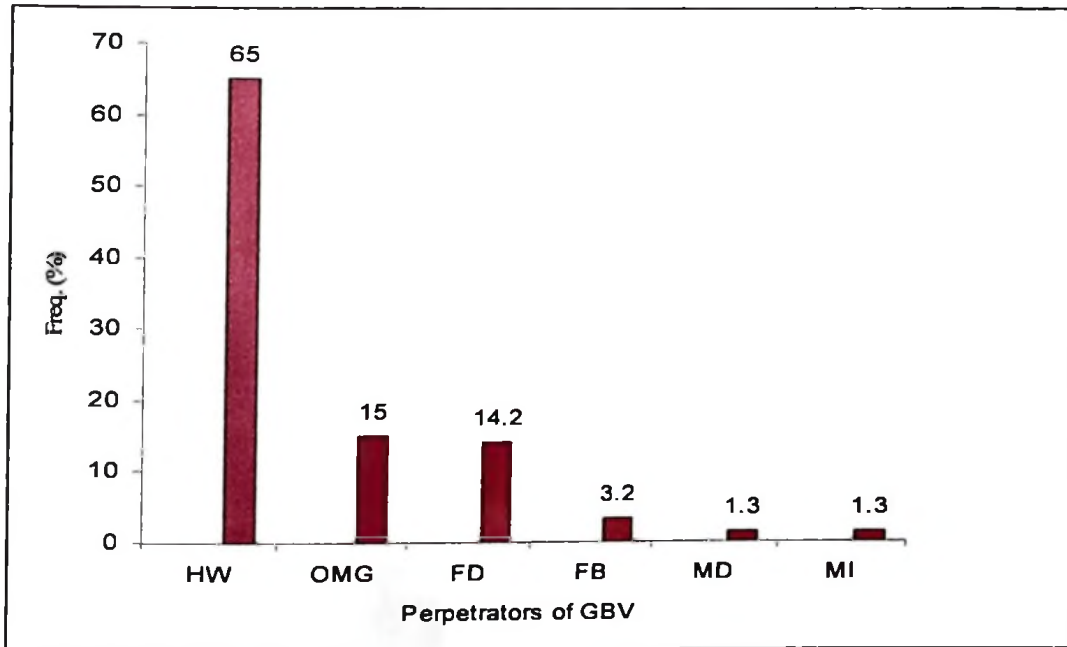


Figure 8: Perpetrators of GBV

Key

HW- husband to wife
 OMG-Other men to girls
 FD-Father to daughter
 FS-Father to son
 MD-Mother to daughter
 MI-Mother to daughter in-law

4.6.1 Forms of violence and perpetrators

The study results as shown in Table 24 indicate that the majority (71.3%) of the respondents experienced violence from their teachers at primary schools despite the existence of the laws preventing corporal punishment in schools. Since such a punishment is one of the physical violence, the victims were psychologically affected, making it easy for them to become future perpetrators or victims of GBV.

The results also show that 25%

of women were beaten once, 35% respondents were beaten a few times and 24.7% respondents were beaten many times by their boyfriends. Studies by Jackson (1999); Goussinsky and Borochowitz (2007); Romito and Grassi (2007) also reveal prevalence of GBV in dating relationships. The perpetrators of sexual violence as mentioned by the respondents include boyfriends (56.7%) and male family members (46.7%) (Table 24). However, teachers were mentioned to be perpetrators of GBV more frequently as reported by 32.5% of the respondents.

Table 24: Respondent's response on perpetrators of wife battery and sexual violence at different frequencies (N=240)

Perpetrator	Once %	A few times %	Many times %	Not at all %
Male family members	52.7	14.0	17.3	16.0
Step father to daughter	50	-	12.5	37.5
Father to daughter	43.7	12.4	10.1	33.8
Boyfriend	25	35.0	24.7	15.3
Teacher	12.5	6.3	71.3	10.0
Perpetrator of sexual violence				
Boyfriend	56.7	0.0	23.3	21.0
Male family members	46.7	33.3	3.5	16.5
Neighbour	25.7	7.1	7.1	0.1
Teacher	22.5	5.0	32.5	40.0
Father	1.5	4.5	1.1	94.0

4.7 Responses of women against GBV

The following section describes responses of women towards GBV in respect with the measures taken during and after GBV specifically wife battering and people who intervened during the event.

4.7.1 Measures taken by women after GBV

The results show that nearly one third (33.7%) of women reported to have rushed to the nearest health centre in the cases of severe injuries resulting from wife battering (Table 25). Victims of GBV are required to report to the police after severe injuries in

order to be given (PF3) form before treatment. The results as indicated in Table 25 show that only few (10.5%) reported to the police implying that majority of the victims do not reveal the actual cause of injuries at the hospital. Nearly one fifth of the respondents (22.1%) indicated to have rushed to their neighbours for help. The finding tallies with what Lentz (1999) observed regarding GBV being a public issue when serious consequences are concerned. The findings also reveal further that 18.6% of women rushed to village leaders for help. However, some of the participants reveal that village leaders were of little help when it came to GBV because they tended to collude with the perpetrators with the intension of preserving culture and traditions.

Table 25: Measures taken by women towards wife battery N=86

Response	n	%
Rushed to the nearest health centre	29	33.7
Rushed to neighbours for help	19	22.1
Called village leaders for help	16	18.6
Rushed to nearest police	9	10.5
Do not remember	8	9.3
Traditional healers	3	3.5
Did not go anywhere	2	2.3
Total	86	100.0

4.7.2 Intervention against wife battering

It was noted that almost one third (32.9%) of the respondents admitted that no one intervened during wife battering (Table 26). According to focus group discussions culturally women were not allowed to reveal GBV issues, and therefore, no one would be willing to intervene, unless the victims seek help from them. In some instances in-laws (27.9%) intervene during wife battering as indicated in Table 26 because the majority of the Kurya young men constructed their houses just near their fathers' compound. The in-laws are culturally given the role of resolving family violence between their sons and daughter in-laws. On the other hand, a good percentage of respondents (23.6%) agreed that their neighbours intervene to stop wife battering.

Table 26: Person intervened during wife battery (N=140)

Who intervened	n	%
No one intervened	46	32.9
In laws	39	27.9
Neighbours	33	23.6
A close friend of my husband	11	7.9
Children	8	5.7
Her friends	3	2.0
Total	140	100.0

4.7.3 Willingness of respondents to disclose about GBV

From the findings, it can be noted that almost one third (36%) of the respondents were willing to disclose GBV to their in-laws and almost a quarter (28.5%) were willing to report GBV to their biological parents as indicated in Table 27. During in-depth discussions, it was reported that Luo women were culturally allowed to disclose GBV to their in-laws and not their biological parents. However, biological mothers were secretly given information regarding GBV perpetuated against their daughters.

Table 27: Respondent's willingness to disclose about GBV N=172

Who knows about GBV	n	%
In-laws	63	36.0
Parents	50	28.5
Relatives	20	11.6
No one knows apart from my parents	18	10.5
Friends	12	7.0
Partner's friends	9	6.4
Total	172	100.0

4.8 Knowledge and Attitude of Women towards WE and GBV

From the previous sections, high levels of GBV were reported in the study area. It was noted further that the victims hide GBV trauma from the police and health officers because GBV is regarded as a family or private matter. Many factors were given by women including: protecting marriages, low level of awareness and poor perception towards GBV among the victims. The following section highlights the findings regarding the knowledge and attitude of respondents towards GBV and women empowerment.

4.8.1 Knowledge of victims towards Women Empowerment (WE)

Acquiring knowledge about WE was considered a starting point towards empowerment of women and hence elimination of GBV. Based on this, it was assumed that empowerment strategies taken by government, activists and other development actors would create awareness among the victims and perpetrators of GBV in Serengeti District. The results from the study show that, 66.3% of the respondents reported to have heard about women empowerment, while 33.7% had not (Fig. 9). It was encouraging to note that more than 50% of women heard the term women empowerment.

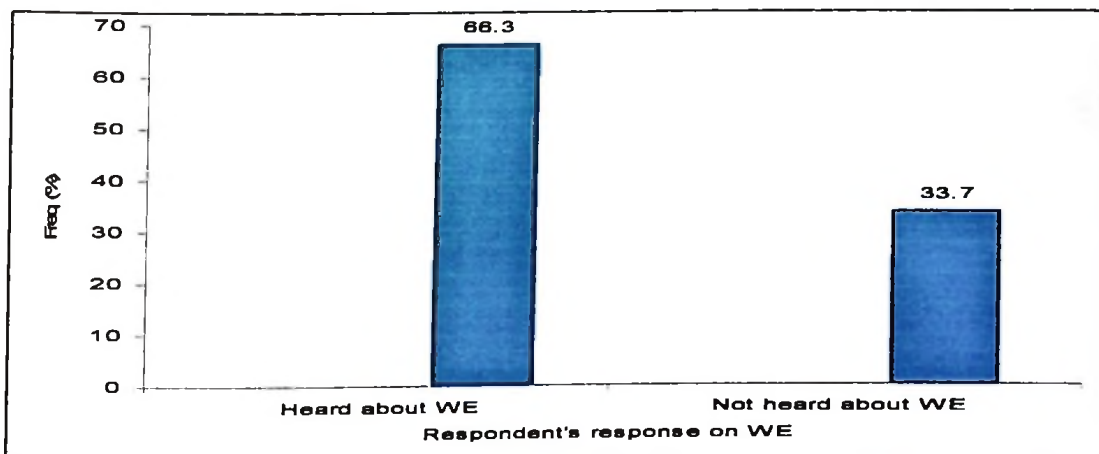


Figure 9: Respondent's responses on their knowledge about WE

The respondents were asked to define women empowerment as presented in Table 28. Initially women in the study area defined women empowerment as provision of loans. Through probing it was revealed that there was no equivalence of the word empowerment in their local language. Enumerators used phrases like “improving women’s livelihood”, “strategy to reduce poverty among women” and “creating awareness among women to become independent”. After an elaborate clarification, the concept was operationalised as being the process of improving women’s economic

status and eliminating patriarchal discrimination expressed in the form of GBV. The findings of the study as presented in Table 28 show that more than a half (56.5%) of the respondents were able to capture the meaning of women empowerment. However, almost one third (32.9%) of the respondents were not able to define it. Similar observations are reported by Kim *et al.* (2007) in respect with women empowerment through microfinance in South Africa.

Table 28: Respondent's response on the meaning of women empowerment N=153

Meaning of Empowerment	n	%
Ability to make choice and elimination of discriminations against women	86	56.5
I do not know	50	32.9
Mobilizing women against cultural norms	10	6.0
Mobilizing urban women to be cruel	4	2.5
Other meaning (if any)	3	2.1
Total	153	100.0

4.8.2 Respondent's knowledge of women empowerment

The findings presented in Table 29 indicate 95.8% of the respondents supporting the idea that development groups would eventually improve women's status in the society. During focus group discussion, it was revealed that women working in development groups are economically well-off. The findings are in line with Kabeer (1999) and Magar (2003) who regard development groups as a means towards women empowerment. Although economic empowerment is valued as an important route towards women empowerment, majority of the women (93.7%) indicated that economic empowerment alone would not improve women's status (Table 29). Similar observations were made by Hunt (2001) who contends that provision of loans alone would not improve women's economic status.

During focus group discussion, women revealed that apart from being poor, some of the cultural norms destroy women's self esteem. For instance, lack of decision making power

among women stifles women's creativity and finally lowers self esteem. Similarly, 76.9% of women revealed that their economic independence would depend on the availability of soft loans given to them. However, during focused group discussion, women lamented that they had never received any loan for economic development.

Table 29: Respondent's response on knowledge of women towards empowerment

Empowerment indicators	SA %	A %	UD %	DA %	SD %
Women's development groups will eventually improve women's status	95.8	2.5	0.8	0.0	0.8
Economic empowerment alone will not improve women's status in this area	93.7	4.2	0.4	0.4	1.3
Women's economic dev. Depend on their access to soft loans	76.9	15.4	0.4	1.3	6.0
Women have access and control over resources in this area	56.5	6.8	5.1	5.1	26.6
There are many opportunities for economic development for women than men	49.6	10.7	6.0	7.3	26.5
Women are less empowered due to lack of access and control over resources	39.8	3.4	4.7	11.9	40.3
Women have few opportunities for economic development than men	25.1	8.9	6.4	12.3	47.2
Women involvement in development groups add more workload to women	6.7	1.3	3.3	16.3	72.4

Key:

SA-Strongly agree

A-Agree

UD-Un decided

DA-Disagree

SD-Strongly disagree

4.8.3 Knowledge index of women on empowerment

An index of women's knowledge on empowerment was developed using the eight variables as described in section 3.6.2.3 of this thesis. The obtained knowledge index was categorized into low, medium and high. The respondents with high knowledge on empowerment were obtained through multiplying 5 scores by 6 statements to get 30. Similarly, the lowest index was obtained through multiplying 1 by the 6 statements to get 6, while medium index was obtained through multiplying 3 by the 6 statements to obtain 18. Through this approach, the respondents with high knowledge on empowerment had the points ranging from 18.1-30 points, uncertain scored 18 points while those with lowest

knowledge had the points ranging from 1-17.9. The results in Table 30 indicate that half (52.5%) of the respondents had high knowledge on empowerment, this could be due to the effort made by various WID projects targeting women in the country as explained by Brown (2006). Although there are no specific empowerment programmes in the area, high women's knowledge on empowerment would be regarded as an opportunity towards women empowerment and towards ending GBV. However, almost a quarter (27%) of the respondents had low knowledge on women empowerment.

Table 30: Index of knowledge on empowerment and their categorization (N =238)

Score	n	%
1.	1	0.4
5.	1	0.4
6.	1	0.4
11	1	0.4
12	4	1.7
13	1	0.4
14	37	15.4
15	6	2.5
16	8	3.3
17	7	2.9
18	48	20.2
20	14	5.8
22	7	2.9
23	11	4.6
24	60	25.0
27	8	3.3
28	14	5.8
29	2	0.8
30	9	3.8
Total	238	100.0
Mean index 19.9		
Low knowledge on empowerment	65	27.3
Uncertain	48	20.2
High knowledge on empowerment	125	52.5

4.8.4 Source of information

Sources of information were regarded as an important aspect towards women empowerment. Radio was mentioned by 32.5% of the respondents as being one of the most reliable sources of information for women empowerment (Fig. 10). This is because

the radio is the most reliable, affordable and readily available in the rural setting. Political leaders were mentioned by 25% of the respondents as being a source of information about women empowerment.

However, during focus group discussions it was reported that political leaders never fulfil the promises they make during campaigns, hence they are not a reliable source of information. The results show that 16.3% of the respondents indicated neighbours as a reliable source of information for women empowerment, while 10% of the respondents reported to have been depending on religious leaders as their source of information (Fig. 10). Few respondents (4.2%) acquired information through peer groups because there were few women working in development groups in the area as explained in section 4.9.4. The respondents also reported that women had neither the time to read newspapers nor the money to buy them. Furthermore, majority had no access to television, this was found to be a less reliable source of information about women empowerment.

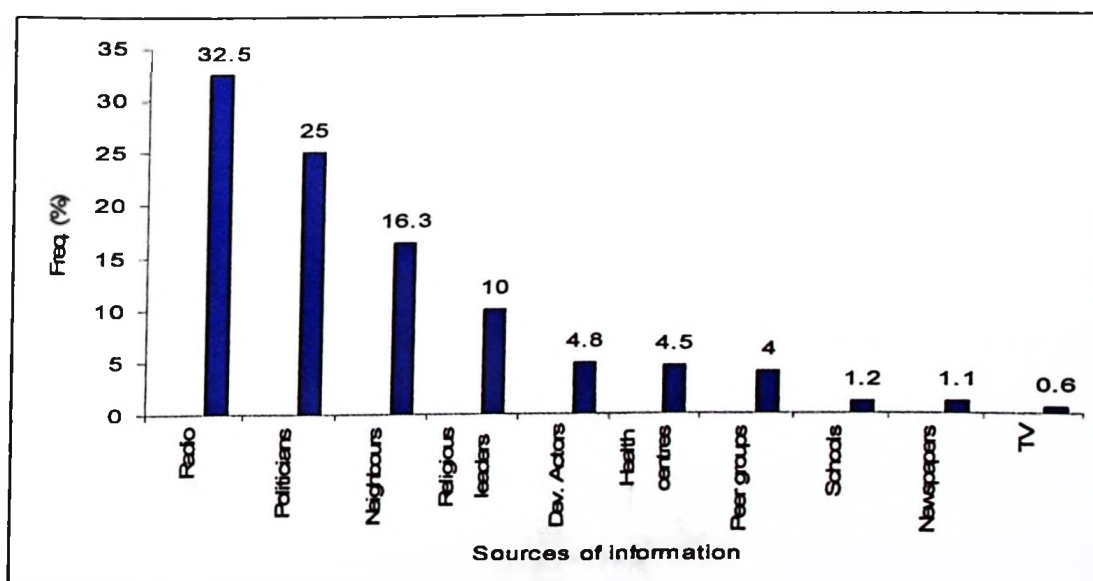


Figure 10: Sources of information about women empowerment

4.8.5 GBV as defined by respondents

The ability to define GBV by the victim was considered to be an indicator of awareness about GBV. More than half of the respondents (62.3%) were able to define GBV as indicated in Table 31, while 13.3% of the respondents thought that GBV means forced sexual intercourse. Similarly, good proportion (10.2%) of the respondents was not aware of the meaning of GBV. However, this does not mean that they were free from GBV; probably it was due to lack of information and low level of awareness.

Table 31: Meaning of GBV as perceived by the victims N=240

Meaning of GBV	n	%
Power imbalances between men and women	149	62.3
Forced sexual intercourse	31	13.3
Not allowed to inherit resources	28	11.2
I do not know	24	10.2
Any other meaning	8	3.0
Total	140	100.0

4.8.6 Knowledge of women on GBV

The findings presented in Table 32 indicate 78.7% of women supporting the idea that exclusion from decision making at all levels is part of GBV. Focused group discussants also supported the idea that women cannot make any decision without the approval from the husband. The outcome of this is low self esteem among women in the area. The study findings as presented in Table 32 also show that 67.8% of women supported the idea that GBV occur to women only. A good percentage of women (60.7%) agreed that control of women's earning by the husband is considered to be part of GBV. The respondents revealed further that women wearing revealing clothes expose themselves to a risk of rape (43.7%). This is because wearing revealing clothes is against the Kuryan culture as well as most of African culture. Similarly, 36% of the respondents strongly agreed that GBV is a mark of masculinity. The findings are in line with what was reported by Whitehead and Barrett (2006) who observed that men use GBV to exercise their manhood.

Table 32: Knowledge of women on GBV

	SA (%)	A (%)	UD (%)	DA (%)	SD (%)
Exclusion from decision making is part of GBV	78.7	21.3	0.0	0.0	0.0
GBV occur to women and men	67.8	29.7	2.1	0.0	0.4
Control of earning is part of GBV	60.7	32.6	5.4	0.4	0.8
Woman with revealing cloth ask for rape	43.7	27.2	5.0	5.4	27.6
Violence is a mark of masculinity	36	28.0	13.0	5.9	16.3

Key:

SA-Strongly agree

A-Agree

UD-Un decided

DA-Disagree

SD-Strongly disagree

4.8.7 Knowledge index on GBV

In order to explore more about respondent's knowledge on GBV an index was developed as described in section 3.6.2.2 of this thesis. According to Kline (1994), the seven variables were reduced to five after removing the two variables through factors analysis as it is summarized in Table 33. The obtained knowledge index was categorized into low, medium and high. The respondents with an index of 15 are considered as having high knowledge because they strongly agreed with the 3 correct statements. Similarly, the lowest score was obtained by multiplying 1 by the 3 statements to get 3, while uncertain response was obtained by multiplying 3 by the 3 statements to get 9. Through this approach, the respondents with high knowledge on GBV had points ranging from 9.1 to 15, uncertain scored 9 points while those with lowest knowledge had points ranging from 3.1 to 9. The results in Table 33 indicate that majority (99.1%) of the respondents had high knowledge on GBV as the mean index was 13.9 which is in the range of the high knowledge category (9.1-15); very few were in the uncertain category (0.4%). The finding concurs the results of Akhter *et al.* (2005) in their study on knowledge, attitude and practices on domestic violence in Bangladesh. In the same way, high knowledge by the victims on GBV would be considered as an opportunity towards ending GBV.

The initial Eigen value was 15.7%. Bartlett's test was used to test the null hypothesis that there is no relationship between items in the correlation matrix (Pett *et al.*, 2003). In this study, Bartlett's test was significant at $p < 0.0001$, indicating that there was a relationship between items in the correlation matrix. Kaiser-Mayer-Olkin (KMO) which is a measure of sampling adequacy was found to be 0.66 which was above 0.6, suggesting that the sample was adequate for measuring attitudes towards GBV.

Table 33: Index of knowledge on gender based violence and their categorization (N=239)

Score	N	%
6.00	1	0.4
10.00	1	0.4
11.00	3	1.3
12.00	10	4.6
13.00	52	21.3
14.00	95	39.7
15.00	77	32.3
Total	239	100.0
Mean 13.9		
Low	1	0.4
Medium	1	0.4
High	237	99.2

4.8.8 Attitude of respondents towards GBV

Various statements were constructed to measure women's attitude towards GBV as explained in Chapter three, sections 3.6.2.4 of this thesis. The responses to these statements from the respondents were subjected to factor analysis to examine if these variables significantly influenced respondents' attitude towards GBV. The percentage of variance was 66% indicating that most of the variations of the respondents' responses towards GBV were due to variations in the variable included in the analysis. The respondent's response was recorded according to the five points of the Likert scale which was reduced to 3 points which were low, uncertain and high attitude. This was done

after observing the data which had relatively fewer responses on “agree” and “disagree”. Using information obtained through the likert scale, the respondents with positive attitude towards GBV were found to be 50.6%, while those with negative attitude towards GBV were 28.0% and those with a neutral attitude towards GBV were 22.3% (Fig. 11). The findings were in line with what was observed by Nayak *et al.* (2003); Stickley *et al.* (2008); Antai and Antai (2008). The latter reported the existence of a direct relationship between positive attitude of the victims towards GBV and the actual occurrence of GBV. The discussion in section 4.4 shows that there was a high level of GBV yet women reported a positive attitude towards GBV. However, despite of showing positive attitude, women had lots of complaints against GBV. A plausible explanation on this might be lack of awareness among women about the negative impacts of GBV and the fact that they were used to it and hence it became an issue of little concern.

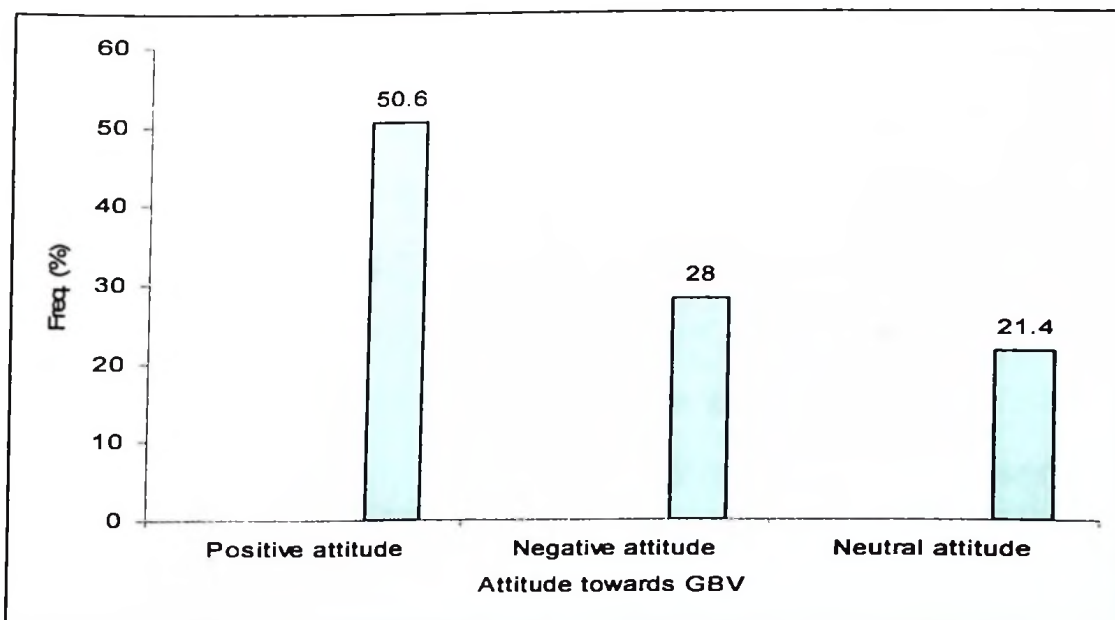


Figure 11: Overall attitude of respondents towards GBV

From the overall attitude score, both the victims and the perpetrators of GBV of both sexes had positive attitude towards GBV. During FGD, both men and women supported the statement that women must be punished, when they disobey their husbands. The victims perceive GBV as part of the patriarchal system that put men at a superior level as opposed to women; hence, they consider GBV as culturally acceptable and a normal practise. From this study, GBV was considered to be a private or family issue; this was indicated by 30% of the respondents (Table 34). Other researchers elsewhere (Faramarzi *et al.*, 2005) have observed the same. Women with such perception are unlikely to report GBV, because reporting GBV is viewed as causing indignity to the husband being a sign of lack of respect to the family members and traditional leaders.

Health officers at Serengeti Designated District Hospital (DDH) ascertained that GBV victims refuse to disclose the causes of injuries; however some of the GBV trauma is clearly identified by the health officers. They also explained that health officers cannot initiate actions against the perpetrator on behalf of the victims as long as the victims do not want to disclose the cause of their ailments. Women use silence as an accepted code of conduct in order to protect their marriage and culture. In the long run such perception is institutionalised and it makes them to be tolerant and subsequently develop a positive attitude towards GBV. Positive attitude among women as victims of GBV have led them to blame each other for being agents of GBV. This is especially the cases where older women perpetuate GBV through supporting their son's violent behaviour against their daughter's in-law. This is because older women have gone through trauma of GBV and hence they would like to see their daughter's in-law going through the same experience.

The findings from the study as presented in Table 34 indicate the respondent's perception regarding various statements. Majority (90.8%) of the respondent negated the common

myth that wife battery is a sign of love. On the other hand, few respondents (7.1%) supported the statement. This indicates how GBV is justified by the perpetrators using the false myth in favour of GBV commonly practised in the patriarchy system. According to Antai and Antai (2008), strategies to eliminate GBV would be difficult if the perception of both the victims and perpetrators does not change. Women's perception towards GBV allows the perpetrators (men) to continue mistreating the victims (women). Furthermore, positive attitude of men and women frustrate the government's efforts and those of other development actors towards the elimination of GBV.

Table 34: Attitude of respondents towards GBV

Statements	Response in (%)		
	High	Uncertain	Low
GBV should be reported for action	87.9	0.4	11.7
Bride price should be paid	84.0	5.5	10.5
Marriage between women increases HIV/AIDS risks	76.9	5.0	18.1
Violence is not a private issue	33.2	0.8	66.0
Violence is a private issue	30.0	1.7	68.4
Bride price increases GBV	24.4	8.4	67.2
Wife battering is a sign of love	7.1	2.1	90.8
Wife battery is not a sign of love	6.7	1.7	91.6
Women accept GBV to maintain their marriage	1.3	0.8	90.8

The findings of the study indicate further that the attitude of the respondents towards paying bride price was positive as a good percentage (84%) of respondents strongly supported the statement (Table 34). The respondents asserted that bride price increases respect of the bride in the eyes of the husband, in-laws and the society at large. During focused group discussion, the respondents ascertained that bride price gives the husband a green light of mistreating his wife because he has paid the bride price for her. They added that the amount of money paid as bride price is culturally related to the physical appearance of a woman. Among the Sukuma for example, girls with brown complexion fetch higher price than the dark ones. This gives room for bargaining and associating

women with commodities found in the market. However, historically the practice of paying bride price was meant to bring families of a married couple into a closer relationship. The respondents also revealed that bride price signifies that the groom is mature enough to take care of the bride. Further, bride price signifies that the groom is accepted by the bride's parents. The respondents contended that traditional leaders among the Kuryas, would not resolve marital conflicts if the husband has paid the bride price because the wife is regarded as the husband's property. Bride price would therefore act as a justification of violent relationships. This is what Johnson (1999) referred to as patriarchal terrorism. Yet the victims see bride price in a positive light ignoring its negative consequences. Majority (67.2%) of the respondents disagreed with the statement that bride price increases chances for GBV. Meanwhile, the perpetrators use statements like "you should work for me because I paid for you" as explained by the respondents during one of the focus group discussions.

Other cultural practices such as marriage between two women (*nyumba nthobhu*) were supported by 69.4% of the respondents. This implies that women had a positive attitude towards this type of marriage. They believed that barren women would require help in future, hence the need for them to marry young girls who would take care of them at the old age. At the same time, the respondents strongly agreed that marriage between women increase chances of contracting HIV/AIDS. This is because of the freedom they enjoy and which encourages them to have multiple partners, hence increasing the risk of contracting HIV/AIDS and other STDs. Given that the nature and extent of GBV vary from one culture to another due to differences in people's perception, assessing attitude of people towards GBV in different divisions would be of importance.

4.8.9 Attitude towards GBV by division

People's attitude towards gender inequalities varies according to culture, therefore individual with positive attitude towards gender equality reflect low levels of GBV to their intimate partners, while those with negative attitude towards gender equality accept GBV as a common practice. From the findings, attitude of the respondents vary from one division to another depending on the level of interaction and culture of the people. The study findings as indicated in Fig. 12 show that the respondents in almost all divisions had a positive attitude towards GBV. However, respondents in Rogoro division espoused high positive attitude compared to Ikorongo and Gurumeti Divisions. During focus discussion with key informants, it was revealed that divisions such as Rogoro is inhabited by majority of pure Kuryas who espouse traditional norms of women discrimination. Gurumeti Division is mainly occupied by a mixture of tribes because it is located along the highway from Mwanza to Mugumu town. The Division is inhabited by the Kurya, Sukuma, Ikoma, Natta and other small tribes making the ward a meeting point displaying a configuration of different traditions and cultures which probably have had enormous influence on the respondents. The presence of a tourist hotel at Gurumeti Ward has probably influenced the perception and attitudes of the respondents. However, the situation may require further research to explain this phenomenon. The study explored further, the influence of demographic characteristics on people's attitude.

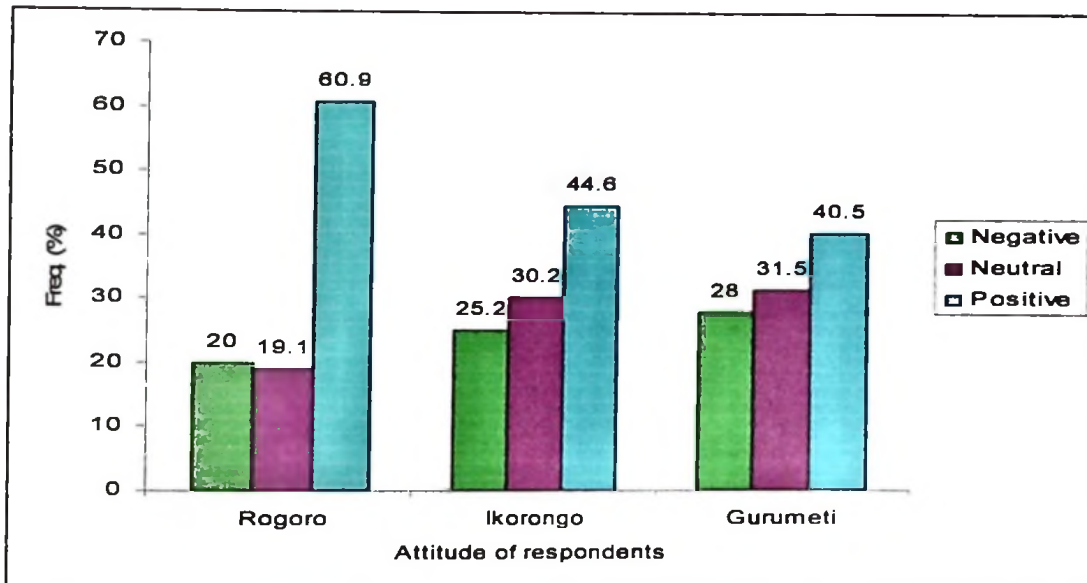


Figure 12: Attitude towards GBV by division

4.8.10 The relationship between attitude of women towards GBV on social demographic characteristics

According to Table 35, the study findings indicate significant differences in attitude and marital status at $p=0.017$. This implies that majority of the victims of GBV were married women as opposed to those not married. Similarly, there were significant differences among marriage type at $p=0.006$ implying that majority of the polygamous marriages experience high levels of GBV. Similar findings were also reported by McKlosky (2005). There was no significant difference in attitude of the respondents towards GBV and their education levels. However, the biggest group (95) of the respondents who had attended school from 1 to 8 years had a negative attitude towards GBV (Table 35), however the respondents with low education (below 7 years) had a positive attitude towards GBV. Similarly, those who never went to school had a positive attitude towards GBV. This was an expected finding in Serengeti District where women with informal education are

socialized to be under subordination of men. Other researchers such as Kennedy (2007); Antai and Antai (2008), observed positive attitude among people with low level of education in Nigeria

There was no significant difference on the attitude towards GBV and occupation, since majority of the women were economically disadvantaged with little contribution to the family income. The majority of the crop producers had negative attitude towards GBV, while few of the women from other occupations such as self employment had positive attitude towards GBV.

Table 35: Social demographic factors and attitude towards GBV

		Positive	Negative	P-value
Marital status n=228	Single	9	10	0.017
	Married	77	84	
	Divorce	3	7	
	Widowed	12	15	
	Cohabiting	0	1	
	Separated	4	2	
	Others	2	2	
Education n =226	Below 7	15	9	0.712
	1-8years	73	95	
	4years in secondary school	7	8	
	Below four years in secondary school	5	2	
	No education at all	6	5	
	Standard 8	0	1	
Occupation n= 227	Crop producer	63	81	0.955
	Livestock keeper	0	3	
	Self employed	4	1	
	House wife	3	12	
Type of marriage n=226	Monogamy	55	66	0.006
	Polygamy	47	41	
	Other type	4	3	
	Never married	1	4	

Significant at $p \leq 0.05$

4.9 GBV and its Linkage to Women Empowerment

It was assumed that empowerment reduces the levels of GBV among women, therefore, various empowerment indicators like decision making power, participation in development groups, education level, and socio economic status were used to measure empowerment of women in the study area as described in the following section.

4.9.1 Decision making index

In order to assess decision making power of the respondents, an index was developed as described in section 3.6.2.5 and summarised in Table 36. The obtained decision making index was categorized into low, medium and high. The highest score was 6 for those involved in decision making in all family issues, while the lowest score was 0 for those not involved in decision making. Through this approach, the respondents having high decision making powers scored from 3.1 to 6 points, while those with the lowest decision making scored from 0 to 2.9. The respondents with moderate decision making powers scored 3. The results in Table 36 show that majority (72%) of women had low decision making power on family issues. About 15.5% of the respondents were moderately involved in decision making, while 12.6% of the respondents were highly involved in decision making.

Table 36: Decision making index and their categorization N=240

Score	n	%
0	111	46.4
1	22	9.2
2	39	16.3
3	37	15.5
4	15	6.2
5	13	5.0
6	3	1.4
Total	240	100.0
Mean index 1.46		
Low decision making	173	72.0
Medium	37	15.5
High decision making	30	12.6

4.9.2 Decision making on family issue

The study findings as indicated in Table 37 show decision making power among women at household level. The largest proportion (35.3%) of women reported to have been involved in decision making in general family issues. Nearly one third (29.4%) of women were involved in decision on the types of crops to grow, this is because women constitute the majority of the farmers in the rural areas. It was revealed that about (4.5%) of women were less involved in deciding about marriages of their daughters. Focused group discussants reported that less women's involvement in such decisions was due to the bride price paid before marriage in the form of cattle and which is controlled by men. Women are given the lowest value of the share such as pieces of clothes (blankets) and big sized cooking pans (*sufuria*).

Table 37: Decision making power of respondents on family issues (N=240)

Decision making power	Yes (%)
General family issues	35.3
Type of crops to grow	29.4
Children's education	24.9
Income allocation	16.2
Number of children	11.9
Resource allocation	11.9
Marriage of daughters/son	4.5

4.9.3 Decision making and social demographic characteristics

Assessing decision-making power across demographic factors was important because of its influence on GBV. From Table 38 marriage type was found to be significant at $p=0.002$. This is because in polygamous marriage systems among the Kurya society, the older wife traditionally known as (*nyakisaho*) is highly respected by the co-wives and she is involved in decision-making. They insisted that younger wives are only involved in making decision on minor issues. On the other hand, there was more involvement of women from monogamous system than in the polygamous type of marriages. Significant

relationship ($p=0.042$) between decision-making and religion was revealed by the study findings (Table 38). This is because committed Christians involve their wives in decision making. However, the findings of this study contradict the Christian religious teachings such as the Holy Bible which regard women as weak and therefore should be guided by men. They also believe that men are inherently superior to women and that they have the right to make all important decisions for the family.

Table 38: Decision making index and social demographic variables

Variables	Mean index	F	P
Marital status	1.0526	1.32	0.24
Single	1.5965		
Married	0.5000		
Divorced	1.4643		
Widowed	0.0000		
Cohabiting	1.3333		
Separated	0.5000		
Marriage type			
Monogamy	1.9266	3.88	0.002
Polygamy	0.9138		
Other type	0.8571		
Never married	0.8000		
Religion			
Christian	1.5530		0.042
Moslem	0.0000		
Traditional religion	0.0000		
Do not have religion	0.7059		
Education level			
No education	1.5000		
Less than seven years in school	1.7692		
Seven years in school	1.3314	1.07	0.37
Standard eight	3.0000		
Secondary school	2.2857		
College	1.8125		
Age at first marriage			
12-14	2.4444	1.32	0.26
15-18	1.4157		
19-21	1.3898		
22-25	2.0000		

Significant at $p<0.05$

4.9.4 Working in development groups

The findings by this study indicate that 12.7% of the respondents were members of development groups, while 87.3% were not (Fig. 13). This implies that there were fewer opportunities for women to work in development groups in the area. The impact of such situation is similar to what Tesoriero (2005) observed to be women's low capability towards poverty reduction, hence they become less empowered. Scarcity in opportunities for women to work in development groups deprives them of the opportunity to collaborate with other groups of women who are in the process of empowerment. However, women lack the capacity to initiate self help groups instead they wait for development agents to initiate them.

It was found that the main activities performed in the few mentioned groups were essentially livestock and agricultural based activities. During focused group discussion, the respondents in all the 8 villages reported of there being limited chances for women to improve their family income and to access information. Fig.13 show that 80% of the respondents participate in development groups to improve their family incomes. Only 11.4% of the respondents supported the idea that working in development groups improved their access to information.

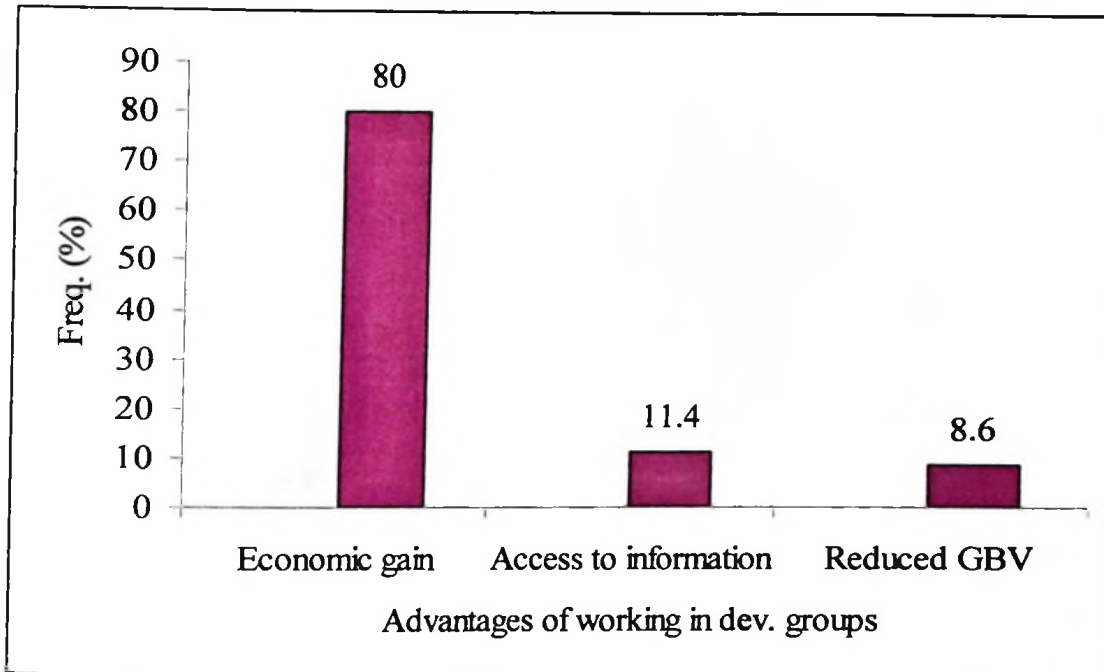


Figure 13: Benefits of working in development groups

Only 8.6% of the respondents agreed that working in development groups would eventually reduce GBV because their economic contribution would be more significant than before. During focus group discussions, it was reported that some men refused to allow their wives to join either the established groups or the self initiated development groups due to jealousy. Therefore, married women rarely participate in development groups. It was also reported that the majority of women participating in development groups were either divorced or single. On the other hand, it was also reported that there were no well functioning groups in the area, because some of the initiators (development actors) never fulfilled their promises (53.1%) as indicated in Table 39. Heavy workload was mentioned as one of the constraints from working in development groups. This was supported by the explanation given in section 4.3.2.1 on the same observation that women had more working hours in a day than was the case with men.

Table 39: Constraints of working in development groups (N=35)

Constraints of development Groups	N	%
Un attained promises	18	53.1
High workload	10	29.1
Lack of faithful leaders	5	11.7
Individualism	2	7.1
Total	35	100.0

4.9.5 Access and control over resources

Access and control over household resources was used to measure the socio-economic status of women. The term access was defined as a situation in which a person is allowed to use resources like land for growing crops without having control over it. On the other hand control allows a person to make decisions on who uses the resource or on disposing it for instance selling it.

Every respondent was asked to indicate their access and control over household resources. Their responses to each of the assets were recorded as “Yes” for those who had access or control over the resources and “No” for those who had no access or control over the resources. Based on the results in Table 40, the majority (69.2%) of the respondents had access to land and the family house, followed by wooden bed (52.9%) and mosquito net (49.8%). Women had higher access to land because they were more involved with farming activities than was the case with men. They also had higher access to mosquito nets because they are less expensive and some of the mosquito nets were acquired through the programme for eliminating malaria among pregnant women and children with fewer than five years locally known as *hati punguzo* (literally means ‘subsidised cost’). These are sold at subsidized prices and sometimes given for free. The results in Table 40 indicate that nearly a half (49.4%) of the respondents had access to poultry keeping followed by goats (32.5%). This is because these animals are of low value. Similarly, respondents were able to control poultry (45.6%) and assets like mosquito nets (37.4%), foam mattress (28.8%), houses (24.2%), goats (15.5%) and radio (14.2%) (Table 40). Very few (0.4%)

women had control over most of the valuable assets like refrigerators and water pumps. It was anticipated that women would have had access to some of the valuable resources like land and houses with very low percentage of control over the same resource. Surprisingly, the study revealed women as having had control over land and houses at 19.2% and 28.9% respectively (Table 40). Based on this, it was imperative to assess the linkage between marital status and control of houses and land.

Table 40: Access and control of assets

Asset	Access (%)	Asset	Control (%)
Land	69.2	Poultry	45.6
House	69.2	Mosquito net	37.4
Wooden Bed	52.9	House	28.9
Mosquito net	50.0	Wooden bed	26.8
Poultry	49.4	Foam mattress	26.8
Foam mattress	49.0	Land	19.2
Radio	42.7	Goats	15.5
Bicycle	32.6	Cattle	19.9
Goat	32.5	Radio	14.2
Cattle	30.0	Clock watch	9.2
Radio cassette	16.7	Bicycle	8.4
Clock watch	14.6	Radio cassette	2.5
Sofa set	6.3	Sewing machine	2.1
Sewing machine	5.8	Sofa set	1.7
Wardrobe	4.2	Electrical iron	1.7
Sewing machine	5.8	Water pump	1.3
Water pump	2.5	Car	0.8
Electric iron	1.7	Wardrobe	0.8
Satellite dish	1.3	Motor bike	0.4
Fan	1.3	Refrigerator	0.4
TV	0.8	Fan	0.4
Car	0.8	TV	0.4
Motor bike	0.4	Satellite dish	0
Refrigerator	0.4		0

4.9.5.1 The relationship between marital status and ownership of houses and land

A linkage between marital status and ownership of houses and land were analysed descriptively as presented in Table 40. These variables were also analysed using chi-square test as indicated in Table 41 to see whether or not owning a house or land was significantly associated with marital status of women.

The results revealed a significant association between marital status and ownership of houses ($p=0.001$) (Table 41) probably due to the fact women controlled low quality houses built using locally available materials such as floor type made from earth materials, wall made from mud and poles and roofing materials made of grass and mud. Housing condition depicted high levels of poverty among women in the study area. However, some of the women revealed that they own houses built by their sons.

Table 41: Marital status and ownership of houses N=58

Marital status	n	%
Married	27	46.6
Widowed	20	34.5
Single	5	8.6
Divorced	3	5.2
Cohabiting	0	0.0
Separate	2	3.4
Women to women marriage	1	1.7
Total	58	100.0

Pearson chi-square value = 41.385

df= 6

Asympt. Sig. (2 sided) 0.0001

Based on the results in Table 42, p values for the Pearson's chi-square was less than 0.05, which is the lowest level of significance, implying that there was a significant association between marital status of women and ownership of land $p<0.001$. This is probably due to the fact that women were allowed to buy land from the village land as stipulated in the Land Act No. 5 of 1999 (URT, 1999).

Table 42: The relationship between marital status and ownership of land (N=46)

Marital status	n	%
Married	21	45.7
Widowed	13	28.3
Single	5	10.9
Divorced	4	8.7
Separate	2	4.3
Women to women marriage	1	2.2
Cohabiting	0	0.0
Total	46	100.0

Significant at $p \leq 0.05$

Pearson chi-square value=23.121

Assymp.sig. (sided) 0.001

df=67

4.9.6 Socio-economic status and GBV

Socio-economic status (SES) of women was calculated using an asset index as explained in Chapter three section 3.6.3.4 of this thesis. Grouping of women into socio-economic status was done using the assets they owned. Based on the results four equal groups were obtained. The screen plot presented in Fig. 14 indicated 44 principal components with the first component accounting for 14.7% of the total variance while the second largest component explained was 9.0% of all the variables entered in the model.

The four groups had slight differences because respondent's access to services such as water sources and the type of fuel used for cooking were almost the same. Moreover, respondent's housing conditions were more or less similar and therefore grouped together. The types of assets owned were almost similar making it difficult to differentiate the group. This is one of the challenges of PCA as far as asset index is concerned. McKenzie (2003); Vyas and Kumaranayake (2006) and Labonne *et al.* (2007), term this the 'truncation' problem, implying that there was a more even distribution of SES but spreading over a narrow range making differentiation between the poorest and least poor difficult. Fig. 15 clearly indicates that the majority of the respondents owned assets of lower quality as it is skewed to the negative side. As Vyas and Kumaranayake (2006)

observe, variables with a positive sign scores are related with high socio-economic status, while those with a negative sign are associated with lower SES. Accordingly, about a half of the respondents depicted low socio-economic status as their indices were negative (Fig. 15).

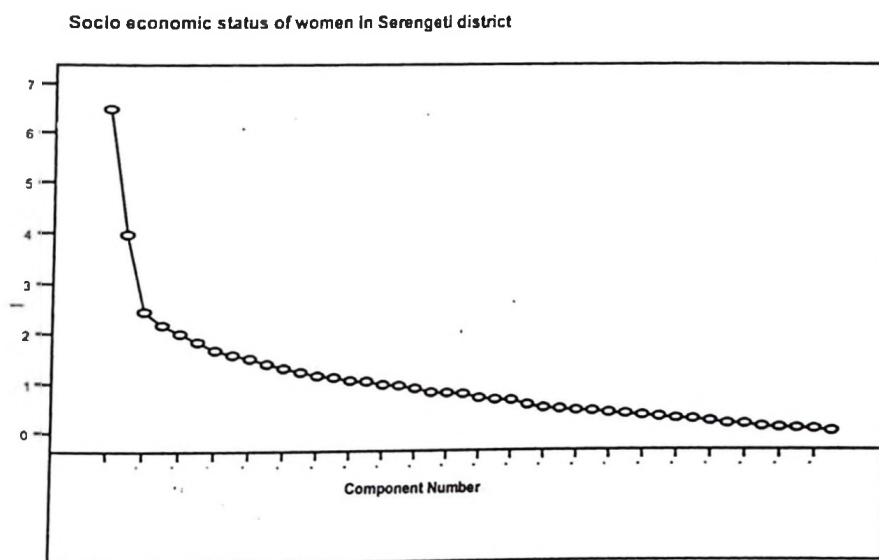


Figure 14: The scree plot for Eigen values showing cut-off point for the principle components

Histogram

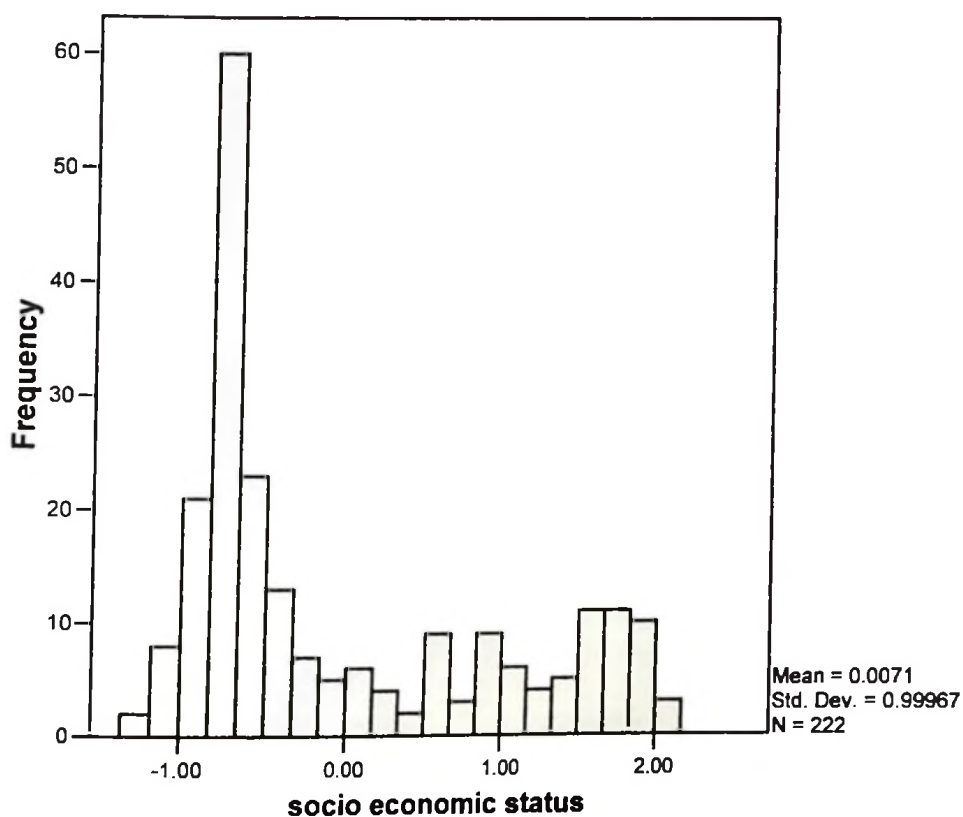


Figure 15: Asset index distribution of respondents

The data in Table 43 show that there were four groups of SES indicating the poorest group owning below average in most of the assets and access to services identified. There were few respondents (8.1%) from the first poor group owning bicycles as compared to the less poor (31.1%) by almost four times higher with $p < 0.0001$ which was significant at 95 confidence interval. It was clearly shown that even the poorest women (43.2%) were able to own houses because most of the houses were of poor quality and therefore affordable to women (Table 43).

Similarly, women in the poorest group owned goats, cattle and poultry probably because the study was conducted in the rural area where the poorest have more access to these assets than the least poor group. Moreover, the poorest group especially the pastoralists depend on livestock for their survival, while the least poor group have other means of survival and able to use their financial capacity to buy these assets whenever the need arises. The findings concur with Mwageni *et al.* (2005) in their study conducted in Rufiji District on the socio-economic status and health inequalities in rural Tanzania.

Table 43: Distribution of assets by socio economic status (%)

Assets	First Poor	Second poor	Third poor	Fourth poor	p-values
Bicycle	8.1	5.8	2.2	31.1	0.000
Radio	27.0	11.5	4.4	33.3	0.001
Radio cassette	5.4	0.0	0.0	8.9	0.044
Refrigerator	0.0	0.0	2.2	0.0	0.392
Television	0.0	0.0	0.0	2.2	0.392
Wall watch	5.4	5.8	2.2	13.3	0.189
Land	24.3	13.5	17.8	26.7	0.362
Sofa set	2.7	0.0	0.0	11.1	0.008
Bed	13.5	21.2	17.8	44.4	0.004
Spongy mattress	27.0	19.2	13.3	44.4	0.005
Cotton mattress	0.0	0.0	4.4	0.0	0.111
House	43.2	19.2	20.0	24.4	0.048
Sewing machine	0.0	0.0	2.2	13.3	0.002
Mosquito net	40.5	23.1	31.1	42.2	0.171
Goats	54.1	5.8	8.9	31.1	0.000
Poultry	75.7	50.0	28.9	57.8	0.000
Cattle	37.8	5.8	11.1	22.2	0.001

The study results as presented in Table 44 indicate the housing conditions showing the wealth status of woman. The results show that none of the women from the first group had houses with walls made of cement bricks, this was not exactly the case with the fourth poor (11.1%). The same trend was noted on house with walls made of burnt bricks, floor type and roofing materials.

Table 44: Housing condition by socio economic status (N= 240)

Housing condition	First poor	Second poor	Third poor	Fourth poor	p- value
Wall made of cement bricks	0.0	0.0	0.0	11.1	0.002
Wall made of mud bricks	0.0	0.0	20.0	28.9	0.000
Wall made of timber	0.0	0.0	0.0	2.2	0.000
Wall made of stick +mad	91.9	100.0	80.0	26.7	0.000
Wall made of grass	10.8	0.0	0.0	0.0	0.001
Wall made of burnt bricks	0.0	0.0	0.0	26.7	0.000
Floor made of mud	100.0	100.0	91.1	71.1	0.000
Floor made of cement	0.0	0.0	0.0	26.7	0.000
Roof made of iron sheets	0.0	0.0	0.0	80.0	0.000
Roof made of asbestos	2.7	0.0	0.0	4.4	0.263
Roof made of thatch	100.0	100.0	865.7	15.4	0.000

There were no differences in access to services like water, fuel and type of latrine across all socio-economic groups. All the respondents had no access to rainwater harvesting systems and also they were not able to buy water from vendors as the majority of the respondents fetched the water from rivers, wells and from public water taps. All the respondents used pit latrines with no access to VIP type of latrine and they also use firewood as the major source of fuel for cooking (Table 45).

Table 45: Access to social services by socio economic groups

Services	First poor	Second poor	Third poor	Fourth poor	p-value
Rainwater harvesting	0.0	0.0	0.0	4.4	0.111
Village water tap	32.4	15.4	6.7	20.0	0.023
Buy water from vendors	2.7	0.0	0.0	0.0	
Fetch water from river& wells	17.2	29.9	28.0	24.0	0.007
Use of VIP latrine	0.0	0.0	2.2	2.2	
Use of pit latrine	83.8	80.8	55.6	84.4	0.003
Use of neighbour's latrine	0.0	0.0	8.9	2.2	0.003
Use of bush as latrine	16.2	21.2	40.0	13.3	0.013
Use of kerosene as fuel	0.0	0.0	0.0	6.7	0.028
Use of charcoal as fuel	18.9	3.8	15.6	46.7	0.000
Use of firewood as fuel	97.3	100.0	100.0	88.9	0.008

4.9.7 Correlation between access and control over resources

The correlation between access and control over resources was done as presented in Table 46 because sometimes, having access to certain resources does not imply that one has control over it. The findings as indicated in Table 46 show a significant relationship between having control over a house and having control over other resources like poultry.

Similarly, women who had control over land had also control over the family house. As it was noted from the results, having control over the most valuable resources gives way to owning others resources. For instance, women who had control over land had also control over crops. On the other hand, women who had access to land sometimes had no control over crops grown on that land (Table 46). Such trend is common with most of the married women in Serengeti District. In one of the in-depth discussion it was reported that a woman can get beaten by her husband simply because of slaughtering chicken for the family meal despite the fact that she is the care taker of poultry in the household.

Table 46: Correlation matrix between access and control over resources

	AP	CP	AH	CH	AL	CL	AC	CB	AR
AP	1								
CP	0.524**	1							
AH	0.382**	0.097	1						
CH	0.163*	0.265**	0.163*	1					
AL	0.291**	0.042	0.546**	-0.006	1				
CL	0.049	0.171**	0.047	0.590**	0.116	1			
AB	0.205**	-0.010	0.229**	-0.186**	0.210*	-0.113	1		
CB	0.125	0.330**	-0.029	0.217**	0.036	0.197**	0.144*	1	
AR	0.332**	0.144*	0.278**	-0.133*	0.205*	-0.164*	0.500**	0.045	1
CR	0.125	0.349**	-0.068	0.272**	-0.016	0.135*	-0.002	0.396**	0.230**

** Correlation is significant at the 0.01 level (2-tailed)

* Correlation is significant at the 0.05 level (2-tailed)

Key:

AP=Access to poultry
 CP=Control over poultry
 AH=Access to house
 CH=Control over house
 AL=Access to land

CL=Control over land
 AB=Access to bicycle
 CB=Control to bicycle
 AR=Access to radio
 CR=Control over radio

4.9.8 The linkage between socio-economic status and GBV

GBV was associated with the four groups of socio-economic statuses of women using one-way ANOVA to find if there was any significant difference in GBV among the four groups. The results as presented in Table 47 show that, the first poor group had slightly higher levels of GBV as expected. However, ANOVA did not give any significant ($p > 0.05$) variation among the SES groups. The values were greater than 0.05 implying that GBV cuts across all the social economic statuses of women. The findings are in-line with the observations made by December (1999); Hunt (2001); Pickup *et al.* (2001) Mitra and

Singh (2008) and Kim *et al.* (2007), who contend that GBV is one of the universal practices that cuts across all cultures, nations and social economic statuses.

Table 47: One way ANOVA results comparing means of GBV and SES

N	GBV Mean		Sum of Squares	df	Mean Square	F	Sig.
48	3.9167	Between groups	7.771	3	2.590	0.645	0.587
78	3.7179	With in groups	944.095	235	4.017		
57	3.3860						
56	3.6250						
239	3.6569	All	951.866	238			

4.10 Binary Logistic results Explaining Linkage between Empowerment and GBV

Binary logistic model was used to explain the likelihood of women to experience GBV as a model of choice for testing the hypothesis that the odds of experiencing GBV are the same for empowered and non-empowered women. Binary logistic model was used because the dependent variable (GBV) was dichotomous in terms of having experienced GBV being assigned 1 and not having experienced GBV assigned 0. The model was selected because it is popular and powerful at predicting dependent variables in social science research.

4.10.1 Binary logistic outputs

Looking at the output after performing binary logistic model, the case processing summary indicate a number of cases that were included in the model and those not included. The results indicate that 86.6% of cases were included while only 13.4% cases were not included in the model. The capability of all explanatory (independent) variables included in the model was tested by various binary logistic outputs including the omnibus test. Table 48 indicate significant values ($p < 0.001$) of omnibus tests of model coefficients implying that there is adequate fit of the data to the model and that at least one of the predictors indicate significant coefficient on the dependent variables (Richarme, 2001).

Table 48: Omnibus tests of model coefficients

		Chi-square	df	Sig.
Step 1	Step	99.394	7	0.000
	Block	99.394	7	0.000
	Model	99.394	7	0.000

Similarly, the model summary indicating Cox & Snell R square and Nagelkerke R square was chosen to provide a logistic analogy to R^2 in OLS regression commonly known as pseudo R^2 . Table 49 indicate that Nagelkerke R^2 was 0.509 meaning that the independent variables entered in the model were able to explain 50.9% of the variance in the dependent variable.

Table 49: Model summary

-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
187.333(a)	0.381	0.509

4.10.2 Outputs from binary logistic explaining the linkage between women empowerment and GBV

Table 50 shows significant coefficients on decision making ($p=0.0001$) at household level and GBV. This implies that women with high decision making power on family issues have less chances of experiencing GBV. The finding tallies with the result by Kabeer (1999); Toufique *et al.* (2007) and Kim *et al.* (2007) who found that women with high decision making would experience less GBV. Significant coefficients ($p=0.006$) were observed on the overall income use at household level, implying that, GBV increases with the decrease of women's control over family income and with increase of the husband misuses family resources. When a woman asks about family income, the husband responds by beating the wife as explained by women respondents during the survey. Moreover, the findings reveal that women own little income which is mainly used for the

family welfare such as purchasing food for the family, buying school uniforms for the children and other domestic requirements. The findings confirm the argument from section 4.4 that women were deprived of daily basic needs such as food by their husbands; therefore women had to use their own income, which is inadequate to sustain the family.

Similarly, the likelihood of women to experience GBV decreases with the increase of age of women at first marriage ($p=0.022$). It was noted that women who marry at an early age experience high GBV compared to women who marry at the age of 18 years and above. This finding is in line with what Castro *et al.* (2008) observed that there were high GBV among young women (women under the reproductive age) than was the case of adult women. Through probing with a group of young men respondents, it was confirmed that adult women experience less GBV because their older sons protect them.

Moreover, the study observed significant ($p=0.093$) coefficient on women participating in development groups and GBV (Table 50). During focus group discussion, women respondents explained that women working in development groups were assumed to be economically powerful indicating that they experienced less GBV as compared to women not working in development groups. On the other hand, participants reported that sometimes working in development groups entail freedom of movement that might be translated into jealousy by the husband, hence, high GBV. However, participating in development groups had negative B-value indicating that it would reduce the likelihood of the occurrence of GBV against women.

The findings by this study indicate no significant coefficients on education levels to GBV. Similar observations have been reported by Schuler *et al.* (1998) and Mitra and Singh (2008) who argue that education alone can never end GBV unless some of the cultural

norms are also changed. However, the results show negative β coefficient with education level of women indicating that as education level of women increases, the odds of GBV decreases. This is because linearly, a negative β coefficients of independent variables affect negatively the dependent variables, while positive β coefficients most often affects positively the dependent variable (Stine, 1995).

Although the results in Table 50 indicate no significant coefficient on socio- economic status of women to GBV, implying that GBV occur to women of all socio economic statuses, negative β coefficients implies that as women's socio economic status improve, the level of GBV decreases. Other researchers elsewhere observed similar findings that women's capacity to control resources acted as shield against GBV (Toufique *et al.*, 2007). Similarly, Kabeer (1998) reports that improved economic status of women would gradually reduce chances for GBV against them.

Table 50: Binary logistic results on the linkage between women empowerment and GBV

	B	SE	Wald	df	Sig.	Exp (B)
Age at first marriage	0.401	0.175	5.261	1	0.022	1.494
Education	-0.031	0.085	0.132	1	0.717	1.031
SES	-0.002	0.003	0.703	1	0.402	1.002
Member of development group	-0.358	0.213	2.818	1	0.093	0.699
Income use index	0.432	0.157	7.545	1	0.006	1.541
Occupation	0.328	0.169	3.776	1	0.052	1.388
Decision making index	3.502	0.484	52.420	1	0.001	33.175
Constant	-4.921	1.116	19.451	1	0.000	0.007

4.11 Reasons for Increase in GBV as Perceived by Respondents

According to Fig. 16, cultural norms (38.3%) were mentioned by the respondents to be among the reasons for increase in GBV. The findings concur with the observations by

December (1999) and Merry (2006) who reported cultural norms as a source of GBV in Africa. Alcohol (21%) and drug abuse (11.1%) were also reported as factors that exacerbate GBV in the area. During focused group discussions, some of the key informants reported that most popular alcohol consumed is the traditional distilled alcohol locally known as (*gongo*). This type of alcohol is cheap and it is consumed by the majority. Furthermore, lack of awareness (13.6%) among men and women on GBV were also reported to be the cause for an increase in GBV. Other researchers elsewhere found awareness creation as an important strategy towards ending GBV (Pickup *et al.*, 2001; SADC, 2004).

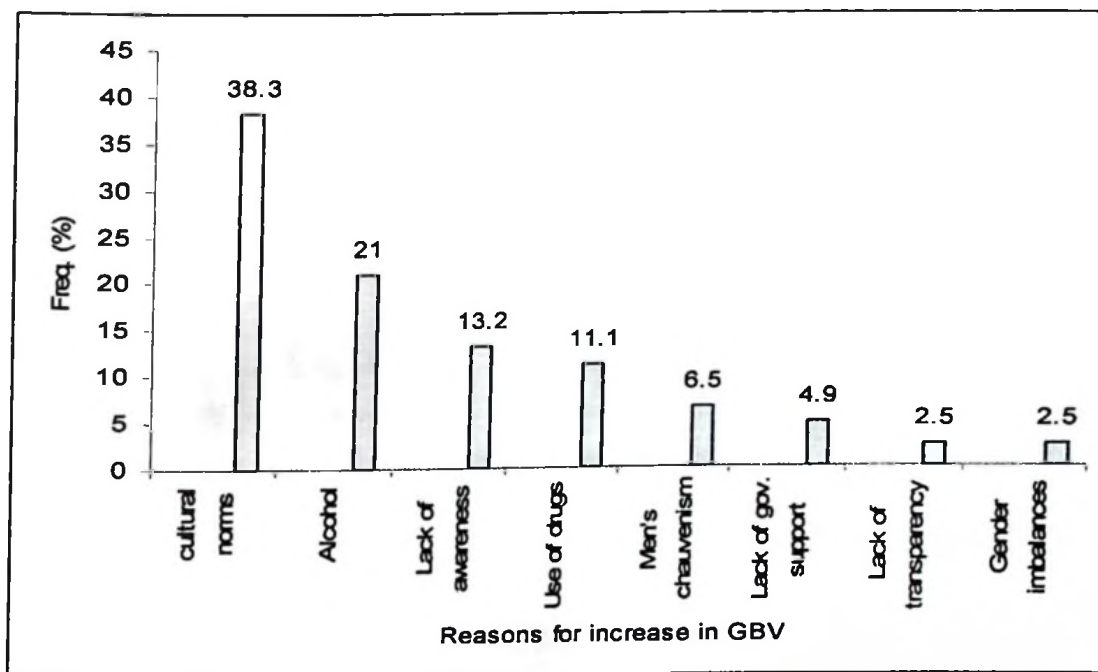


Figure 16: Perceived reasons for increase in GBV by respondents

4.12 Reasons Contributing to a Decrease in GBV as Perceived by the Respondents

Nearly half (46.7%) of the respondents find GBV as a persistent problem (Fig. 17). The reasons for this as given by respondents include cultural preservation.

Other researchers elsewhere, found culture to be static, likewise, GBV is also static and rigid (Merry, 2006). However, some of the respondents (30.3%) acknowledged that the empowerment strategies through awareness creation among the communities might lead to a decrease in GBV. Legal actions taken to perpetrators were reported to be one of the reasons for a decrease in GBV levels in the area.

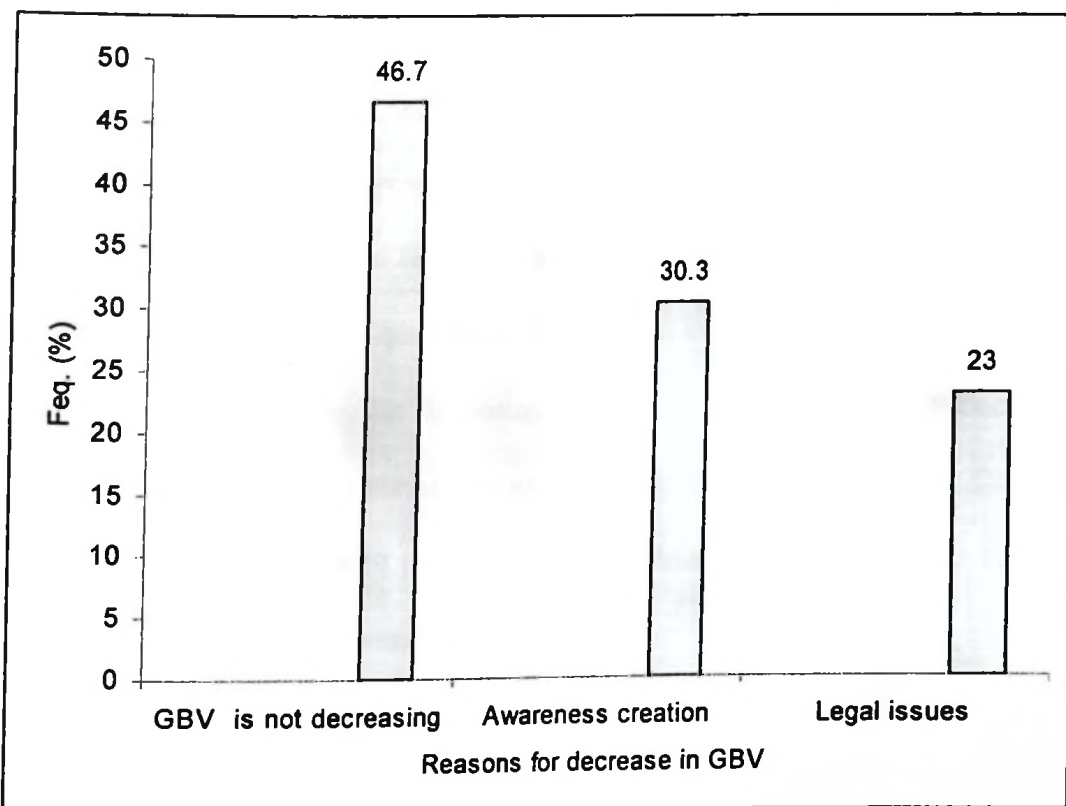


Figure 17: Reasons for a decrease in GBV as perceived by the respondents

4.13 Impact of GBV on the Victims

The impacts of GBV vary according to the nature of the particular incidence and the context in which it occurs. Survivors of GBV mainly suffer from physical, psychological, economical and social consequences. These are normally interconnected.

4.13.1 Physical, social and psychological impact of GBV

From the findings, nearly a quarter of the women (53.8%) reported to have sustained permanent body disabilities as one of the physical impacts of GBV among women (Fig. 18). Other physical violence mentioned by the respondents includes body weaknesses resulting from continuous wife battering. During in-depth discussions, it was reported that some women were beaten to death. Other health problems reported by the respondents include pre-mature deliveries of babies and miscarriages. The reported problems caused by FGM include severe pain and haemorrhage that could sometimes lead to death. Psychological violence resulting from low self esteem and social stigma was mentioned by 31.8% of the respondents. These results highly supports Pickup *et al.* (2001) and Merry (2006) contention that women experience social stigma from the society and therefore averts disclosing GBV. Respondents also mentioned lack of confidence and abandonment as consequences of psychological violence. The findings tally with December (1999) observation that victims of GBV experience lack of self esteem hence remain subordinate to men.

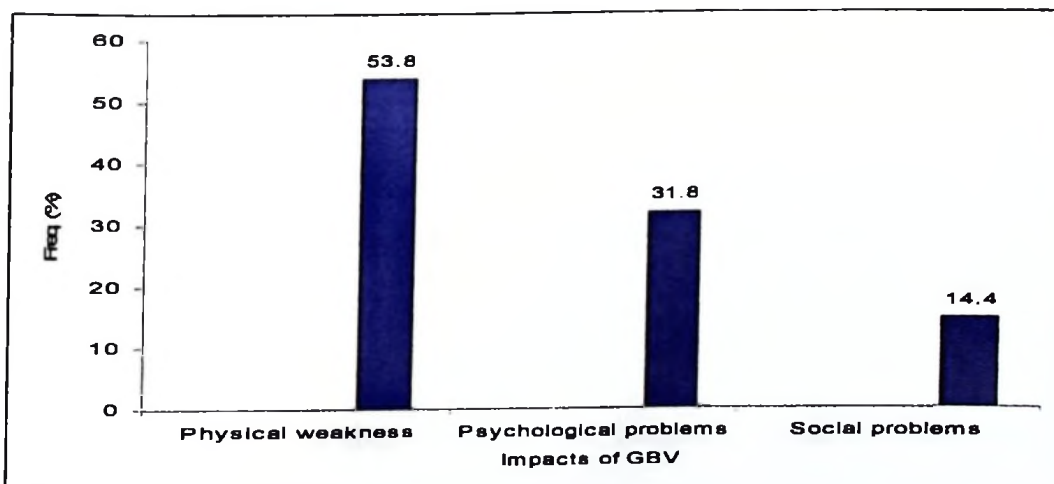


Figure 18: Physical, psychological and social impact of GBV to victims

4.13.2 Economic impact of GBV

The study indicates high poverty levels (95.2%) among GBV victims (Fig. 19). During focus group discussions married women reported to have been prohibited from participating in some of the economic activities like doing petty businesses. Such a situation would eventually damage their self confidence in making important life choices. The respondents informed further that family instability resulting from GBV was one of the reasons for high poverty levels among women. On the other hand, the respondents reported that low level of education among women limits them from participating in the formal sectors.

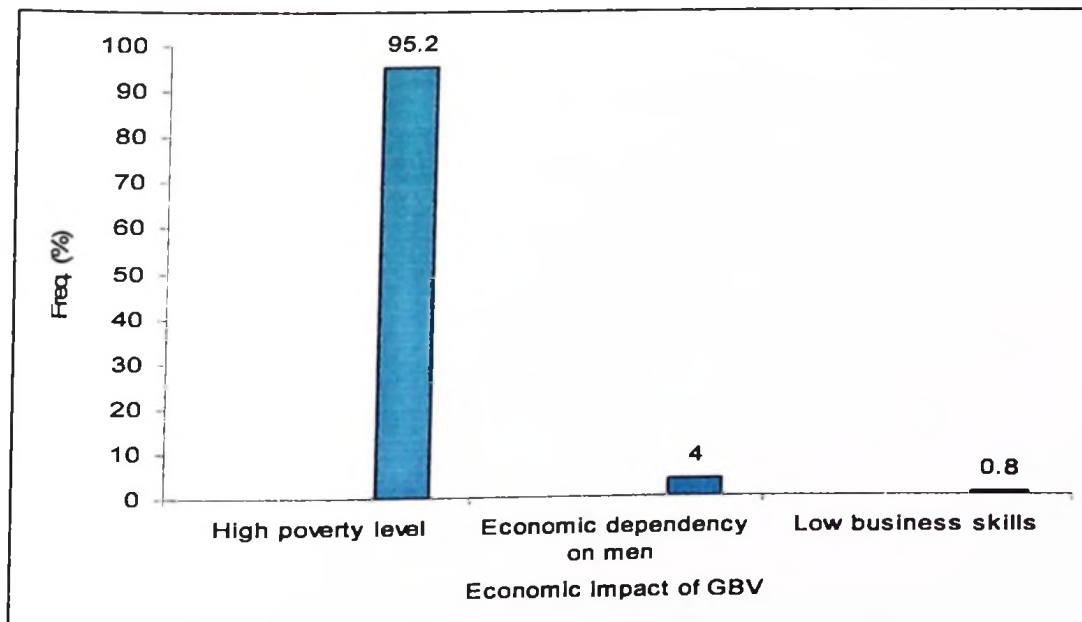


Figure 19: Economic impact of GBV as perceived by the women

4.14 Summary of Major Findings

This chapter presented the results for this study. The status of GBV was critically analysed, while awareness and attitude of both the victim and perpetrators of GBV was also discussed. Although the respondents indicated high knowledge on GBV, they were

found to have experienced high level of GBV. The attitude of both men and women towards GBV was found to be positive regardless of its negative impacts. The responses of women during and after GBV were discussed indicating that most of the victims would like to share GBV information with their biological mothers. However, the cultural norms force them to share such information with their in-laws. The study also indicated no significant difference of GBV among socio-economic statuses of women, signifying that GBV occur to women of all SES. Various empowerment indicators were linked to the dependent variable (GBV). Some of them were significantly related to the GBV while others were not. Decision making at a household level on family issues was one of the empowerment indicators that has a significant relationship to the dependent variable.

4.14.1 The status of GBV

Although the government has been fighting against GBV in the past three decades, GBV is still being practiced in Serengeti District. The study revealed various forms of GBV practiced in the area. These include wife battering which is the most common form of GBV. According to the Feminist theory, major determinants of wife battering include power imbalances between men and women where men have the right to control their wives and not the other way around. A woman can be battered because the husband suspected her of infidelity while men are proud of having extramarital relationships. Other determinants include disobeying the husband's orders. However, as opposed to the gender role conflict theory, the determinants of wife battery include failure of women to fulfil the assigned gender roles.

Restricting women from accessing basic requirements for daily needs of the family was another form of GBV reported to have been widely practiced since the majority of men had a tendency of allotting all the responsibilities of taking care of the family to their

wives. Since women had no control over most of the valuable resources, their incomes were found to be too limited to fulfil their family needs. This form of GBV may result into sexual exploitation of girls and young women by older and rich men.

Other cultural forms of GBV like FGM, marriage between two women, early marriage, marital rape and widow/widower cleansing were found to be widely practiced. Some of these cultural practices like widow cleansing and polygamy are believed to be partly responsible for increasing cases of STIs including HIV/AIDS in the communities. The culture of marriage between two women (*nyumba ntobhu*) practiced in the area was found to be a different kind of marriage. Although it is termed as marriage between the two women, findings from this study reveal that there is no actual marriage. This type of marriage is defined through payment of bride price by the old woman to the parents of the young woman. The old woman regards the young woman as her daughter in-law and simply a care taker and a children bearer of the old woman.

4.14.2 Knowledge of women on empowerment

From the findings, knowledge of women on empowerment was slightly high as the mean index was found to be 19.9 ranging in the highest category. Working in development groups was found to be the best source of empowerment perceived by women. The study also revealed that economic empowerment of women depended on their access to soft loans. However, it was observed from the study findings that economic improvement alone would not lead to empowerment among the women without addressing some of the outdated cultural practices.

4.14.3 Knowledge of Women on GBV

The findings from this study show that knowledge of women on GBV was high although this does not help them from experiencing GBV. The main sources of information

reported include the radio. Although women seem to shoulder heavier workload, they sometimes listen to the radio at the same time doing other duties at home. On the other hand, politicians were reported to be another source of information although this source was found to be unreliable.

4.14.4 Determination of community's attitude towards GBV

The overall attitude of victims and the community towards GBV was found to be positive. Men (in this case, the perpetrators) had positive attitude towards GBV. Females (the victims) had also positive attitude towards GBV probably because GBV has been part and parcel of their culture and have consequently got used to it. Since GBV is sanctioned as a traditional norm, it is passed over from one generation to another through socialization.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 Overview

This chapter provides a conclusion emanating from the study while the recommendations derived from the conclusions are given at various levels including policy, district, community and household. The stakeholders at various levels are advised to take the lead in adopting necessary strategies towards empowerment in order to reduce GBV among women. Finally, areas for further research are also shown.

5.2 Conclusions

Based on the findings, almost every woman has experienced and/or has witnessed GBV in her life time in the study area. Some of them have experienced GBV during childhood, youth and at maturity. GBV in the form of physical violence such as wife battering is widely practiced probably due to lack of awareness among men and women. The men use myths like 'wife battering is a sign of love' in order to justify GBV against women. Such myths are passed over from one generation to another through socialization. Contrary to the gender role conflict theory, one of the determinants of wife battery was the unequal gender role distribution. Women had heavy workload compared to men and this might lead to increasing tensions among women; hence their inability to fulfil their assigned gender roles, leading to high GBV from the men.

The study revealed that women consider GBV as a private issue and therefore women are socialized not to disclose it to the police and to the health centres. In so doing, the perpetrators are not found guilty legally and hence, legal actions alone might not be an

appropriate way of eliminating GBV, this is at odds with the Right based theory which advocates legal actions against the perpetrators of GBV. With this kind sight, change of people's perception and culture is imperative which in the long term requires some concerted efforts by various sectors.

The study findings dispute the myth that there is a marriage between two women as it is commonly advocated by the communities, development actors and politicians in Serengeti District. What is prevailing is just an agreement between the parents of the young girl to allow their daughter to live with the old woman and takes care of the latter. Although the old woman has to pay bride price, the young girl is taken as a daughter in-law.

Although the victims do not report GBV to the police, those who are severely injured are forced by the law to bring PF3 from the police before treatment. This could be a starting point for the police to make the necessary action against the perpetrators. This would necessitate the establishment of a special police unit in the police force, which would be responsible for identification of GBV cases. Staff (men and women) at the police unit must be equipped with knowledge on various approaches against GBV.

Furthermore, women had high knowledge on GBV resulting from various sources of information including radio and political leaders. However, the latter, is believed to be good sources of information during campaigns in order to gain political support from women as their voters. This conclusion is based on the discussion with the group of key informants in the district who reported that women used to be promised to be offered with soft loans as capital for income generating activities. After the campaigns, these promises remain unfulfilled. Since the study was conducted in the rural settings, women lack

accesses to some of the important information sources like the television due to lack of electricity. Some of the villages have no access to newspapers due to poor infrastructure such as roads.

Women and men had positive attitude towards GBV. For instance, paying of bride price was strongly supported by both men and women despite the negative impacts it has on women. Sometimes women fail to divorce because they do not possess enough resources to repay the bride price. Further, women are considered to be properties of men because of the bride price. This conclusion is based on the realization that traditional leaders would not settle some of the marital conflicts of women whose husbands have paid bride price for them. Moreover, women (mothers) receive a very small share of the bride price while men receive the most valuable part of the bride price.

Positive attitudes and beliefs towards GBV underlie a violent man's assumption that men have the right to control women. Violent men therefore, hold rigid traditional gender roles and stereotypic views of masculine and feminine images. This attitude reduces a man's willingness towards the use of egalitarian ways of communication and other non-violent behaviours with his wife.

Based on the findings, women with no formal education have positive attitude towards GBV, it is concluded that formal education is an important vehicle in helping women to acquire the analytical capacity and courage to question unjust practices. Furthermore, illiteracy among women limits them from acquiring knowledge through reading and writing. From the theoretical point of view, education creates the power within, which in turn improves internal confidence of women, thus enabling them to question some of the existing gender inequalities responsible for perpetuating GBV. Furthermore, education

increases one's decision making power which is an important element of empowerment. Although Tanzania is a signatory to various international and national policies striving at eliminating GBV, positive perception is likely to slow down the process. Therefore, a change of victims and perpetrators' attitude towards GBV would be of significant importance.

Decision making at a household level was found to be an important element for women empowerment. This is an indicator that involvement in decision making stimulates dialogue between men and women at home, which would lead to egalitarian ways of solving day to day family conflicts. Decision making requires an individual to have self confidence developed through awareness creation. Similarly, the freedom of using one's income was also found to be an important determinant of GBV, giving an impression that economic empowerment would reduce GBV.

Moreover, age at first marriage was significantly correlated with GBV. Therefore, the study concludes that increasing age at first marriage would reduce chances of experiencing GBV. Although the Tanzanian Marriage Act of 1971, allows marriage of girls at 15 years of age, there is a need to re visit these laws in order to allow more time for girls to accomplish their primary and secondary school education.

Knowledge of the respondents on women empowerment was low as compared with their knowledge on GBV. The respondents regard women empowerment as women's economic improvement mainly in the form of loan provision. It is generally concluded that there is less opportunities for women empowerment in the area because there are few chances of women working in development groups.

5.3 Recommendations

5.3.1 Household Level

The stereotypic thinking of men and women towards masculinities and femininity practiced in the household level are reinforced by norms and customs. These norms create powerful incentives for people's behaviour of becoming perpetrators and victims of GBV. The stereotype can however change through awareness creation among women and men in order to create the 'power within' which would improve the internal confidence of women and men to bring about changes in socialization of both girls and boys at a household level. The challenges are put to the government institutions like the community development office, CBOs, FBOs and NGOs working with local communities to come up with training packages such as: gender, human right issues, management, leadership, accounting and economic related training that would be provided to various stakeholders at household level and at a community level in general. Men, women, police officers, health officers and traditional leaders are the primary stakeholders. Since GBV is at its peak at the reproductive age of the woman, it is recommended that strategies towards ending GBV should be age specific.

5.3.2 Community Level.

(a) Women development groups are important vehicles towards women empowerment.

It is recommended that formulation and improvement of the existing women's development groups would be an appropriate strategy towards ending GBV. These groups should be supported in terms of training, financing their activities and encourage their participation in other rural activities organised by the government and other development actors. Researchers should also consider the possibilities of using these groups for execution of their activities. Through development groups women share information and discuss their problems associated with GBV amongst themselves.

- (b) GBV is assumed to be exacerbated by cultural norms. Therefore, a formulation of community based organizations (CBOs) would stimulate the process of changing some of the cultural practices such as widow/widower cleansing, paying of bride price and marriage between two women. This would be enhanced by lobbying and advocacy by the traditional leaders and the use of by-laws. The formulated CBOs should liaise with other CBOs, NGOs and other government institutions within the District and at National level.
- (c) Looking at women role models such as other successful GBV survivors would improve women's damaged self esteem and help them live without trauma from GBV. Stigma attached to GBV survivors such as FGM survivors should be removed through awareness creation among men and women on the negative impacts of such cultural practices. Training packages should be developed by the district officials under the community development office under collaboration with other development agents working in the area.

5.3.3 District Level

The District Community Development Office, Non-governmental organizations (NGOs) and other responsible institutions are argued to promote growth of micro and small enterprises to take into account some of the women's economic challenges. These institutions should be coordinated by the District community development office. The local government authorities under collaboration with various stakeholders at different levels (District, ward and village) are advised to formulate by-laws that would hold communities responsible and accountable for some of GBV such as early marriage and FGM.

5.3.4 Policy Level

- (a) For successful women empowerment, women must have access to and control over production resources. It is at policy level where the governments, the private sector and community based organizations (CBOs) can provide effective intervention. The findings revealed that there are opportunities for women to access to and have control over houses and land probably because of the Village Land Act of 1999 which allows both men and women to buy land from the village land. It is therefore recommended that these laws should be translated into a simple language (Kiswahili) which is understood by majority (women and men) in the area.
- (b) Since there were high levels of early pregnancies and marriages reported in the area, the government through the Ministry for Community Development, Gender and children should come up with guidelines that could lead into the formulation of policies guiding these young mothers to attend school after delivery. Similarly, some of the outdated laws like the Tanzanian Marriage Act of 1971 which allow marriage of girls at 15 years old should be amended because the Act makes girls loose their education opportunities.
- (c) The government should make other alternatives available to women because although women might be aware of GBV impact, so long as there are no other viable alternatives, women may turn their anger inwards, into frustration, bitterness, or into (religious) or even into committing suicide as way out of suffering.
- These alternatives include: having a special unit in the police force responding to GBV cases where women would be persuaded to disclose various acts of GBV.

- Creating women shelters for protecting GBV survivors who seek assistance from the government before making other life decisions. A woman, who is battered and sometimes chased out of the home, become frustrated and therefore need immediate assistance.

5.4 Areas for Further Research

- (i) There is need to investigate the relationship between change of individual's attitude and the actual behaviour of being a perpetrator and a victim of GBV.
- (ii) It is believed that rural women are resilient to GBV and therefore have positive attitude towards it, hence, there is need for further research in assessing attitude of people towards GBV in urban and rural areas.
- (iii) Research is needed to assess the attitude of the police and health officers towards GBV victims in Serengeti District in order to formulate appropriate strategies towards ending GBV.
- (iv) Research which includes both men and women should be conducted in Serengeti District and in other districts where GBV is high in order to have a true picture for the whole country.
- (v) Assessment of the cost of GBV in the study area should be done in order to formulate pertinent prevention strategies towards ending GBV.
- (vi) The study on the relationship between GBV and HIV/AIDS should also be conducted in order to formulate strategies for reducing HIV/AIDS and GBV.

- (vii) Research should also be done to assess the socio-cultural importance of marriage between two women in Mara Region.

- (viii) Based on the cultural explanation on GBV, there is power of tradition and norms within African culture perpetuating GBV, therefore, the study is needed to explore how women can be protected against violence and at the same time safeguarding their marriage and culture

REFERENCES

- About, C. L. (2004). The Stop FGM Project. Afro-Arab expert consultation on legal tools for the prevention of female genital mutilation. [<http://www.pambazuka.org/en/issue/228>] site visited on 5/7/2007.
- Ackerly, B.A. (1995). Testing the tools of development: credit programme loan involvement and women's empowerment. [<http://www.popline.org/docs/1136/1126.html>] site visited on 19/10/2008.
- ACT-Mara (2006). *End of Term Evaluation Report for the Integrated Community Development Programme (ICDP)*. The Anglican Church of Tanzania Diocese of Mara-Tanzania. 40pp.
- ACT-Mara (2008). *Baseline Report on HIV/AIDS for the AIDS-ABC Programme*. The Anglican Church of Tanzania Diocese of Mara-Tanzania. 112pp.
- Akhter, R., Saiful Islam, A.K.M. and Ward, K.B. (2005). Knowledge, attitudes, and practices on domestic violence against women in Bangladesh. [http://www.allacademic.com/meta/p22297_index.html] site visited on 23/9/2008.
- Alavalapati, J.R.R., Luckert, M.K.G. and Gill, D.S. (1995). Adoption of Agroforestry practices: a case study from Andhra Pradesh, India. *Agroforestry Systems* 32 (1): 1-14.
- Al-Riyami, A.A. and Afifi, M. (2003). Determinants of women's fertility in Oman. *Saudi Medical Journal* 24 (7):748-753.

- Ahluwalia, I.B., Schmid, T., Kouletio, M. and Kanenda, O. (2003). An evaluation of a community-based approach to safe motherhood in North-Western Tanzania. *International Journal of Gynaecology and Obstetrics* 82: 231-240.
- Amussen, B.D. (1994). Being stirred too much unquiet ness. Violence and domestic violence in modern England. *Journal of Women's History* 6: 70-89.
- Anderson, C.L. (2005). Theorizing gender in intimate partner violence research. *Sex Roles* 52: 853-865.
- Antai, D.E. and Antai, J.B. (2008). Attitude of women towards intimate partner violence: A study of rural women in Nigeria. *The International Electronic Journal of Rural and Remote Health Research, Education, Practice and Policy*. [http://www.rrh.org.au] site visited on 17 /10/ 2008.
- Asiyanbola, A.R. (2006). Residential location decision making and gender in Nigeria. *Geoforum* 37:1059-1065.
- Aslanbeigui, N. Pressman, S. and Summerfield, G. (1994). Women and Economic Transformation. In: *Women in The Age of Economic Transformation. Gender Impact of Reforms in post-socialist and Developing Countries*. (Edited by Aslanbeigui, N; Pressman, S; Summerfield, G). London and New York. pp.1-7.
- Bailey, K.D. (1994). *Methods of Social Research*. New York. The Free Press. 345pp.

- Bargai, N., Ben-Shakhar, G. And Shalev, A.Y. (2007). Posttraumatic stress disorder and depression in battered women: The mediating role of learned helplessness. *Journal of Family Violence* 22: 267-275.
- Batliwala, S. (2007). Putting power back into empowerment. [<http://www.open-democracy.net>] site visited on 18/11/2008.
- Bell, K.M. and Naugle, A.E. (2008). Intimate partner violence theoretical considerations: Moving towards a contextual framework. *Clinical Psychology Review* 28:1096-1107.
- Boserup, E. (1970). *Women's Role in the Economic Development*. New York: St. Martin Press. 229pp.
- Brown, M.A. (2006). WID and GAD in Dar es Salaam Tanzania: Reappraising gender planning approaches in theory and practice. *Journal of Women Politics and Policy* 28(2):57-83.
- Burke, K. (2000). Gender role conflict and psychological well-being: An exploration in men enrolled to attend and initiatory weekend. Dissertation for Award of MSc Degree at University of Maryland. Baltimore County. Baltimore, 180pp.
- Castro, R., Casique, I. and Brindis, C.D. (2008). Empowerment and physical violence through out women's reproductive life in Mexico. *Violence Against Women* 14: 655-677.

- Charmes, J. and Wieringa, S. (2003). Measuring women's empowerment: An Assessment of the gender-related Development Index and the Gender Empowerment Measure. *Journal of Human Development* 4: 420-435.
- Chermack, S. T., Murray, R. L., Walton, M. A., Booth, B. A., Wryobeck, J. and Blow, F. C. (2008). Partner aggression between men and women in substance use disorder treatment. Correlates of psychological and physical aggression and injury. *Drug and Alcohol Dependence* 98: 35-44.
- Chesler, P. (2010). World wide trends in honour killings. *The Middle East Quarterly* 17(2): 3-11.
- Datta, R. and Kornberg, J. (2005). Introduction: Empowerment and Disempowerment. In: *Women in Developing Countries: Assessing Strategies for Empowerment*. (Edited by Datta. R. and Kornberg, J). Viva Books Private Limited, New Delhi. pp.56-91.
- December, G. (1999). *Gender Violence in Africa. African Women's Response*. St Maria Press, New York. 298pp.
- De Vaus, L. (1993). *Surveys in Social Research (Third Edition)*. UCL Press. 379pp.
- Ellsberg, M. (2008). Violence against pregnant women. A Global health crisis. [<http://www.globalhealth.org/report/text>] site visited on 9/9/2008.
- Ellsberg, M. and Heise, L. (2005). *Researching Violence against Women. A Practical Guide for Researchers and Activist*. World Health Organization and Programme for Appropriate Technology in Health (PATH). Washington DC, United States. 259pp.

- Erman, T., Kalaycioglu, S. and Rittersberger-Tilic, H. (2002). Money-earning activities and empowerment experiences of rural migrant women in the city: The case of Turkey. *Women Studies International Forum* 25: 395-410.
- Faramazi, M., Esmailzadeh, S. and Msovi, S. (2005). A comparison of abused and non-abused women's definitions of domestic violence and attitudes to acceptance of male dominance. *European Journal of Obstetrics and Gynaecology and Reproductive Biology* 4: 225-231
- Fawole, O. (2008). Economic violence to women and girls. Is it receiving the necessary attention? Trauma violence and abuse. *SAGE Online Publications* 9(3): 167-177.
- Ferguson, H., Hearn, J., Holter, O. G., Jalmert, L., Kimmel, M., Lang, J. and Morrel, R. (2004). Ending Gender Based Violence: A call for Global Action to Involve Men. In: *Summary of Research*. (Edited by Vylter, S). The Swedish Government, SIDA and the Bank of Sweden Tercentenary Foundation, Sweden. pp.91-132.
- FEMNET (2001). Training manual on gender based violence. [<http://www.femnet.or.ke/documents/gbv>] site visited on 12/05/2007.
- Gazdar, H. (2008). The Transition of Mass Literacy. Comparative Insights from Sweden and Pakistan. In: *Global Perspective in Gender Equality. Revising the Gaze*. (Edited by Kabeer, N; Stark, A; Magnus, E). EGDI, Sweden. pp.19-39.
- Glenn, D.I. (2009). Determining sample size. [<http://www.edis.ifas.ufl.edu>] site visited on 29/5/ 2010.

- Gracia, E. and Herrero, J. (2006). Public attitude towards reporting partner violence against women and reporting behavior. *Journal of Marriage and Family* 68: 759-768.
- Gonzalez-Brenes, M. (2004). Domestic violence and household decision making: evidence from East Africa. [http://www.sscnet.ucla.edu/polisci/wgape/papers/7_gonzalez] site visited on 30/1/2008.
- Goussinky, R. and Borochowitz, D.Y. (2007). Personal history dynamics of dating violence among Israel students. *Family Violence* 22: 247-258.
- Gupta, K. and Yesudian, P.P. (2006). Evidence of women's empowerment in India: A study of social-spatial disparities. *Geo Journal* 65: 365-380.
- Gwatkin, D.R., Rusteub, S., Johnson, K., Pande, R.P. and Wagstaff, A. (2000). *Socio-economic Differences in Health, Nutrition and Population in Bangladesh*. HNP/Poverty Thematic group of the World Bank. Wahington DC. 28pp.
- Hair, J.F., Anderson, R.E., Tatham, R. and Black, W. (1995). *Multivariate Data Analysis*. Englewood Cliffs. NJ, Prentice Hall. 730pp.
- Hamby, J. (2005). Measuring gender differences in partner violence: Implications from research on other forms of violence and socially undesirable behavior. *Sex Roles* 52 (11): 725-742.

- Hunt, J., and Kasynathan, N. (2001). Pathways to empowerment? Reflections on microfinance and transformation in gender relations in South Asia. *Gender and Development* 9:42-52.
- Hur, H.M. (2006). Empowerment in terms of theoretical perspective: Exploring a typology of the progress and components across disciplines. *Journal of Community Psychology* 34: 523-540.
- Huvisa, T.P.L. (2003). Participation in Community Forest Management with gender perspective: A case of Rural Women Integrated Project in Ruvuma Region. Thesis for Award of PhD Degree at Sokoine University of Agriculture. Morogoro, Tanzania. 212pp.
- Jackson, S. (1999). Issues in dating violence research: A review of the literature. *Aggression and Violent Behaviour* 4(2): 233-247.
- Johnson, P. (1995). Patriarchal Terrorism and Common Couple Violence: Two forms of violence against women. *Journal of Marriage and Family* 57: 283-294.
- Johnson, P. (1999). Patriarchal Terrorism and Common Couple Violence: Two forms of violence against women. [<http://www.personal.psu.edu/faculty/m/p/mp/dvpage.html>] site visited on 13/12/2008.
- Jones, S.D., Ehiri, J. and Anyanwu, E. (2004). Female genital mutilation in developing countries: An agenda for public health response. *European Journal of Obstetric, Gynaecology and Reproductive Biology* 116: 144-151.

- Khafagi, F. (2001). Breaking cultural and social taboos: The fight against FGM in Egypt. *The Society for International Development* 44 (3): 74-78.
- Kailo, K. (2005). Sexual Violence, Monoacculturation and the Mechanisms of Patriarchal Violence. In: *Women's Studies Research, Conceptual Developments and Action*. (Edited by Tanzarn, N) Gendered World Series. Department of Women and Gender Studies, Makerere University, Kampala, Uganda. pp 83-91.
- Kamal, N., Saha, U.R., Khan, M.A. and Bairagi, R. (2006). Use of periodic abstinence in Bangladesh: do they really understand? *Journal of Biosocial Science* 39(1): 27-40.
- Kalichman, S.C., Simbayi, C., Michelle, K., Cain, D. and Jooste, S. (2007). Alcohol use and sexual risk for HIV/AIDS in Sub-Saharan Africa: Systematic review of empirical findings. *Society of Prevention Research* 8:141-151.
- Karl, M. (1995). *Women and Empowerment, Participation and Decision Making*. Zed Books. Ltd. London & New Jersey. 173pp.
- Kassim, S. (2004). Physical violence against women and the law in mainland Tanzania. In: *Proceedings of Gender and Development in Tanzania Past, Present and Future*. *Gender seminar series No. 1* (Edited by Njau, A., Mruma, T.), WRDP, Dar es salaam, Tanzania. pp.121-136.
- Kayunze, K.A. (2008). HIV/AIDS and food security in Rufiji District, Tanzania. Thesis for Award of PhD Degree at Sokoine University of Agriculture. Morogoro, Tanzania. 258pp.

- Kabeer, N. (1999). Resource, agency, achievements: Reflection on the measurement of women empowerment. *Development and Change* 30(3): 435-464.
- Kabeer, N. (2005). Gender equality and women empowerment: A critical analysis of the third Millennium Development Goal. *Gender and Development* 13:13-24.
- Kennedy, A.C. (2007). Homelessness, violence exposure, and school participation among urban adolescent mothers. *Journal of Community Psychology* 35 (5): 639-654.
- Kim, J.C., Watts, C.H., Hargreaves, J.R., Ndhlovu, L.X., Phetla, G., Moriso, L.A., Busza, J., Porter, J.D.H. and Pronyk, P. (2007). Understanding the impact of a microfinance-based intervention on women's empowerment and the reduction of intimate partner violence in South Africa. *American Journal of Public Health* 97: 1794-1802.
- Kiondo, E. (2003). Elections, Electoral Processes and Women Empowerment in The Coming Millennium. Paper presented at AGSC, 27-30 September 1999 at TGNP Resources Centre, Mabibo, Dar es Salaam. 11pp.
- Kishor, S. and Johnson, K. (2004). Reproductive health and domestic violence: Are the poorest women uniquely disadvantaged. *Demography* 43(2): 293-307.
- Kline, P. (1994). *An easy Guide to Factor Analysis*. Routledge Taylor and Francis group. London and New York. 194pp.

- Koda, B. and Ngaiza, M. (2004). Introduction to gender and related concepts. In: *Proceedings of Gender and Development in Tanzania Past, Present and Future. Gender seminar series No. 1* (Edited by Njau, A. Mruma, T.), WRDP, Dar es salaam, Tanzania. pp.1-13.
- Koda, B. (2004). Women participation in politics and public life in Tanzania. In: *Proceeding of Gender and Development in Tanzania Past, Present and Future. Gender seminar series No. 1* (Edited by Njau, A. Mruma, T.). WRDP. Dar es salaam, Tanzania. pp.97-106.
- Kothari, C.R. (2004). *Research Methodology, Methods and Techniques*. New Age International (P) Limited Publishers, New Delhi. 401pp.
- Labonne, J., Biller, D. and Chase, D. (2007). Inequalities and relative wealth: Do they matter for trust. Evidence from poor communities in the Philippines: Social development papers. *Community Driven Development* 103:1-19.
- Lampert, L. (1996). Women's strategy for survival: Developing agency in abusive relationships. *Journal of Family Violence* 11: 269-289.
- Lentz, A.S. (1999). Revisiting the Rule of Thumb: An Overview of the History of Wife Abuse. In: *Women and Domestic Violence. An Interdisciplinary Approach*. (Edited by Feder, L.), The Haworth Press, Inc. New York-London. pp.9-27.

- Lindhorst, T, and Tajima, E. (2008). Reconceptualizing and operationalizing context in survey research on intimate partner violence. *Journal of Interpersonal Violence* 23 (3): 362-388.
- Lugalla, J.L.P., Emmelin, M.A.C., Mutembei, A.K., Comoro, C.J., Killewo, J.Z.J., Kwesigabo, G., Sandstrom, A.I.M. and Dalhlgren, L.G. (1999) The social and cultural context of HIV/AIDS transmission in the Kagera Region, Tanzania. *Journal of Asian and African Studies* 6: 377-402.
- Lusekelo, P. (2007). Rise in women's income has perpetuated soaring domestic violence. WiLDAF-The Guardian Dar es Salaam. [<http://www.ippmedia.com>] site visited on 27/5/ 2008.
- Magar, V. (2003). Empowerment approaches to gender-based violence: Women's courts in Delhi slums. *Women's Study International Forum* 26 (6):509-523.
- Mahmud, S. (1994). From women's status to empowerment: The shift in the population policy debate. *The Bangladesh Development Studies* 22: 51- 95.
- Malhotra, A. (2003). Conceptualizing and measuring women's empowerment as a variable in international development. [<http://www.siteresources.worldbank.org/intempowerment/resources>] site visited on 19/11/2008.
- Malungo, J.R.S. (2001). Sexual cleansing (kusalazya) and ievirate marriage (kunjilila mung'anda) in the era of AIDS: changes in perceptions and practices in Zambia. *Journal of Social Science and Medicine* 53: 371-382.

- Mathew, A., Scott, A.P., Gallagher, P. and Corbally, M.A. (2006). An exploratory study of the conditions important in facilitating the empowerment of Midwives. Midwifery. [<http://www.sciencedirect.com>] site visited on 6 /11/ 2008.
- McCloskey, L.A, Williams, C. and Larsen, U. (2005). Gender inequality and intimate partner violence among women in Moshi, Tanzania. *International Family Planning Perspectives* 3: 125-130.
- McHugh, M.C. and Frizer, I.H. (2005). Understanding gender and intimate partner violence: Theoretical and imperial approaches. *Sex Roles* 52:717-724.
- McKenzie, D.J. (2005). Measuring inequality with assert indicators. *Journal of Population Economics* 18: 229-260.
- Merry, S.E. (2006). *Human Rights and Gender Violence*. Translating International Law into Local Justice. The University of Chikago Press, Chikago and London. 269pp.
- Mitra, A. and Singh, P. (2008). Human capital attainment and gender empowerment: The Kerala paradox. *Social Science Quarterly* 88(5): 1227-1242.
- Monkman, K., Miles, R. and Easton, P. (2007). The transformatory potential of a village empowerment program: The Tostan replication in Mali. *Women Studies International Forum* 30: 451-464.
- Moreno, G. C., Jansen, A.F.M.H., Ellsberg, C.M., Heise, L. and Watts, C. (2005). WHO Multi country study on women's health and domestic violence. Initial result on prevalence, health outcomes and women's response. [<http://www.who.int/gender/documents/en/html>] site visited on 29/4/2007.

- Moreno, G.C., Henrica, J.A.F.M., Ellsberg, M., Lori, H. and Charlotte, W.H. (2006). *Prevalence of Intimate Partner Violence: Finding from WHO Multi-Country on Women's Health and Domestic Violence*. Lancet Ltd, 84 theobald RD, London WC18RR, England. 368pp.
- Moser, C. (1989). Gender planning in the third world: meeting practical and structural needs. *World Development* 17(11): 1799-1825.
- Moser, C., and Felton, A. (2007). *The Construction of an Asset Index Measuring Asset Accumulation in Ecuador*. The Chronic Poverty Research Centre. Washington DC. 20pp.
- Mosedale, S. (2005). Assessing women's empowerment towards a conceptual framework. *Journal of International Development* 17 (2): 243-257.
- Mukangara, F. and Koda, B.O. (1997). *Beyond Inequalities: Women in Tanzania*. TGNP and the Southern African Research and documentation centre (SARDC). Dar es Salaam, Tanzania. 92pp.
- Muro, J.P. (2003). *The Empowerment of Women: New Concepts and Methodology in Gender and Development Concerns*. TGNP. Dar es Salaam, Tanzania. 20pp.
- Musendo, Z. (2002). Girls: The most harassed, exploited and discriminated. [http://www.newsfromafrica.org/newsfromafrica/articles/art_7882.html] site visited on 28/8/2009.

- Mwageni, E., Masanja, H., Juma, J., Momburi, D., Mkilindi, Y., Mbuya, C., Kasale, H., Graham, R. and Savigny de, D. (2005). Socio-economic status and health inequalities in rural Tanzania: Evidence from the Rufiji demographic surveillance system: In *Measuring Health Equity in Small Areas Findings from Demographic Surveillance Systems*. (Edited by Bhuiya, A. and Haines, A.), Ashgate. pp.9-32.
- Naved, R.T. (1994). Empowerment of women: Listening to the voice of women. *The Bangladesh Development Studies* 22(2):155-178.
- Nayak, B., Byrne, C.A., Martin, M.K. and Abraham, A.G. (2003). Attitude towards violence against women. A cross-nation study. *Sex Roles* 49(10):333-342.
- Nilsen, J.M. (1990). *Sex and Gender in Society. Perspectives on Stratification*. Waveland Press, Illinois. 293pp.
- Njuki, J.M. (2001). Gender roles in Agroforestry. A social economic analysis of Embu and Kirinyanga Districts-Kenya. Thesis for Award of PhD Degree at Sokoine University of Agriculture. Morogoro, Tanzania, 268pp.
- Nkya, A. (2003). Culture-Tanzania. Activists challenge gender inequality as women marry women. [<http://www.aegis.com/news/2003/IP/html>] site visited on 25/7/2007.
- O'Keefe, M. (1998). Factors mediating the link between witnessing interparental violence and dating violence. *Journal of Family Violence* 13(1): 39-57.

- O'Neil, J.M. (1997). Men's gender role conflict: Personal reflection and overview of recent research. *Society for the Psychological Study of Men and Masculinity* (3): 10-15.
- O'Toole, K. and Macgarvey, A. (2003). Rural women and local economic development in South West Victoria. *Journal of Rural Studies* 19 (20):173-186.
- Pett, M.A., Lackey, N. R. and Sullivan, J.L. (2003). *Making Sense of Factor Analysis for Instrument Development in Health Care Research*. California Sage. 370pp.
- Pickup, F., Williams, S. and Sweetman, C. (2001). *Ending Violence against Women. Challenge for Development and Humanitarian Work*. Oxfam GB. England. 366pp.
- Pineda, S. (2005). *Anti-VAWC Hand book. Anti-violence Against Women and their Children Act (Anti-VAWC Act or Republic Act No. 9262)*. Ing Makababayang Aksyon (IMA) Foundation, Inc., Philippines. 74pp.
- Population Information Programs and Change (PIP and CHANGE) and Centre for Health and Gender Equity (CHGE) (1999). Ending violence against women. *Issues in World Health* 27: 21-44.
- Poulin, M. (2007). Sex, money and premarital partnerships in Southern Malawi. *Social Science and Medicine* 65: 2383-2393.
- Pronyk, P.M., Kim, J.C., Abramsk, T., Phetla, G., Hargreaves, J.R., Morison, L.A., Watts, C., Busza, J. and Porter, J.D.H. (2008). A combined microfinance and training intervention can reduce HIV risks behaviour in young female participants. *AIDS* 22: 1659-1665.

- Richarme, M. (2001). Eleven multivariate analysis techniques: Key tools in your marketing research survival kit. [<http://www.decisionanalyst.com>] site visited on 13/7/2009.
- Robbin, J.D. (1992). Educating against gender based violence. Women equity. [<http://www.edc.org/women'sequity/pubs/digests-gbviolence.html>] site visited on 9/9/2008.
- Romito, P. and Grassi, M. (2007). Does violence affect one gender more than the other? The mental health impact of violence among men and female University Students. *Social Science and Medicine* 65: 1224-1234.
- Rowland, J. (1997). *Questioning Empowerment: Working with Women in Honduras*. Oxfarm UK and Ireland. 180pp.
- Russo, N. F. and Pirlott, A. (2006). Gender based violence concepts, methods and findings. *New York Academy of Sciences* 87:178-205.
- Sa, Z. and Larsen, U. (2007). Gender inequality increases women's risk of HIV infection in Moshi Tanzania. *Biosocial Science* 40: 505-525.
- SADC (2004). *Gender Justice Barometer. Audit of Declaration on Gender and Development. Addendum on the Eradication of Violence against Women and Children. Audit of Declaration on Gender and Development*. Gender links, GEMSA, Australian Government, AusAID, South Africa. 92pp.

- Schuler, S.R., Bates, L.M. and Islam, F. (2008). Women's Rights, Domestic Violence and Resource Seeking in Rural Bangladesh. *Violence against Women* 14:326-345.
- Schuler, S.R., Hashemi, S.M. and Badal, H.S. (1998). Men's violence against women in rural Bangladesh: Undermined or exacerbated by micro credit programmes. *Development in Practice* 8: 148-157.
- Schwerin, E. (1995). *Mediation, Citizen Empowerment and Transformational Politics*. Westport: Praeger. 224pp.
- Sen, A. (1999). *Development as Freedom*. Oxford University Press, Oxford, UK. 366pp.
- Senkondo, E.M.M. (2000). Risk attitude and risk perception in Agroforestry decisions: The case of Babati, Tanzania. Thesis for Award of PhD at Wageningen University, The Netherlands. 211pp.
- Shayo, R. (2004). Gender and economics: Analysing the changing role of women participation in economic development. In: *Gender and Development in Tanzania: Past, Present and Future*. (Edited by Njau, A., Mruma, T.), WRDP, Dar es Salaam, Tanzania. pp.107-117.
- Shrader, E. (2001). *Methodologies to Measure the Gender Dimensions of Crime and Violence*. Gender Unit. Poverty Reduction and Economic Management. Latin America and Caribbean Region. The World Bank. Washington DC. 39pp.
- Simon, M.M. (2006). Adoption of rotational woodlot technology in Semi-Arid Areas of Tanzania: The case of Tabora Region. Thesis for Award of PhD at Sokoine University of Agriculture, Morogoro, Tanzania. 298pp.

- Sokoloff, J.N. and Pratts, C. (2005). *Domestic Violence at the Margins: Readings on Race, Class, Gender and Culture*. Rutgers University press. New Brunswick, New Jersey. 423pp.
- Stickley, A., Kislitsyna, O., Timofoeva, I. and Vagero, D. (2008). Attitude towards intimate partner violence against women in Moscow, Russia. *Journal of Family Violence* 23: 447-456.
- Stine, R.A. (1995). Graphical interpretation of variance inflation factors. *The American Statistician Journal* 49: 609-640.
- Tesoriero, F. (2006). Strengthening communities through women's Self Help Groups in Southern India. *Journal of Oxford University Press and Community Development* 41 (3): 321-333.
- TGNP (2004). Changing gender roles in Tanzania. *Sexual Health Exchange* 4: 13-53.
- Thorp, R., Stewart, F. and Heyer, A. (2005). When and how far is group formation a route out of chronic poverty? *Journal of Human Development* 33(6): 907-920.
- Toufique, M.M.K. and Razzaque, M.A. (2007). *Domestic Violence against Women: Its Determinants and Implications for Gender Resource Allocation*. Research Paper No 2007/80. UNU-World Institutions for Development and Economic Research (WIDER). United Nations University. Washington DC, USA. 31pp.

- Turshen, M. (1994). The Impact of Economic Reforms on Women's Health and Health Care in Sub-Saharan Africa: In: *Women in the Age of Economic Transformation. Gender Impact of Reforms in Post-socialist and Developing Countries.* (Edited by Aslanbeigui, N., Pressman, S. and Summerfield, G.), Routledge London and New York. Pp.77-94.
- UN (2005). Human Rights. [<http://www.unfpa.org>] site visited on 8/9/2008.
- UN (2006). *Millennium Development Goals Report.* New York. 32pp.
- UN (2007). Arresting marital rape. International day for eliminating gender based violence. [<http://thestar.com.my.lifestyle/story.asp>] site visited on 9/9/2008.
- UNDP (1995). *Human Development Report.* The United Nations Development Programme. Oxford University press. Washington, DC.10pp.
- UNFPA (2005). Human Rights Principles. [<http://www.unfpa.org/rights/principles.htm>] site visited on 5/5/2008.
- UNHCR (1995). Human Right watch world report. [<http://www.unhcr.org/refworld/docid/467fcaad23.html>] site visited on 11/9/2008.
- UNHCR (2003). Guidelines for prevention and responses: Sexual and gender based violence against refugees, Returnees and internally displaced persons. [http://www.rhrc.org/pdf/gl_sgbv_03.pdf] site visited on 23/5/2008.

- United Republic of Tanzania (URT) (1992). *Policy on Women in Development in Tanzania*. Ministry of Community Development Women Affairs and Children. Dar es Salaam Tanzania. 22pp.
- URT (1998). *Sexual Offences Special Provisions Act of 1998*. Government printers-Dar es Salaam, Tanzania. 17pp.
- URT (2002). *Household Budget Survey 2000/01*. National Bureau of Statistics, Dar es Salaam, Tanzania. 188pp.
- URT (2003). Tanzania Population and Housing Census of 2002. National Bureau of Statistics, President's office Planning and Privatization. [<http://www.tanzania.go.tz/census/nbs.htm>] site visited on 23/9/2007.
- URT (2005a). *Population and Household Census Village and Street Statistics of 2002: Age and Sex Distribution*. President's office, Dar es Salaam. 106pp.
- URT (2005b). *National Strategy for Growth and Reduction of Poverty (NSGRP)*. Vice President's Office, Dar es Salaam-Tanzania. 73pp.
- URT (2005c). *Implementation of the Beijing Platform for Action and the Outcome Document of Twenty-Third Special Session of the General Assembly-Beijing*. Country Report 10, Dar es salaam. 36pp.
- URT (2005d). *Country Report on Implementation of the Beijing Platform for Action and the Outcome Document of Twenty-Third Special Session of the General Assembly-Beijing +10*, Dar es salaam. 36pp.

- URT (2006). *Analytical Report*. National Bureau of Statistics. Ministry of Planning, Economy and Empowerment, Dar es salaam, Tanzania. 212pp.
- USAID (2006). *Addressing Gender Based Violence through USAID'S Health Programs: A Guide for Health Sector Program Officers*. Washington DC, USA. 58pp.
- Vickers, J. (1991). *Women and the World Economic Crisis*. Women and World Development Series. Zed Books Ltd. London & New Jersey. 146pp.
- Vyas, S. and Kumaranayake, L. (2006). Constructing socio economic status indices: How to use principal component analysis. *Oxford Journal of Health Policy and Planning* 21(6): 459-468.
- Watson, P. (2000). *Gender- Based Violence*. Gleaner Company Ltd, Washington DC, USA. 130pp.
- Whestone, S.T. (2001). Measuring the impact of a domestic violence coordinated response team: Policing. *International Journal of Police Strategies and Management* 24(3): 371-398.
- Whitehead, S.M. and Barrett, F.J. (2006). The sociology of masculinity. In: *The Masculine Reader*. (Edited by Whitehead, S.M. and Barrett, F.J.), Polity Press Cambridge CB2 1UR. UK. pp.1-26.
- WHO (2005). Multi-country study of women's health and domestic violence. [<http://www.who.int/gender/violence/en/>] site visited on 20/10/ 2008.

- WHO (2006). *Prevalence of Intimate Partner Violence: Findings From (WHO) Multicountry Study on Women's Health and Domestic Violence*. Lancet Ltd, 84, Theobalds RD, London WC1X8RR, England. 368pp.
- Wigt, D., Plummer, M., Mshana, G., Wamoyi, J., Shigongo, Z. S., and Ross, D.A. (2006). Contradictory sexual norms and expectations for young people among women in Northern rural Tanzania. *Social Science and Medicine* 62: 61-73.
- Williman, N. (2006). *Social Research Methods. Knowledge and Skills for Success*: SAGE Publications Ltd. Loss Angles-USA. 224pp.
- Wright, R., Kiguwa, P. and Potter, C. (2007). The significance of sheltering in the lives of four women affected by abusive relationship. *South African Journal of Psychology* 37(3):616-637.
- Yllo, K. and LeClerc, D. (1988). Marital rape. In: *Abuse and Religion when Praying isn't Enough*. (Edited by Horton, A.L. and Williamson, J.A.), Lexington, Massachusetts. pp.48-57.

APPENDICES

Appendix 1: Question guide for focus group discussion

Empowerment strategies

1. Are there any NGOs/CBO/Government projects dealing with women empowerment in this area?
2. Are there any opportunities for women and other disadvantaged groups to participation in development groups?
3. What are the sources of information regarding women empowerment process in this area?
4. What are the major sources of income for the family in the area
5. Are there any opportunities for income generating activities and how easy it is for women to access those opportunities
6. How do women use their income at household level?
7. Are there any possibility of women to access and control over resources
8. Are there any possibilities for individual autonomy of women in the society?
9. Are there changes in socialization process like men and boys being involved in domestic chores?

Involvement of women in decision making

1. Do women participate in major family decision like sending children to school?
2. Is it possible for women to participate in decision making on allocation of resources like land and other immovable assets?
3. Do women participate in decision making about daughter's marriage?
4. Who decide what and when to plant crops?
5. When participating in decision making, does women's idea being implemented at household level?
6. How do you use your own income/what are your priorities?
 1. Purchasing of food for the family
 2. Purchasing school uniforms for children
 3. Paying school fees
 4. Sending money to your biological parents
 5. Keeping money in personal account
 6. The husband keeps them into the family account
7. Does your husband/partner decide on how to use your income

Gender based violence

1. What are the forms of GBV existing in the area?
2. Who are the perpetrators and who are the victims?
3. What are the main causes of GBV in this area?
4. What are the frequency of occurrence of GBV in the area
5. What are the reactions of women after and during GBV like wife battery
6. To whom women report about GBV
7. Are there any strategies to overcome GBV

Appendix 2: Questionnaire on women empowerment and gender based violence

My name is....., I work for..... We are conducting a survey in Serengeti District to learn about women’s status on women empowerment and GBV. You have been chosen by chance (randomly selected)) to participate in the study. I want to assure you that all of your answers will be kept strictly secret. I will not keep a record of your name or address if you do not like to. You have the right to stop the interview at any time or to skip any questions that you don’t want to answer. There are no right or wrong answers. Some of the topics may be difficult to answer/discuss, but many women have found it useful to have the opportunity to talk. Your participation is completely voluntary but your experience could be very helpful to other women in Tanzania.

The interview takes approximately 30 minutes to complete.

Ethical issue	Yes	No
Ethical question		
1. Do you have a question		
2. Do you agree to be interviewed		
3. Is it good to start our conversation now		
4. Is it good to talk in private		
5. Is this a good place to hold interview		
6. If the answer to question 5 above is ‘No’, do you have a good place you would like to go		

A. Questionnaire identification

Issues	Response
Date of interview	
Questionnaire number	
Village name	
Ward	
Division	
District	
Name of the enumerator	

B: Background information

In this section, I would like to know your background information. I am requesting you to respond to the following questions about yourself.

1. What is your marital status? (circle the correct answer)
 1. Single.....
 2. Married.....
 3. Divorced.....
 4. Cohabiting.....
 5. Widow.....
 6. Separate.....
 7. Others specify.....

2. How old are in years?.....

3. Kindly indicate type of your marriage (circle the correct answer)
1. Monogamy
 2. Polygamy
 3. Others specify
4. What is your relationship with the head of this house? (Circle the correct answer)
1. Spouse
 2. Brother
 3. Sister
 4. Uncle
 5. Aunt
 6. Others specify
5. What is your religion (Circle the correct answer)
1. Christian
 2. Moslem
 3. Traditional religion
 4. Others specify
6. What is your main occupation? (Circle the correct answer)
1. Crop producer
 2. Livestock keeper
 3. Retired officer
 4. Self employed
 5. Formally employed
 6. House wife
 7. Others specify

C. Women empowerment

I am going to ask specific questions about women empowered as perceived by you.

7. Have you ever heard of the concept empowerment (Circle the correct answer)
1. Yes
 2. No
- 8) If the answer above is yes, can you define it? Circle the option which you think can fit the definition of women empowerment)
1. Mobilization of women of all age groups to overcome institutionalized gender discrimination in the society
 2. Mobilizing women in the urban areas to be cruel
 3. Mobilizing women to improve their economic status
 4. The process of reducing chances of gender based violence among women
 5. Mobilizing women to disobey their husband
 6. Others specify.....
9. Where did you get information on women empowerment? (Circle the option which you think are the major sources of information)
1. from school
 2. from neighbours
 3. from development group members

4. from the health centres
5. through radio/TV/Newspapers
6. through development actors working in our village
7. from political leaders
8. from village government leaders

10. What is the major source of income for your family? (Circle the correct option)

1. Sell of agricultural products
2. Sell of livestock and livestock products
3. Doing official work
4. Doing business
5. Others

11. Are you involved in decision making for your family matters?

1. Yes
2. No

12. If the answer above is yes, can you specify issues which you are involved (Circle options which you think you are involved)

- 1) Decision regarding children's education
- 2) Decision regarding types of crops to grow in the field
- 3) Decision regarding the number of children to bear
- 4) Decision on whom to marry our daughters/son
- 5) Decision on family resources allocation (Land, Livestock, and House)
- 6) Decision on how to use family income

13. Are there CBOs/NGOs/ Government projects creating awareness among women as an empowerment process (circle the correct answer)

- 1) Yes
- 2) No

14. If the answer is yes, do you work with any of the above mentioned development actors (Circle the correct answer)

- 1) Yes
- 2) No

15. If the answer is yes what kind of activities are you doing? (Circle the correct answer)

- 1) Agricultural kind of activities
- 2) Livestock keeping related kind of activities
- 3) Income generating kind of activities
- 4) Family issues
- 5) Others specify

16. Are you a member of any development group in this area? (circle the correct answer)

1. Yes
2. No

17. How do you spend income obtained from your major family sources (circle the options which you think to be appropriate)

1. Purchasing food for the family
2. Purchasing school uniforms for children
3. Purchasing daily requirements at home
4. Purchasing clothes for myself and the children
5. Send the money to my biological parents
6. Keep them in the family account
7. My husband plan for the use of the money I earn
8. Keep them in my own account

D. Socio economic data

18. Would you please tell me about types and quantities of assets you think you have access and control in the recent five years (Put a tick on the respective asset where you think you have access/control or both)

S/N	Access means the person is allowed to use a resource like land used for growing crops		Control allows a person to make decisions about who uses the resources or to dispose it for instance selling of land		Both
	Yes	No	Yes	No	
1					
	Bicycle				
	Motorbike				
	Car				
	Refrigerator				
	Television				
	Clock watch				
	Land				
	Sofa set				
	Wooden bed				
	Electric iron				
	Foam Mattress				
	Cotton mattress				
	House				
	Radio cassette				
	Wardrobe				
	Water pump				
	Sewing machine				
	Mosquito net				
	Satellite dish				
	Fan				
	Goats				
	Poultry				
	Cattle				

19. Do you own this house?

1. Yes
2. No

20. How many rooms are used for sleeping in this house?.....

21. What is the floor of this house made of?

1. Earth

2. Wood
 3. Tiles
 4. Cement
 5. Others specify.....
22. What are the walls of this house made of?
1. Stones, Coral, block, cement block
 2. Mud bricks (plastered) or un plastered, wood
 3. Galvanized mud or stick
 4. Grass, cardboard
 5. Others specify.....
23. What is the roof of this hose made of?
1. Tiles, concrete, cement
 2. Galvanized iron or asbestos
 3. Bamboo, wood, mud, thatch
 4. Others specify.....
24. What is the main source of drinking water for this household?
1. Piped into residence
 2. Rain water harvesting system
 3. Public tap
 4. Vendors
 5. Rivers, canal and spring
 6. Others specify.....
25. What is the time in minutes to the main water source?.....
26. Who normally fetch water for the family?
1. Wife
 2. Husband
 3. Girl children
 4. Boy children
 5. House maid
 6. Others specify.....
27. What are the means of transport to the water source?
1. By foot
 2. By bicycle
 3. By motor cycle
 4. Others specify.....
28. What is the main toilet facility for this household?
1. Private flush
 2. Shared flush
 3. VIP
 4. Pit
 5. Neighbour
 6. Bush
 7. Others specify.....
30. What is the main source of energy for cooking in this household?
1. Electricity
 2. Biogas

- 3. Kerosene
- 4. Charcoal
- 5. Gas
- 6. Crop residue, coconut husks, sawdust, animal dung, chaff, grass
- 7. Firewood
- 8. Others specify.....

E. Gender Based Violence

When two marry or live together, they usually share both good and bad moments. I would like to ask you some question about your current and past relationships and how your husband/partner treats (treated) you. I would like again to assure you that your answers will be kept secret, and that you do not have to answer any questions that you don't want to. I am now going to ask you about some situation that is true for many women.

32. How is GBV defined here? (Circle the answer which you think can fit the definition of GBV)

- 1. Any sexual act without the consent of the victim
- 2. Any form of violence that happen to women, girls, men and boys because of the unequal gender relations between men and women
- 3. Any cultural practices that deprive women from inheriting family resources after the death of the husband/father
- 4. I do not know

33. Have you ever experienced domestic violence during childhood?

- 1. Yes
- 2. No

34. Did you witness domestic violence when you were young? (Circle the correct answer)

- 1. Yes
- 2. No

35. Have you ever been a victim of GBV after maturity?

- 1. Yes
- 2. No

36. If the answer is Yes, what form and how frequent?

Form of GBV	Last week	Last month	Last 6monthes	Last year

37. Would you please indicate types of violence practiced in your area? (Circle the options which you think is appropriate)

- 1. Female genital mutilation (FGM)
- 2. Wife beating
- 3. Forced sexual intercourse
- 4. Marriage before maturity
- 5. Forced sexual intercourse by in-law
- 6. Deprived of basic necessities like food, clothes, school fees

7. Deprived the right for inheritance of resources after the death of the husband/father

38. Out of the above mentioned which one occur ore frequently? Indicate the most frequent types of GBV starting from the most frequent to the least

Type of GBV	Frequency of occurrence
Female genital mutilation (FGM)	
Wife battery	
Forced sexual intercourse by in-law	
Marital rape	
Married to fellow women	
Deprived of acquiring basic needs	
Deprived right to inherit family resources	
Marriage before maturity	

39. If the answer above is yes, who was the victim and who was the perpetrator? (Circle the option which you think is appropriate?)

1. Perpetrated by mother against father
2. Perpetrated by father against mother
3. Perpetrated by father to brother (boys)
4. Perpetrated by father to sister (girls)
5. Perpetrated by mother against sister in-law
6. Perpetrated by male family member (extended family member) to my sister
7. Perpetrated by someone in the neighbourhoods to my sister
8. Others specify.....

40 If the answer is Yes, what type of GBV did you encounter? (Put a tick to indicate type of GBV you experienced during childhood)

Type of GBV	Frequency of occurrence
Female genital mutilation	
Marital rape	
Married before maturity	
Married to fellow woman	
Wife battery	
Deprived from acquiring basic needs	
Lack of the right to inherit family resource	
Others specify	

41. Did your current partner/husband ever hit you when you were pregnant?
(Put a tick to the correct answer)

1. Yes
2. No

42. Thinking about your current or most recent husband/partner, would say it is generally true that he practiced the following against you? (Indicate by a tick against the right answer)

Type of GBV	Has this happened last week		Last 6 months		Last year	
	Yes	No	Yes	No	Yes	No
Tries to keep you from seeing your friends						
Tries to restrict contact with your biological family						
Insist on knowing where you are at all times						
Ignores you and treats you indifferently						
Get angry if you speak with another man						
Is often suspicious that you are unfaithful						
Expect you to ask his permission before seeking health care for yourself						

Psychological violence

43. There are things that happen to many women, and that your current partner, or any other partner may have done to you

Indicate by a tick against the right answer

Has your current husband/partner or any other partner ever	Has this happened last week		Past 6 months		Past 1 year	
	Yes	No	Yes	No	Yes	No
Insulted you or made you feel bad about yourself?						
Belittled or humiliated you in front of other people?						
Done things to scare or intimidate you on purpose (eg by the way he looked at you, by yelling and smashing things?)						
Threatened to hurt you or someone you care about						

Sexual violence

44. Since the age of 15, has your current partner/husband:

Has your current husband/partner or any other partner ever	Has this happened last week		Past 6 months		Past 1 year	
	Yes	No	Yes	No		

45. Did you ever have sexual intercourse you did not want to because you were afraid of what your partner or any other partner might do?

- 1. Yes
- 2. No

46. Did your partner or any other partner ever force you to do something sexually that you found humiliating?

- 1. Yes
- 2. No

47. Before the age of 15, do you remember if any one in your family ever touched you sexually, or made you do something sexual that you did not want to? If yes who did so?

Perpetrators of GBV

48 In life women experience different forms of GBV from relatives, other people they know, and/or from strangers. If you don't mind, I would like to briefly ask you about some of these situations. Every thing that you say will be kept private

Indicate by a tick

Perpetrator	How frequent		
	Once	A few minutes	Many times
Father			
Step father			
Other male family member			
Female family friend			
Male family friend			
Teacher			
Police/solder			
Boyfriend			
Stranger			
Someone at work			
Priest/religious leader			
Others specify			

49. Experience show that men perpetrate GBV when(circle the correct answer)

1. They are sober
2. They are drunkard
3. At any time they wish to
4. Others conditions, specify

Women's response to GBV

50 Recall our discussion on question 31 where you said you have been a victim of GBV after being attacked what measures did you take?

1. I tried to fight him back
2. called up on my neighbours
3. called up on my children for help
3. I rushed to the nearest police station
4. I rushed to my in-laws
5. I rushed to nearest health centre

51. When your husband/partner attacked you, who intervened?

1. In-laws
2. A close friend of my partner
3. Neighbour
4. A close friend of mine
5. Children
6. Others specify

52. Who else knows about this problem?

1. My parents
2. Religious leaders
3. His friends
4. My friends
6. No body knows apart from my family members
7. Others specify.....

53. Whom would you like to report to about GBV?

1. My close friend
2. My mother
3. My in-law
4. Police
6. Doctor
7. Close friend of my husband
8. Others specify

54. In your opinion, is GBV increasing or decreasing for the past five years?
(Indicate the right answer by a tick)

Form of GBV	Still existing	Sparingly practiced	Not practiced at all
Wife battery			
Women to women marriage			
Women deprived from acquiring basic needs			
Women deprived from inheriting resources			
Marital rape			
FGM			
Others specify			

55. Referring to question 50 above, what is the reason for increase in GBV?

56. What is the reason for decreasing in GBV?

57. Attitudinal Questions

Let us now discuss about your attitude towards GBV and WE. Say whether you strongly agree, Agree, Undecided, Disagree or strongly disagree on each of the following statements

Statement	SA	A	UD	D	SD
GBV is a private issue no one should interfere					
GBV is not a private issue, should be reported for legal actions					
Wife battery is a sign of love					
Wife battery is not a sign of love					
Women accept GBV in order to maintain harmony at home					
There is no harmony in violent relationship let it be reported for action					
Bride price should be to the bride's parents before marriage					
Bride prices increase chances of more GBV					
Old women without children should be allowed in order in order to maintain their clan					
Women to women marriages chances of HIV/AIDS					
Men beat their wives in order to manipulate and control them					

54. In your opinion, is GBV increasing or decreasing for the past five years?
(Indicate the right answer by a tick)

Form of GBV	Still existing	Sparingly practiced	Not practiced at all
Wife battery			
Women to women marriage			
Women deprived from acquiring basic needs			
Women deprived from inheriting resources			
Marital rape			
FGM			
Others specify			

55. Referring to question 50 above, what is the reason for increase in GBV?

56. What is the reason for decreasing in GBV?

57. Attitudinal Questions

Let us now discuss about your attitude towards GBV and WE. Say whether you strongly agree, Agree, Undecided, Disagree or strongly disagree on each of the following statements

Statement	SA	A	UD	D	SD
GBV is a private issue no one should interfere					
GBV is not a private issue, should be reported for legal actions					
Wife battery is a sign of love					
Wife battery is not a sign of love					
Women accept GBV in order to maintain harmony at home					
There is no harmony in violent relationship let it be reported for action					
Bride price should be to the bride's parents before marriage					
Bride prices increase chances of more GBV					
Old women without children should be allowed in order in order to maintain their clan					
Women to women marriages chances of HIV/AIDS					
Men beat their wives in order to manipulate and control them					

58. Attitude towards WE

Statement	SA	A	UD	D	SD
Women involvement in development groups should be encouraged in order to improve their status					
Women involvement in development groups increases work load among them					
Provision of loan for income generating activities will improve women economic status					
Loans provided is not sufficient to improve the economic status of women					
Women have many opportunity for economic development as it is for men					
There are very few opportunities of economic development for women than for men					
Generally women have access to and control over resources in this area					

59. What is the impact of GBV to your life.....

i) Economically

ii) Socially

iii) Culturally

60. Suggest ways of reducing GBV in this area.....

THANK YOU VERY MUCH FOR YOUR COOPERATION

**Appendix 3: Result from principal component analysis-means, standard deviation
and component score coefficient (n=121)**

Name of asset	mean	Standard deviation	Impact on PCA score
Ownership of bicycle	0.1176	0.32292	0.009
Ownership of radio	0.1765	0.38209	-0.015
Ownership of refrigerator	0.0045	0.06727	-0.009
Ownership of television	0.0090	0.09491	-0.012
Ownership of wall watch	0.0995	0.30008	0.063
Ownership of land	0.2036	0.40360	0.006
Ownership of sofa set	0.0271	0.16289	-0.037
Ownership of bed	0.2489	0.43334	0.017
Ownership of ironing machine	0.0181	0.13361	-0.017
Ownership of spongy mattress	0.2760	0.44804	0.016
Ownership of cotton mattress	0.0090	0.09491	0.015
Ownership of house	0.2353	0.42515	-0.037
Ownership of radio cassette	0.0362	0.18721	-0.031
Ownership of wardrobe	0.0181	0.13361	0.012
Ownership of water pump	0.0045	0.06727	-0.016
Ownership of sewing machine	0.0317	0.17553	0.022
Ownership of mosquito net	0.3529	0.47897	0.011
Ownership of satellite dish	0.0045	0.06727	-0.007
Ownership of fan	0.0045	0.06727	0.000
Ownership of goat	0.2217	0.41635	-0.065
Ownership of poultry	0.5068	0.50109	-0.054
Ownership of cattle	0.1765	0.38209	-0.038

Housing condition	mean	Standard deviation	Impact on PCA score
Wall made of cement	0.0679	0.25210	0.074
Wall made of mad	0.1403	0.34806	0.034
Wall made of timber	0.0090	0.09491	0.029
Wall made of pole and mad	0.6063	0.48967	-0.171
Wall made of grass	0.0181	0.13361	-0.064
Wall made of burnt bricks	0.1493	0.35721	0.154
Floor made of mad	0.7285	0.44574	-0.192
Floor made of cement	0.2489	0.43334	0.206
Roof made of corrugated iron sheets	0.3529	0.47897	0.207
Roof made of asbestos	0.0181	0.13361	-0.006
Roof made of pole and thatch	0.6063	0.48967	-0.200

Availability of social services

Service available	mean	Standard deviation	Impact on PCA score
Rainwater harvesting system	0.0136	0.11598	0.019
Availability of village water tap	0.1946	0.39677	-0.010
Buying water from vendors	0.0045	0.06727	-0.011
Fetching water from rivers and wells	0.8733	0.3339	0.016
Availability of VIP toilets	0.0136	0.11598	-0.004
Availability of pit latrines	0.7828	0.41327	-0.020
Use of neighbour's latrine	0.0362	0.18721	0.025
Use of bush latrine	0.1900	0.39323	0.008
Use of kerosene oil for cooking	0.136	0.11598	-0.038
Use of charcoal for cooking	0.2670	0.44338	0.025
Use of fire wood for cooking	0.9548	0.20832	0.043

Appendix 4: Descriptive results on decision making (N=239)

	Mean	Std. Deviation
Involved in decision making for general family issues	1.48	.501
Involved in decisions about children's education	1.63	.483
Involved in decisions about types of crops	1.57	.496
Involved in decisions about number of children	1.83	.378
Involved in decisions about marriage of daughter/son	1.93	.250
Involved in decisions about resources allocation	1.82	.381
Involved in decisions about how to use family income	1.76	.427

SPE
HV1444
.555
2010

