

**FACTORS CONTRIBUTING TO PHYSICAL GENDER VIOLENCE  
AMONG MARRIED WOMEN IN ARUMERU DISTRICT ARUSHA REGION**

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REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN  
MONITORING AND EVALUATION OF THE OPEN UNIVERSITY OF  
TANZANIA**

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**CERTIFICATION**

The undersigned certifies and hereby recommends for acceptance by the Open University of Tanzania a dissertation titled; “The factors contributing to physical gender violence among married women in Arumeru district Arusha region”, in partial fulfillment of the requirements for the degree of Master of Arts in Monitoring and Evaluation of the Open University of Tanzania.

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.....

Date

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I, Adelina Rugimbana, do hereby declared that this proposal is my own original work, and that it has not been submitted and was not submitted for the similar or other degree award.

.....

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.....

Date

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## ABSTRACT

The study was to assess the factors contributing to physical gender violence among married women in Arumeru, Arusha region. It was conducted in order to mainly focus and promote gender equality to marginalised communities and women through mainstreaming thus contribute to PGV reduction. Physical Gender Violence is a worldwide public problem which cuts across all ages, classes, cultures and nationalities. The determinants occur at the individual, community and societal levels within all social, economic, religious and cultural groups. The evaluation employed both quantitative and qualitative as mixed methods for data collection. The methods used to collect data included questionnaire, interview guide and document review. A non-probability purposive sampling was used to select PGV clients, stakeholders and key informants. In probability sampling, every individual in the population have equal chance of being selected as a subject for the research which guarantees that the selection process is completely randomized and unbiased. The approach was a formative process evaluation aimed to explore information on PGV preventive services provided and challenges encountered by the programme. The study revealed that most of the respondents (90%) of the women involved in the study reported to be forced to be married from their family. The study found that (71%) of the participants responded that alcohol consumption affected men and lead to physical violence. It was concluded that participants are aware of services provided by the programmes however; socio-cultural, economic and related factors influence physical gender among married women. It is recommended that institutions should facilitate a policy dialogue on the social, health and economic consequences of PGV on sustainable development of a society as a whole.

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**ABBREVIATIONS AND ACRONYMS**

DFID	Department for International Development
DHS	Demographic and Health Survey
GBV	Gender Based Violence
HIV	Human Immune Deficiency Syndrome
IPV	Intimate Partner Violence
LAS	Legal Aid Services
MDHS	Malawi Demographic and Health Survey
MCDGC	Ministry of Community Development, Gender and Children's affairs
OUT	Open University of Tanzania
PAHO	Pan Africa Health Organization
UNESCO	United Nations Educational, Scientific and Cultural Organization
VAW	Violence Against Women
WHO	World health Organization
PGV	Physical Gender Violence
SPSS	Statistical Package for Social Sciences

## CHAPTER ONE

### INTRODUCTION

#### 1.1 Chapter Overview

This chapter highlights the background to the problem, statement of the problem, research objectives, research questions, scope of the study and finally relevant of the study.

#### 1.2 Background of the Study

Physical Gender Violence is a major threat to global public health and poses significant barriers to the advancement to women's health. Generally, GBV can cause a host of acute to long-term health effects with serious and aggravating consequences on reproductive, sexual and psychological status: physical injuries and disabilities, unintended pregnancies, gynecological problems, mild to severe mood disorder and suicide (Kaur & Garg, 2008). In a study encompassing all the six zones of India, 37% of the women reported a high prevalence of physical violence (Kaur & Garg, 2008). Different literatures indicate that women are more affected by Gender Based Violence (GBV) in their intimate relationship compared to men. GBV against women is described as the most prevalent human rights violation in the world (Arangoet *al.*, 2014).

Various hypothesis explain the origin of GBV with different perspectives, for example socio-cultural theories of violence believed that GBV is a result of reflection of attitude shared by a group of people governing interpersonal interactions in patriarchy societies (Nayaki et al., 2003). The United Nations (2006)

described Gender Based Violence as any violence that targets individuals or groups on the basis of their gender which plays on norms and gender exclusions to break people down physically and covers all women, men, girls and boys. There are many forms of gender violence including physical, sexual, psychological, economic and emotional violence (UNICEF,2000).Furthermore, the causes of gender violence include political, legal, institutional, lack of education, excessive alcohol consumption behaviour among men and women, and economic factors(Martin, 2004).

In Sub-Saharan Africa, violence against women (VAW) as a policy, practice, and research field has mushroomed in the past two decades under the term “gender-based violence” (GBV). Initially dealing disproportionately with wartime violence and genital mutilation, GBV has come to include more common forms in less exceptional settings, such as domestic violence. In this burgeoning field, violence is increasingly referred to as “gendered” without a coherent idea of what this means (Scully 2010). Research has focused more on how domestic violence is related to health and development factors – including how it may interfere with women’s contributions as mothers and workers than on how it is related to gender as a theoretical problem.

Such problems pose serious barriers in escaping violence and achieving self-sufficiency, and present a challenging situation for social services programmes (Renzetti, 2009). The various forms of physical abuse share many risk factors in both men and women. Some are psychological and behavioural characteristics such as poor behavioural control, low self-esteem, disorders in personality and conduct.

Others are due to experiences, such as lack of emotional bonding and support. Abuse of drugs and alcohol is frequently associated with interpersonal violence, and poverty as well as income disparities and gender inequality stand out as important community and societal factors (Brennan, 2011).

Tanzanian women experienced widespread of domestic violence in both household and public institutions. For example, it is estimated that about 41% of women in Dar es Salaam and 56% of women in Mbeya who are married or live in intimate relationships with men have experienced physical violence in the hands of men they live with (TAWJA, 2011). Domestic violence can also drive a woman into poverty by preventing her from participating fully in education and economic activities (Commission on Human Right, 1995). Moreover, victims of physical violence often have related difficulties such as limited or inconsistent work experience, poor education, physical and mental health problems, and substance abuse issues (Mickelson and Williams, 2007).

The overall prevalence of domestic violence in Tanzania among women aged 15-49 was 45%. While the prevalence of physical violence in Mara was the highest 72%, Dodoma 71%, and Tanga was the lowest 16%. While sexual violence prevalence was highest in Rukwa about 32% and lowest in Shinyanga with 5% respectively (DHS, 2010). Arusha region is marked with high rates of GBV associated with societal culture and traditions which oppress women to get their rights. Although many efforts to put violence on the global public health agenda culminated in 1996 with the adoption of a resolution by the World Health Assembly which declared violence a major global public health issue and called for increased action but still GBV exists

and that is why this study is going to assess its contributing factors among married women in Arumeru District Arusha Region

## **1.2 Statement of the Problem**

Physical gender violence is identified as a public problem in Arusha rural communities and Arumeru rural being the most common cultural practice observed in marginalised local communities (WHO, 2010). According to Krug et al. (2002), gender violence might have severe effects on a victim; cause of ill health, disabilities and increased vulnerability to physical and mental health problems and death (Mugawe& Powell, 2006). The government of Tanzania has made commitments to support initiatives such as integration of gender violence prevention in health services, use of community-based efforts and use of mass media focused at alleviating physical gender violence in awareness, social cultural factors and environmental factors at the household level (Pelser et al., 2005).

Several approaches like community-based efforts and gender desk have been used to influence interactions inside families and reduce negative influences from individual and societal approaches that target on economic conditions and cultural norms. Despite the various measures being undertaken to address physical gender violence, the government still faces a number of challenges that continue to hamper its capacity in implementing its role to support all families to attain their missions with gender responsiveness.

The mass media has been useful to communicate social influences on behavioural change in response to physical Violence prevention, however physical gender

violence has increased instead of decreasing. Several studies have been conducted on attitude of women towards GBV against women in Tanzania. For example, a study by Abeidet *al.* (2015) determined knowledge of and attitude towards sexual rape and sexual abuse; while Sikira (2010) examined attitude of women towards GBV. Apart from all these efforts but still GBV exists. Therefore, this study intended to assess the factors contributing to physical gender based violence among married women specifically in Arumeru district, Arusha region.

### **1.3 Objective of the Study**

#### **1.3.1 General Objective**

To assess the factors contributing to physical gender violence among married women in Arumeru District Arusha Region.

#### **1.3.2 Specific Objectives**

1. To assess the level of awareness on physical Gender Violence among married women in Arumeru District Arusha Region.
2. To determine the social cultural factors associated to physical Gender Violence among married women Arumeru District Arusha Region.
3. To assess the environmental factors that lead to physical Gender Violence among married women Arumeru District Arusha Region.

### **1.4 Research Questions**

#### **1.4.1 General Research Question**

What are the factors contributing to physical gender based violence among married women in Arumeru District Arusha Region?

### **1.4.2 Specific Research Questions**

1. What is the level of awareness on physical Gender Violence among married women in Arumeru District Arusha Region?
2. What are the social cultural factors associated to physical Gender Violence among the married women Arumeru District Arusha Region?
3. What are the environmental factors that lead to physical Gender Violence among the married women Arumeru District Arusha Region?

### **1.5 Scope of the Study**

This study were cover only four villages which are Lovilukuny, Engorora, Ilkerin and Lesiraa in Kisongo ward, Arumeru District because many issues on physical gender violence have been reported in gender desk. The study was based on factors contributing to physical gender based violence among married women in Arumeru district Arusha region.

### **1.6 Limitation and Delimitations**

The study was limited to only four villages in Kisongo ward, Arumeru District where the study on assessing the factors contributing to physical gender violence among married women was conducted. The findings of the study were not applied to other wards in Arumeru districts because of the uniqueness of the ward. A larger study will be more appropriate for generalization of the findings to the whole district. Married women are worried for their safety after enlightening information hence they may end up giving irrelevant information to the researcher. The researcher was leaded the respondents to exclude their names when answering questions because some information was regarded as community secrets.

### **1.7 Significant of the Study**

The findings of this study will provide insights to policy makers on the need to plan interventions for creating awareness on women's legal rights, which can change attitudes of women towards physical gender violence against them. The findings will enlighten gender activists, LAS providers and the government designing and execute legal aid service towards eliminating Physical gender violence against women. The study will help women to understand the social cultural factors, environmental factors and their rights against physical gender violence in their communities so as to act upon and seek support from authorities to control the violence.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Overview**

The literature review chapter covers the related literature which appears relevant to a particular topic. Also consist of definitions of terms, Theoretical review, Empirical literature review, policy review, research gap, conceptual framework andchapter summary.

#### **2.2 Definitions of Terms**

##### **2.2.1 Gender**

Gender is defined as the term used to express social roles and relationships and the values set by society for women and men (WHO, 2002).

##### **2.2.2 Gender based Violence**

Gender Based Violence as any violence that targets individuals or groups on the basis of their gender which plays on norms and gender exclusions to break people down both physically and emotionally and encompasses all women, men, girls and boys.(UN,2004).

##### **2.2.3 Physical Gender Violence**

This is the form of GBV involves hitting, slapping, kicking, punching, pushing and so forth with weapons such as knives and other sharp instruments are often used during physical violence (Sigsworth 2009; Tshwaranang Legal Centre 2012).According to this studyPhysical gender violence is referred to bodily harm

suffered as a result of the application of immediate and unlawful physical force often associated with sexual and physical violence resulting in injuries, distress and health problems.

### **2.3 Theoretical Literature Review**

Violence against women is a complex social issue and there are many factors that contribute to this violence. It is therefore important to take the time to think about how we develop programs, plans and initiatives to prevent violence against women. Existing theories about how people can change a situation and resolve a problem, theories of change can be very useful tools to help decide the actions required in our plans.

#### **2.3.1 The Ecological Model theory**

Lori Heise developed the Ecological Model in 1998 to present a clear context for how violence against women occurs across our societies. This framework recognizes that no one factor causes violence against women and that violence is caused by the interplay between individual, interpersonal, community, and socio-cultural factors. These are represented by the different levels on the Ecological Model. In this way, the Ecological Model helps us to gain a deeper understanding of the issue of violence against women. For example, by using the Ecological Model, we can see why just telling an individual man not to use violence against women will not put an end to this behaviour if his family and friends continue to support the use of violence, if the social norms that justify men's dominance over women are not changed, and if the laws to punish violence against women are not properly

implemented.

In addition to helping us understand the problem of violence against women, the Ecological Model can also help us find the most effective violence prevention solutions. Heise (2015) and the Lancet (2014) have used the Ecological Model to illustrate what is required across all levels to drive and enable positive change. The Ecological Model can be used for us to reflect on whether our violence prevention programs are effective, and to maximise their impact.

The Ecological Model theory has some assumptions. It assumes that the situation has primary responsibility for action on violence against women: national governments are legally bound to, and hold the ultimate responsibility for, the implementation of laws, policies and services related to violence against women and can, and should be, held accountable for doing so. They are also well placed to achieve change on violence against women. The Ecological Model theory assumes that social change is necessary and enabled sustained reduction in violence against women will only occur through processes of significant social change, including in power relations between women and men, and in the values, beliefs, attitudes, behaviours and social norms related to violence against women, at all levels from individuals to communities to institutions. Therefore this theory is supportive to this study as it is important for violence prevention initiatives to encourage communities to focus on a positive vision for change. Effective violence prevention initiatives can support reference groups to normalise respectful and violence-free relationships.

## **2.4 Empirical Literature**

Across the world, every woman experiences male violence at some point in her life

(Watts, 2010). VAW is any act of gender-based violence that results in or is likely to result in physical harm or suffering to women, including threats of such acts, intimidation or subjective denial of liberty whether occurring in public or private life (Watts and Zimmerman, 2010). Violence against women (VAW) has been accepted as understandable behaviour with patriarchy lending credence to it through the continuous perpetuation of male dominance (Dickstein, 2010). VAW is viewed as the most prevalent form of gender-based violence worldwide (Heise, 2002) and between 25 to 50 % of women in many countries reported physical abuse by a present or former male partner.

#### **2.4.1 Awareness on Physical Gender Based Violence among Married Women**

The awareness of the PGBV is one of the essential factors that contribute to physical among married women. The awareness is mainly focuses on the understanding of the married women on the physical violence against them in their rights when the violence occurs. The physical violence against women is the problem which exist though the government and stakeholders work together to minimize the occurrences. The findings by Sikira *et al.* (2010) reported that 68.4% of women in Serengeti District disagreed with false statement that GBV is a private or family issue and hence that it should be reported for legal action. At the family level, 34% of women respondents indicated that they are involved in decision making while at the village level 39% women indicated that they involved in decision making. At the household level, attitudes still exist that men are automatic heads and breadwinners. These attitudes are based on the patriarchal structures that limit women's voices to adequately be heard and influence family decisions on resources and other social

matters.

#### **2.4.1.2 Knowledge about PGV**

Married women exposed to violence are said to be more likely to experience a multiplicity of health problems compared to women who have no history of violence in their lives (WHO, 2002; Garcia-Moreno et al., 2005). Generally, married women exposed to violence tend to experience more physical and emotional impairments, chronic mental and reproductive health problems (UNICEF, 2000; Garcia-Moreno et al., 2013). Moreover, women exposed to male violence are likely to exhibit more behavioural deviations and to adopt behaviours such as problematic substance use and alcohol abuse, suicidal tendencies and physical inactivity which can further affect their health (WHO, 2002; Evans, 2007).

According to the Tanzania Demographic and Health Survey (TDHS), of 2010, 50% of all married women have experienced physical violence at the hands of their husbands (TDHS2010). The study found that 42% of respondents agree that VAW affects the household economy. In general over 80% participants agreed and ranked the extent of this effect to be high. Research conducted in Nepal (2011) reported that nearly half of women 48% had experienced violence at some time in their life and 28% had experienced violence in the past 12 months. The emotional violence was most commonly reported at 40.4%, followed by physical violence 26.8%, sexual violence 15.3% and economic abuse/ violence (8%). Social exclusion was less commonly reported, but 11% of women had been denied access to health services, and 8% had been denied access to places of worship.

#### **2.4.1.3 Attitude Toward PGV**

A study conducted by Sikira *et al.*, (2010) in Serengeti District in Tanzania reported that the majority of women had positive attitude towards GBV against them, which is likely to slow down the process of eradicating GBV. In many societies, prevailing attitudes subordinate women to men and entitle men to use violence to control women. Focus group discussion was useful because it informed the researchers about the emotional feelings of participants as they were engaged in the discussion. Furthermore, FGDs aimed at providing detailed information on various cultural norms and practices exacerbating GBV and HIV in the area.

In this study woman argued that beating may result into injuries and permanent disabilities, therefore nobody enjoy it. On the other hand, when asked to clarify the myth; some male 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 the false myth in order to justify GBV. VAW is believed to be a major course of many negative social, medical, physical and psychological problems among married women of reproductive age. Scholars (Evans, 2007; Chebogut and Ngeno, 2010; Garcia-Moreno *et al.*, 2013) state that VAW is one of the most important risk factors for a wide range of detrimental health problems among women.

Research at first undertaken in Western Europe, New Zealand, Australia and North America, and now emerging from many developing countries indicate that violence against women is a major source of morbidity and mortality among married women of reproductive age (Colombini *et al.*, 2008; Dahlberg and Mercy, 2009; WHO

2017).

#### **2.4.1.4 Best Understanding of PGV**

The study by (Pelser et al., 2005) asked female respondents to address their understanding of what constitutes GBV. The most common responses were acts of physical violence like beating or strangling (55%). Other responses included failure to take care of wives (cited by 11% of respondents) and men's failure to show love to wives (cited by 5%). The Safe Schools Program qualitative research study asked respondents what they understood by the term 'gender-based violence' (The Centre for Educational Research and Training and DevTech Systems, Inc., 2008). As reported previously, the study found that teachers had a better understanding of GBV than students, but that the term was not clearly understood by either group. The Zambian, DHS data indicated that 27 % of married women reported being beaten by their spouses/partners in the past year; this rate reached 33 % of 15-19 year-olds and 35 % of 20-24 year-olds. About 59 % of Zambian women have ever experienced any violence since the age of 15 years (Kishor & Johnson, 2004).

### **2.5 Social Cultural Factors Associated to Physical Gender Violence among Married Women**

#### **2.5.1 Tradition Practices**

The reviewed studies on GBV in Malawi mentioned traditional practices that promote gender-based violence, focused specifically on traditional cultural practices that either constitute GBV or put women at risk for GBV (UNFPA, 2012). A study on the socioeconomic costs of violence conducted through interviews and focus group discussions with GBV survivors and community members from Mzimba,

Lilongwe, Dowa, Mangochi, and Blantyre found that respondents mentioned alcohol use as one of the main “driving forces” behind IPV (Economic Commission for Africa and UN Women, 2013).

WHO (2010) believes that gender-specific interventions form part of acceptable mainstreaming approaches, and that gender-specific interventions can also be classified in the gender-accommodating category as they may be intentionally directed at addressing gender norms, roles, and relations, and thus promote the health of women (or men) depending on the context. It was further reported that to reduce GBV in developing countries there should be the needs to increase emphasis on stopping it from occurring in the first place as primary prevention and promote women to make effective decision on physical gender violence. However, Tegbare *et al.* (2010) also stated that physical violence is not acceptable as no one has the right to beat anyone else; and beating could result in injury and death, and might bitter the relationship resulting in divorce. It was highlighted that a loving partner would not beat his wife. The person cannot be corrected by being beaten, but rather by discussion and tolerance which are better options to manage conflicts.

### **2.5.2 Early Married**

A study of men convicted of a sexual offense with a child under age 18 identified alcohol and drugs as a contributing factor to the crimes (Mtibo *et al.*, 2011). The study interviewed 58 inmates at Zomba and Chichiri prisons in Malawi which are the two largest prisons for men. The study showed that 10.3 percent responded that they were influenced by alcohol and drugs. Other factors cited were sexual desires (46.6%), influence by the victim (5.1%), and peer pressure (1.7%). Approximately 36

percent (36.2%) of the inmates denied they had committed a crime.

## **2.6 Environmental Factors Lead To Physical Gender Violence against Married Women**

The daily living of the people and their life style can make difference of affect the women to contribute on the activities which impacted to their health and economic development. Studies conducted in Uganda have reported about 60 per cent of married women experience domestic violence throughout their lives, making it difficult for them to participate in the development process (Irish Aid partner report, 2011).

### **2.6.1 Information about PGV from Mass Media**

According to the WHO (2005), around 42% of Tanzanian men and 56% Tanzanian women trust that men have the right to beat women. Indeed, 56% of women surveyed by Kivulini (2009) agreed that it was significant for a man to “show his wife who was the boss”, and 61% said that a “good wife” obeys her husband regardless of her situation. The view that women “deserve to be beaten” is also common among local government leaders. Kivulini’s (2009) survey revealed that leaders are poorly prepared to support women facing violence. 83% of local leaders did not know how to address in the media about legal issues and less than 40% had received formal training about women’s rights.

Beliefs that perpetuate violence are most entrenched in rural areas. Thus, it is not surprising that women from rural districts are significantly more likely to experience sexual abuse than those from urban districts. USAID (2009) found 66% of women

from rural districts had experienced sexual or physical abuse compared to 57% in urban districts.

Bou-French (2013) found that contributions to an online news site by readers most often situated physical violence against women as an individual or private problem. Although this study included contributions from only 45 “citizen journalists,” it supported Eastal et al.’s (2015) assertion that online and social media platforms may simply mirror myths and stereotypes that appear in traditional media. A recent study of press representations of violence against women in the Arabian Gulf States (Saudi Arabia, Bahrain and Kuwait) noted very little difference from news frames used by media in Western cultures, whereby most reports ignored the systematic nature of physical violence against women (Halim & Meyers, 2010).

Richards et al. (2011), in their study of over 900 newspaper articles in the US state of North Carolina, found that ten percent of press coverage straight blamed women who were killed in the situation of physical gender violence by intimate partner because they did not take the necessary action to protect themselves: by not reporting the violence, or for not leaving the relationship. They noted that though these signified a marginal of newspaper items, the message was a powerful one about women’s accountability for prevention, particularly from current partners. Blaming women who are killed by a partner reflects and sustains deeply embedded cultural disbelief about why women don’t leave. In Australia, a recent survey found that 78 percent of respondents reported that they cannot understand why women stay with an abusive partner (Webster et al., 2014).

### **2.6.2 Substance Use**

Eight studies looked at the consumption of alcohol and drugs as risk factors for GBV. One analysis of the MDHS 2004 data found that the risk of experiencing physical or sexual Violence was higher among married women who reported that their husbands consume alcohol sometimes or frequently, compared to those who reported that their partners drink but do not get drunk or do not drink at all (Hindin et al., 2008). Another analysis of these same data found that partners' alcohol consumption was positively associated with women's experience of physical Violence (Mandal and Hindin, 2013).

The MDHS 2010 survey showed similar associations between partners' alcohol consumption and women's experience of Violence. The survey report states, that there is a very strong relationship between experience of spousal emotional, physical, or sexual violence and husband's alcohol use. Women whose husbands or partners get drunk often are more than twice as likely to experience each of the three types of spousal violence compared with married women whose husbands do not drink or who drink but never get drunk. Those whose husbands get drunk sometimes fall in between" (MDHS, 2010). Among the main findings from female respondents in the same study, the study noted that "alcohol was commonly associated with acts of violence, while there was almost no drug association" (Pelser et al., 2005,). Among female respondents reporting violence, the perpetrator was believed to be under the influence of alcohol in 18.2 percent of incidents of economic abuse, 24.9 percent of incidents of emotional abuse, 36.0 percent of incidents of physical abuse, and 33.2 percent of incidents of sexual abuse.

A 2007 study involving qualitative interviews with women ages 18 and over in two urban and two rural villages found a strong linkage between men's substance use and women's experiences of GBV (Braathen, 2008). Respondents suggested that substance use leads to GBV for many reasons, including that men can become irritable and aggressive due to alcohol and drug use; and, in some cases, men use all the family's money on these substances and then beat the women when there is no food at home.

Furthermore, WHO (2001/2002) studies on intimate partner conducted a study on 1,820 women in Dar es Salaam and 1,450 women in the Mbeya District and found that 41 percent of ever-partnered women in Dar es Salaam and 87 percent in the Mbeya district had experienced physical violence at the hands of a partner at some point in 20 percent of their lives. In both areas, 29 percent of those who experienced physical intimate partner violence experienced injuries, with over a third of them having been injured in the past year (WHO, 2005).

## **2.7 Policy Review**

### **2.7.1 National Plan of Action for Prevention and Eradication of GBV against Women of 2001 -2015**

This study is guided by National Plan of Action for Prevention and Eradication of GBV against Women of 2001 -2015 Policy. This policy was rolled out by the Ministry of Community Development, Gender and Children in 2000 and it is the blue print guiding national efforts on GBV. The vision of the National Plan of Action is to 'have a society free of physical, psychological, emotional and sexual violence against women and children by the year 2015. Its goal is to 'have

sustainable equality and equity between women and men in Tanzania and to provide a framework of actions to be undertaken by stakeholders to prevent and eradicate violence against women and children.

The areas to be addressed to prevent and eradicate gender based violence relate to legal; social, economic; cultural and political; the services and education, training and awareness building. In the area of legal issues it specifically targets the existence of discriminatory legislation against women and children. The policy has two major challenges to its success. These are gender insensitive people both women and men, policy makers, planners and the media; and poverty. The policy itself falls short of viable plans and performance indicators to ensure that its objectives are really implemented. This policy is associated with this study through its challenge of gender sensitivity.

## **2.8 Research Gap**

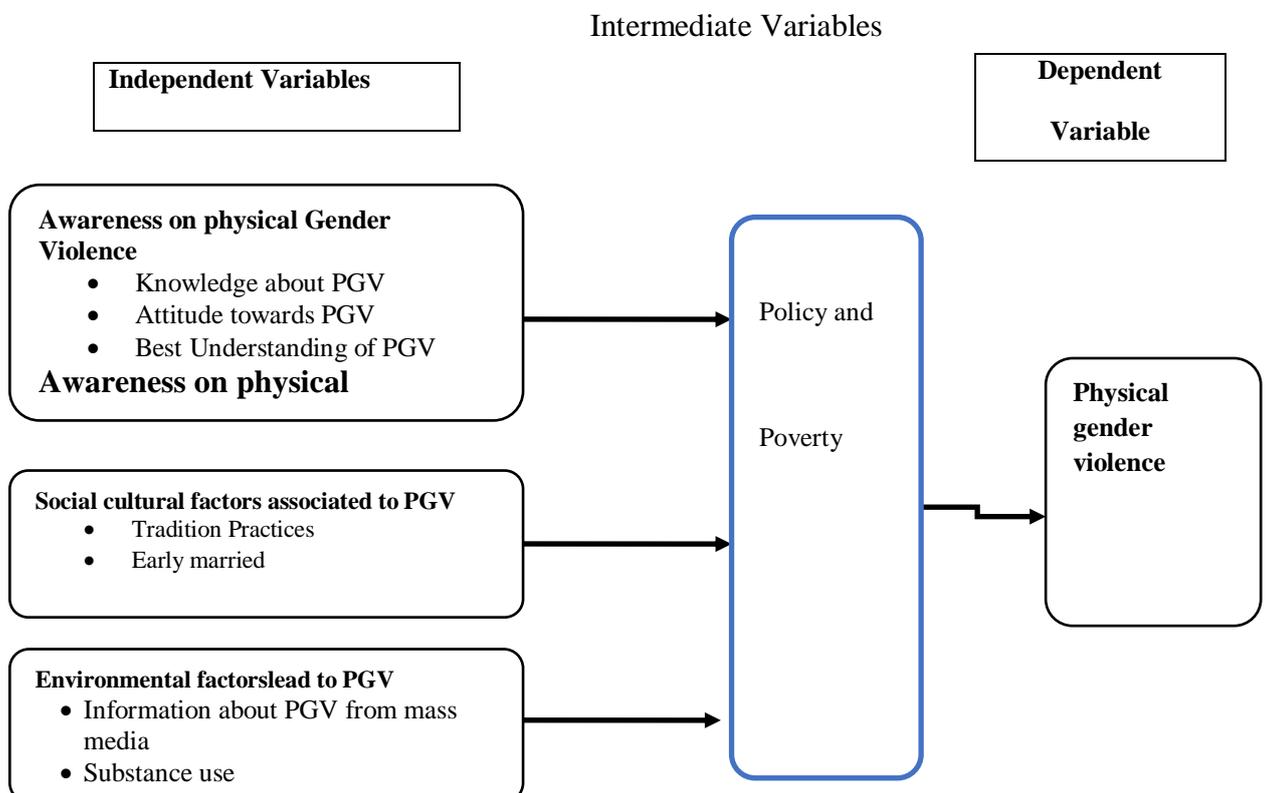
Physical gender violence do exist in rural and urban populations due lack of awareness, social cultural and situational factors. Physical gender violence has been used by men to control women in some communities whereby women are physically punished quietly by their husbands and nowhere to report. The study done by Sikiraet *al.* (2010) in Serengeti District in Tanzania reported that the majority of women had positive attitude towards PGV against them, which is likely to slow down the process of eradicating PGV.

This is realizing that PGV is still practiced and the survivors had no opportunity to speak out due to the social beliefs which protect men. Lack of awareness, social cultural and environmental factors physical gender violence is still identified as a

public problem in Kisongo ward and other rural communities and being the most common cultural practice observed in marginalised communities specifically among married women.

## 2.9 Conceptual Framework

The conceptual framework of this study will be based on three independent variables and one dependent variable as represented in the diagram below. The study will explore the factors contributing to physical gender violence among married women in Arumeru district Arusha region. Therefore, the independent variables are Awareness on physical Gender Violence among married women, Social cultural factors associated to physical Gender Violence and Environmental factors lead to Physical Gender Violence among married women. These variables in turn affect the state of married women livelihood in their communities in Tanzania and therefore, the dependent variable will be prevention of Physical Violence against married women.



**Figure 2.1: Conceptual Framework for Factors Contributing To Physical Gender Violence among Married Women**

**2.10 Chapter Summary**

The study is guided by the Ecological Model theory by Lori Heise to presents a clear context for how violence against women occurs across our societies. In this way, the Ecological Model helps us to gain a deeper understanding of the issue of violence against women which having the relationship with the study title. The conceptual framework displays the relationship of the independent variables of the study to the expected result of the dependent variable which is the physical gender violence. The different empirical literatures show the study which conducted on the physical gender violence among married women and their different findings from one study to another. The gap identified in literature review supports the researcher to conduct the study. Therefore researcher wants to assess the factors contributing to physical gender violence among married women in Arumeru District Arusha Region.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Chapter Overview**

This chapter describes the research approach, study population, sampling design, data collection techniques and analysis, validity, reliability, chapter summary.

#### **3.2 Research Design**

The cross-sectional research design was used in this study because the method is allow data to be collected at one point in time and establishes relationships between variables. This method was considered to be useful because of time limitation and resource constraints. According to Hopkins (2000) quantitative cross sectional studies have the following strengths: It in inexpensive method, it is efficient to use, there will be greater chance of generalization and could be used to study entire populations or a representative sample. Cross sectional design was appropriate for this study as it helped to assess factors contributing to physical gender violence among married women.

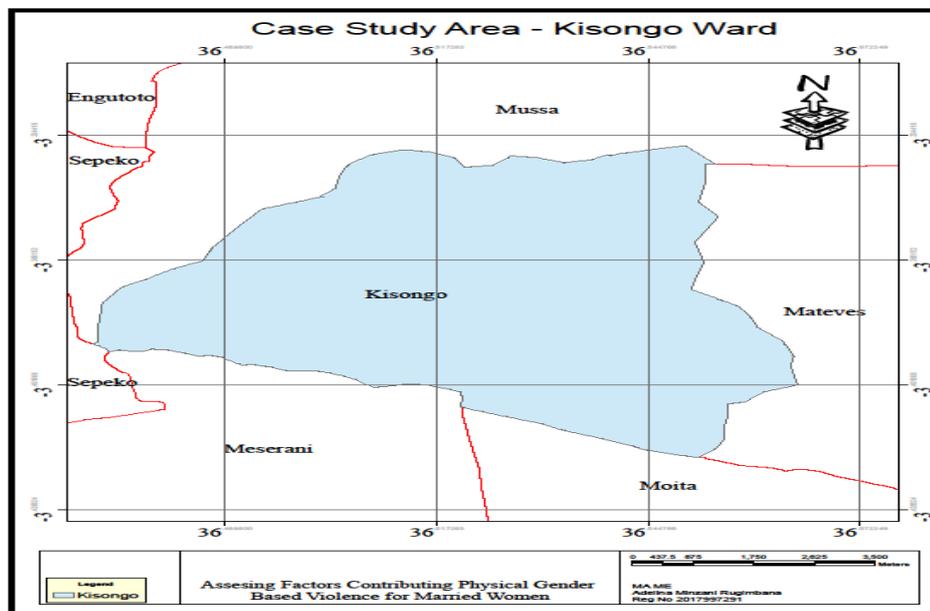
The research design having the strength which are relatively quick and easy to conduct (no long periods of follow-up), data on all variables is only collected once, able to measure prevalence for all factors under investigation and multiple outcomes and exposures can be studied. Also the design having the weaknesses which are difficult to determine whether the outcome followed exposure in time or exposure resulted from the outcome, unable to measure incidence and associations identified may be difficult to interpret.

### 3.3 Area of the Study

The study was conducted at Kisongo ward in Arumeru District in Arusha Region. The choice of Kisongo Ward is because there physical gender violence issues reported at Police gender desk. The ward was bordered with Musa ward to the north, and bordered with Mateves ward to East (see figure2 below).The ward administratively divided into four villages and twelve sub-villages. In 2012 census, the ward had a total population of 10,929 people with 4,603 males 6,344 females and 2,484 households.It was conducted there because there are experiences of many reported cases on physical gender violence.

#### 3.3.1 Social economic profile of Arumeru District

The district economy is almost entirely agricultural, consisting mostly of subsistence farming and livestock rising. Livestock keeping is done through free range system and only fewer adopted zero grazing.



**Figure 3.1: The map of Kisongo Ward**

**Source:** Arusha District Council

Exports from the few large-scale commercial horticultural farms bring in most of the money in the District. It is only during some years of severe droughts that the region had failed to feed itself. Tourism is another important economic area contributing adequately to the district economy. The large livestock population is an important contributed to the economy of the Arumeru District. The main people found at Arumeru District were Maasai and Meru tribes.

### 3.4 Study Population

The study populations were the married women from four villages living in Kisongo ward at Arumeru District in Arusha region. The married women were among the study population because they experience serious physical gender violence in the selected study area. Therefore, this study was sampled 63 married women where one selected woman represents 20 women sampled from the population of 1260 married women (see Table 3.1). Also 8 village leaders and 2 gender desk police Officers were involved in this study.

**Table 3.1: Sample Size**

<b>PARTICIPANTS</b>	<b>TOTAL NUMBER</b>
Gender desk Police Officer	2
Village Leaders	8
Married women	63
<b>Total</b>	<b>73</b>

### 3.5 Sampling Technique and Sample Size

The study was used both probability and non-probability sampling procedures.

### **3.5.1 Probability Sampling**

In probability sampling, every individual in the population have equal chance of being selected as a subject for the research which guarantees that the selection process is completely randomized and unbiased. The advantage of using probability sampling is the accuracy of the estimated population parameters since it is representative of the entire population. It is also a reliable method to eliminate sampling bias. Probability sampling includes Simple Random Sampling, Stratified Random Sampling, Systematic Random Sampling, Cluster Random Sampling and Mixed/Multi-Stage Random Sampling.

#### **3.5.1.1 Simple Random Sampling**

Samplings of the districts were done where one district was selected randomly from seven districts of Arusha region using a secret ballot method. The simple random sampling was used to select one ward and four villages through the secret ballot method. The list of households was obtained from the Ward executive Officer. In this study simple random sampling was used to select 63 respondents from 1260 married women of 2,484 different households giving each person equal chance of being selected. That is when selecting one married women from sample population she was present 20 married women from different households.

### **3.5.2 Non-Probability Sampling**

In this type of population sampling, members of the population do not have equal chance of being selected. Due to this, it is not safe to assume that the sample fully represents the target population. It is also possible that the researcher deliberately chose the individuals that were participated in the study.

### 3.5.2.1 Purposeful Sampling

The Purposeful sampling procedures was used in selection of Gender desk Police Officers and village leaders to be included in the study.

### 3.5.3 Sample Size

A sample size is simply a subset of the population. The sample must be representative of the population from which it was drawn and it must have good size to warrant statistical analysis. The sampling frame engaged the list of all people and households who was involved in this study. However, the sample size was estimated using sample size lookup tables where the general rule states that a statistical sample should contain 50 to 100 cases for each sample or sub-group to be analyzed (Haque, Nd2012). Nevertheless, the sample size may also be calculated using the following general formula:

$$n = \frac{t^2 \times p(1-p)}{m^2}$$

$$n = \frac{1.96^2 \times 0.05(1-0.05)}{0.05^2}$$

$$0.0025$$

$$\frac{3.8416 \times 0.05(0.95)}{0.0025}$$

$$0.0025$$

$$n = 72.9904$$

$$n=73$$

where 'n' is required sample size; 't' is confidence level at 95% (standard value of 1.96); 'p' is estimated percentage of population in the study area, expressed as decimal and 'm' is margin of error at 5% (standard value of 0.05).

### **3.6 Variables and Measurement Procedures**

#### **3.6.1 Independent Variable**

Demographic characteristics of participants such as age, sex, marital status, Number of children.

**Awareness on physical Gender Violence:** Knowledge on physical gender violence, attitude and best understanding.

**Social cultural factors associated to physical Gender Violence:** traditional practice and early marriage.

**Environmental factors lead to physical Gender Violence:** Information on physical gender violence through mass media and Substance use will be looked at so as to see their effects on PGV.

#### **3.6.2 Dependent Variable**

The dependent variable is physical gender violence among married women. This study prompts to alternative ways to tackle problems associated to PGV.

### **3.7 Data Collection Methods**

Both primary and secondary data collection methods were used in this study.

#### **3.7.1 Primary Data**

Primary data is defined as data collected by researcher herself or himself by the first time Kothari (2009). In this study, primary data were collected on PGV using questionnaires and interview methods.

### **3.7.1.1 Questionnaires**

Wayne et al, (2001) defined questionnaires as a printed or written list of questions that respondents are asked to answer. In this study, a questionnaire was used to collect data from married women at Kisongo ward within four selected villages, also were given to village leaders. Both open and closed ended questions were designed. Questionnaires were formulated in English and interpreted in Kiswahili to help married women and village leaders to understand, because most of them are more familiar with Kiswahili than English language. The questionnaires were pre-tested among a group of 18 people in Mateves ward in Arumeru District which is a place where the actual research was not been conducted.

### **3.7.1.2 Interview Guide**

In this study the researcher conducted face to face interviews and general open ended questions that intended to produce views and opinions from the village leaders and police officers while taking interview notes (Creswell, 2009). This method was preferred in this study due to its strengths, it helped the interviewee understand the question which needed clarification, it made possible to review as well as gain deep understanding of interviewee's views on the topic under the discussion. This method was very useful to researcher during data collection from gender desk Police Officer to get information on issues concerning physical gender violence.

### **3.7.2 Secondary Data**

The research was used published data from books, journals, articles, National bureau statistic, Census reports and document review. The Census reports were used to define population statistics data on women at the study area, while journals and

studies about Physical gender violence were used to provide a wider understanding of the subject matter.

### **3.7.2.1 Data Processing and Analysis**

Questionnaires were assessed on daily basis on the quality of data collected from participants. Then data were be entered into Microsoft Excel and coded. Checking for duplication, missing values, and old values were done while cross referencing from the original questionnaires is observed. Then the data were analyzed by using (SPSS) version 21. Descriptive statistics were be performed by generating frequency distribution tables, pie chart, and graph as appropriate based on objectives. The qualitative data were collected through group discussions survey and observations.

### **3.8 Validity**

Validity is the degree of consistency and stability that is the same conclusion can be achieved by different researcher under the same data collection methods. The validity of data involves reasonableness and correctness of data. Validity test in this study intend to see if the instrument measured what it will intended to measure. Validity examine whether the research focus is consistency in term of research objectives and statement problem or how truthful the research results will be. To ensure validity, the measuring instruments used are based on the empirical studies of similar research made on physical gender violence among the married women (Kothari, 2003).

### **3.9 Reliability**

Reliability refers to consistency of the results of assessment (Nitko, 2010).According to Omari (2011), Reliability deal with consistency and stability of the phenomena;

that means the extent of reproducibility of the results by the same instrument. Piloting of instruments is of paramount importance in order to maintain validity, reliability and practicability of instruments and therefore, the validity and reliability of the findings. Try out and pre-testing of instruments was done by researcher so as to make correction for mistakes and identify the ambiguous and repeated questions which were unnecessary.

### **3.10 Ethical Consideration**

Approval to conduct the study was obtained from the Open University of Tanzania. The letter to request permission to do the study on the selected community was obtained from Arumeru District Council Executive Director. All participants who were involved in the study should inform of the full nature of the study and request to sign informed consent so as to accept participating in the study. Participation was voluntary and every participant was free to withdraw from the study at any time without penalty. The study was not record any name of participants and instead, codes were used to maintain confidentiality.

### **3.11 Chapter Summary**

The chapter concludes that, research design is non descriptive and appropriate with the topic for its advantages. The study conducted in Arusha Region at Arumeru District where four Villages at Kisongo Ward were engaged in the study. Purposive sampling was used to select 2 Gender Desk Police Officer, random sampling method were used to select 63 married women to participate in the study. The primary and secondary data collection methods were used. The study were used the questionnaire, survey and interview guide tool to collect the data in this study. Also

data processing was done through coding and entered in excel then transported to the SPSS Version 20 for data analysis. The validity and reliability of data has been done by testing the tools of data collections. Also the ethical consideration was obtained from the Open University of Tanzania.

## **CHAPTER FOUR**

### **RESULTS AND DISCUSSIONS**

#### **4.1. Chapter Overview**

This chapter presents results from the analysis of collected data. The first section founded on demographic characteristics of the participants. The second part focuses on the level of awareness on physical gender violence against women. The third section focuses on assessing the environmental factors that lead to physical Gender Violence among married women. The fourth section focuses on determining the cultural factors associated to physical Gender Violence among married women at Arumeru District at Arusha Region.

#### **4.2. Demographic Information of the Respondents**

##### **4.2.1 Age of the Respondents**

The findings presented in Table 4.1 show that almost one third (28%) of women were in the age group between 36 and 40 years of age. About (22%) of the women were in the age between 26-30 years the study findings show that (12%) of the women were in the age between 20-25 years and 31-35 years respectively. It was further revealed that (10%) of the women was age between 46-50 years, (8%) of the respondents were between the age of 41-45 years and 50 > above years.

The study reveal that the respondents of this study were in different group of age definitely they can provide the clear picture of physical violence among married women. The Zambian, DHS data indicated that 27 % of married women reported being beaten by their spouses in the past year; this rate reached 33 % of 15-19 year-

olds and 35 % of 20-24 year-olds. About 59 % of Zambian women have ever experienced any violence since the age of 15 years (Kishor& Johnson, 2004).This support the findings that the physical gender violence can occur in any age of the married women but it varies from one group of age to another.

#### 4.2.2 Level of Education of Respondents

The study revealed that more than half of the participants (58%) have primary level of education, (23%) achieve Secondary education and about (13%) not attended any formal education Lack of formal education contribute to the women not to understand their rights on the issues of physical violence. Among all respondent about (6%) achieved the University education. Education level plays important role in increasing awareness about physical gender violence. The most of the women whose participate in the study which is more than half of the participants having the primary level of Education.

**Table4.1: Demographic Characteristics of the Participants (n=73)**

Variable	Frequency	Percentage (%)
<b>Age group</b>		
20-25years	9	12
26-30 years	16	22
31-35 years	9	12
36-40 years	20	28
41-45 years	6	8
46-50 years	7	10
51> years above	6	8
<b>Level of Education</b>		
No school	10	13
Primary Education	42	58
Secondary Education	17	23
University Education	4	6

**Source:** Field data 2019

The low level of education contributed to the physical gender violence to the women

because they don't understand the legal right (See Table 4.1). The low level of education to the women becomes the reason of the physical gender violence among married women. A study conducted by Visarias (1990) observed that women with education up to primary level tend to be more subjected to violence as compared to those educated beyond the primary school level (Tegbar, 2010).

### **4.3 Awareness on Physical Gender Violence against Women**

About 67% of the women respond the male to be the head of the family, 21% state both male and female to be the head of the family while only 12% respond female as the head of the family. This is because most of the women contribute to provide the basic need in the family now days. The result found that (47%) of the participants responded that couple quarrel occur rarely between them. The more than quarter of the participant (26%) respond the quarrel to occur often in the family, (16%) never experience the quarrel to their partner (9%) say the quarrel occur sometimes because the life changed in a daily manner (See Table 4.2 below). The quarrel between the couple seen as the problem which vary from one couple to another.

The study supported by (Pelser et al., 2005) in India about the understanding of what constitutes Gender Based Violence. The most common responses were acts of physical violence like beating or strangling (55%). Other responses included failure to take care of wives (cited by 11% of respondents) and men's failure to show love to wives (cited by 5%). The Safe Schools Program qualitative research study asked respondents what they understood by the term 'gender-based violence' (The Centre for Educational Research and Training and DevTech Systems, Inc., 2008). As

reported previously, the study found that teachers had a better understanding of GBV than students, but that the term was not clearly understood by either group.

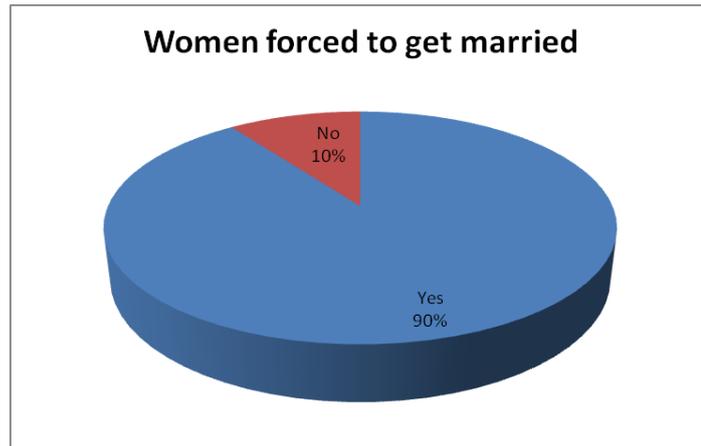
**Table 4.2: Head of the Household and Relationship of Partners**

Variable	Frequency	Percentage (%)
<b>Head of Household</b>		
Male	49	67
Female	9	12
Both male and female	15	21
<b>How quarrels occur between you</b>		
Rarely	35	47
Often	19	26
Some times	7	9
Never	12	16

**Source:** Field data 2019

#### **4.4 Social Cultural Factors Lead to Physical Violence against Married Women**

Most of the respondent (90%) of the women involved in the study reported to be forced to be married from their family, it is only (10%) of the women whose responded to be willing to be married. These become the source of physical violence to the women because the acceptances to be married were not coming from their heart it's through the external force (See Figure 4.1 below). The cultural practices of forcing the women to get married is not good practice, The reviewed studies on GBV in Malawi mentioned traditional practices that promote gender-based violence, focused specifically on traditional cultural practices that either constitute GBV or put women at risk for GBV (UNFPA, 2012).

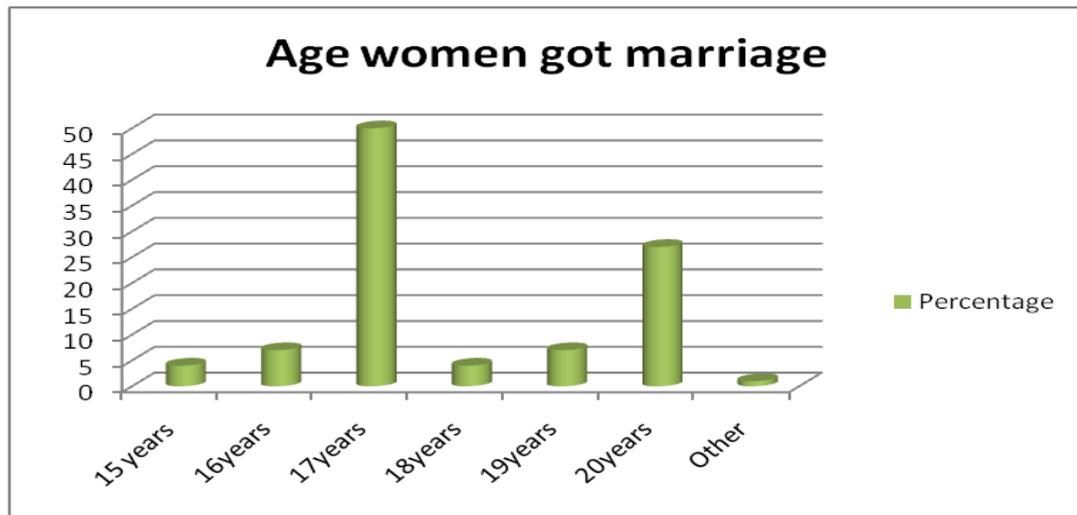


**Figure 4.1: Women Forced to Get Married From their Family**

**Source:** Field data 2019

#### **4.4.1 The Married Age**

More than three quarters of the participants (50%) were got married on age of 17 years and more than one third of the women (27%) got married on age of 20 years. The result further indicated that,(7%) of the participants were married at the age 16 and 19 years respectively and(4%)got marriage at the age of 15and 18 years while (1%) was detailed for the participants of others age which in not mentioned which it can be more than 20years.The social cultural issues in the community to force the women to get marriage before the age of individual to make decision can contribute to physical violence among married women because they lack in decision who to get married with (See Figure 4.2 below).The early marriage in the societies influence the violence to the women from their partners due to inadequate opportunity of the women to make decision in the family.



**Figure 4.2: Age When Women Got Marriage**

Source: Field data 2019

#### 4.4.2 Most Recent Husband Hurt their Wife

The results of the study shows that, (90%) of the participants restricted from contracting their family without her husband permission (10%) of them allowed communicated with their family without prior permission from their husband. Of all respondents (75%) of the participants reported their husband to impose their religious beliefs without their wife willing (25%) of the participants reported not force to adopt their spouse religious beliefs. Further the results shows that, (60%) of the participants reported their husband to slapped them or thrown the object that could hurt their wife (40%) reported their most recent husband not thrown the objects or slapped them. About (66%) realized that they were beaten by the most recent husband, and only (44%) not reported by their most recent husband.

The physical gender violence in the community is a serious among married women because the cause was their recent husband who's their living with them (See Table 4.3).The 2007 Demographic Health Survey found that substantial numbers of both

men (48%) and women (62%) trust that a husband is defensible in hitting or beating his wife in certain environments. This can also be evidence to the fact that women are more likely than men to report physical violence to police.

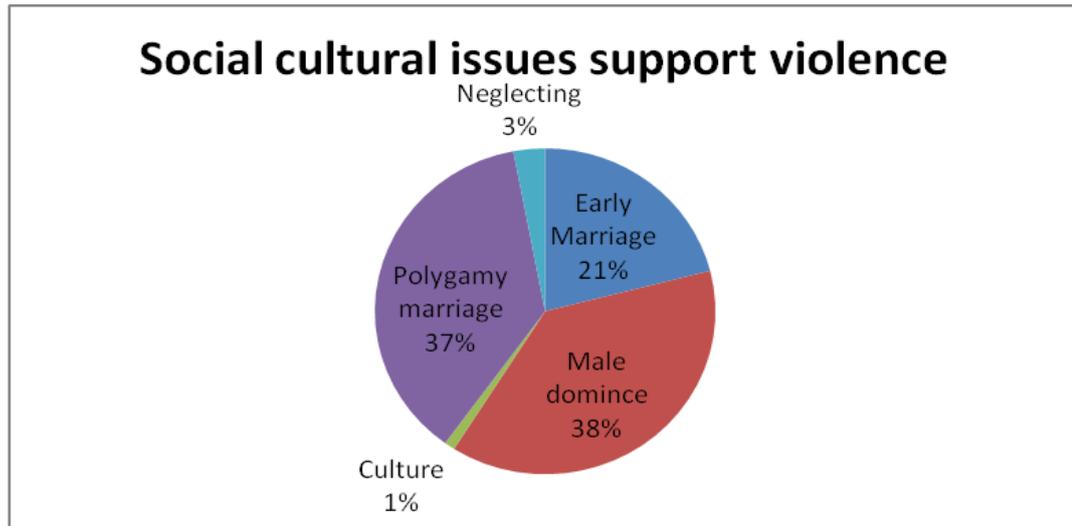
**Table 4.3: Physical Violence against Married Women**

<b>Variable</b>	<b>Frequency</b>	<b>Percentage</b>
No communication without husband permission		
Yes	66	90
No	7	10
Husband impose his religious belief		
Yes	55	75
No	18	25
Husband has slapped you or thrown objects		
Yes	44	60
No	29	40
Husband beaten you		
Yes	48	66
No	25	34

**Source:** Field data 2019

#### **4.4.3 The Existence of Physical Violence against Married Women**

Respondents in the field about (38%) of the women reported male dominance support physical gender violence against married women, (37%) of the respondents said polygamy as the source of existence of the violence against married women and others (21%) stated the early marriage as the issues to support the violence and only (3%) responded neglecting as among the issues cause the existence of the physical gender violence.



**Figure 4.3 Existence of Gender Physical Violence**

**Source:** Field data (2019)

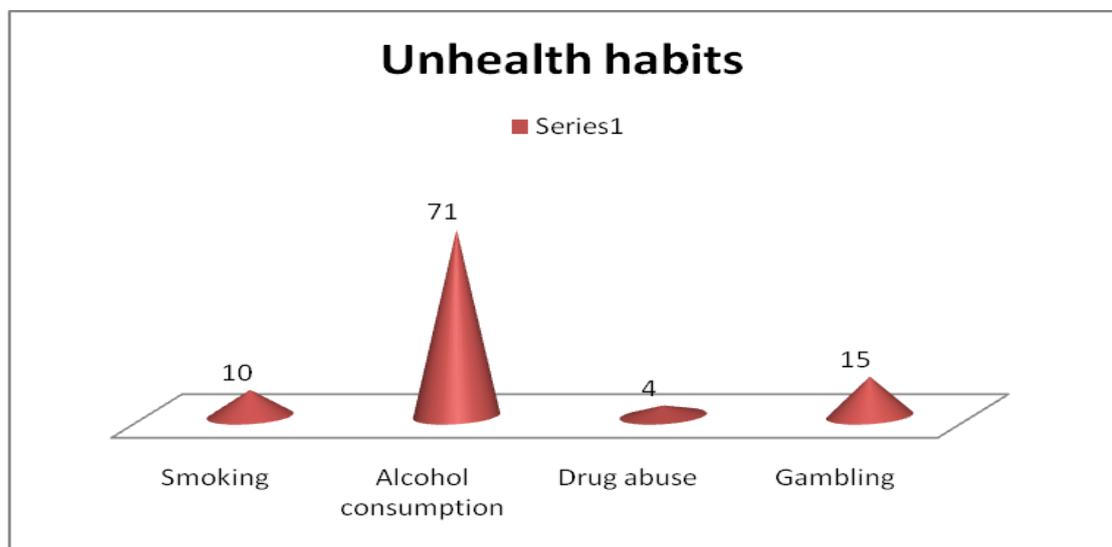
#### **4.5 Environment Factors Lead to PGV**

The result found that (71%) of the participants responded alcohol consumption affected men health and lead to physical violence,(15%) reported gambling as unhealthy habits affect moral, (10%) in smoking and (4%) say drug abuse as the moral affected by husband. The alcohol consumption to the husband of the respondents seems to be the situation which increases the existence of physical gender violence among married women (See Figure 4.4).

The physical gender violence can affect a woman who's their partner take alcohol and substance abuse. The study of men convicted of a sexual offence with a child under age 18 identified alcohol and drugs as a contributing factor to the crimes (Mtibo et al., 2011). The study interviewed 58 inmates at Zombaand Chichiri prisons in Malawi which are the two largest prisons for men. The study showed that 10.3 percent responded that they were influenced by alcohol and drugs. Other factors cited were sexual desires (46.6%), influence by the victim (5.1%), and peer pressure

(1.7%). Approximately 36 percent (36.2%) of the inmates denied they had committed a crime.

A feminist activist, on the other hand, believed that because of the economic reason also to feed themselves and their children, married women make themselves stay in such abusive relationship (Monk, 2011). Packota (2000) added one more reason behind the silence of married women as she tried to hide that negative image of the abusive partner and then eventually she adapt that and lose their self-sense.



**Figure 4.4: Physical Health and Moral Affected**

**Source:** Field data 2019

#### **4.5.1 Source of Physical Gender Violence and Reported to Gender Desk**

The results show that about (64%) of the participants reported to get the information about PGV prevention on the Radio. Although more than quarters (29%) of the respondents get the information through Television only (7%) got the information of prevention through magazine. In the different family setting the physical gender violence influenced by various sources ,the study reveal that( 37%) got violence due

to patriarchy system which insist the male as the final say in the family,(32%)the husband alcohol intake and (22%) family conflict.

The majority (69%) of the respondents reported the community to react to their husband when the PGV occur to them, (31%) of respondents indicated not supported by the community when the PGV occurs in their family. To report the problem of physical gender violence to the gender desk Police Office become the challenge due to fear of divorce, only (11%) of the respondents realize to report the problem to the authority. While (89%) of the participant got the PGV and not reported to the Gender desk. The awareness and the important of reporting of PGV to the respective department were good for prevention of existence of the problem. (See Table 4.4).

Research conducted in Nepal (2011) reported that almost half of married women 48% had experienced physical violence at some time in their lives, and 28% had experienced violence in the past 12 months. The emotional violence was most commonly reported at 40.4%, followed by physical gender violence 26.8%, sexual violence 15.3% and economic abuse/ violence (8%). Social exclusion was less commonly reported, but 11% of married women had been denied access to health services, and 8% had been denied access to places of worship.

**Table 4.4: Source of Violence Prevention and Reporting Problems**

Variables	Frequency	Percentage
Source of information about PGV		
TV	21	29
Radio	47	64
Magazine	5	7
Sources of PGV		
Family conflict	16	22
Husband alcohol intake	23	32

Cultural practices	7	9
Patriarchy system	27	37
Community react to PGV to married women		
Yes	50	69
No	23	31
Reported PGV to the gender desk		
Yes	8	11
No	65	89

**Source:** Field data 2019

The study also investigated the reporting of incidences of PGV and the places where incidents can be reported. Through the discussion participants showed that they were aware of the places they could report an incidence. Few respondents showed that they do not know the place to go for assistance.

**Key Informants Interview with Beneficiaries:** The respondents mentioned the types of PGV of explaining the meaning of PGV. Most of the interviewees expressed that the issues regarding PGV cannot be described openly, which is an in-house problems. To recognize this situation within the community and through the discussion;

One man declared that;

*“no woman in our society is able to tell the leaders of households that she was punished by her partner or husband, because she will be cursed and punished by the traditional or elders.”*

This participant realized sort of PGV problems in the community and women do hide to avoid punishment as PGV to them is one of their norms and standard in the society. Some stakeholders perceived PGV as occurring frequently in their society specifically in Arusha rural because of culture and poor economic status among some marginalised populations. Other factors mentioned were excessive use of

alcohol, low level of education, lack of employment, lack of awareness of the legal right and policies. Male key informant participants were aware of issues and its prevalence while women were shy and unaware.

Participants were from different ethnic groups with mixed tribes, participants were asked on awareness of laws against PGV. One of the FGD participants said; *“I have had the PGV perpetrator would get punishment of 30years in prison.”* A lady of 35 years who was raped by a man outside her home reported to the police while the perpetrator escaped the incidence. From the discussion participant explained,

*“there is lack of support from authorities even though when we complain no action is taken rather they let the perpetrators go free because the law is not strict enough”.*

**The factors Associated to PGV:** During the focus-group discussions participants were able to mention common types of physical gender violence with associated factors which included; domestic or Intimate Partner Violence which was connected to polygamy and sexual violence. However, participants in female FGD mentioned that polygamy is still practiced in some communities such Maasai and other rural communities as well. Such factors mentioned included the following are:

- i. Women’s lack of knowledge about law and their rights.
- ii. Low household income
- iii. Social cultural, poverty and ignorance make women more vulnerable and expose them to PGV risks such as polygamy dowry, female genital mutilation, early marriage and lack of autonomy.
- iv. The structural levels and positions in communities are male dominated.

- v. Excessive alcohol taking and smoking (drugs, Marijuana, tobacco). Most of the men in the ward use.

Physical violence such as slapping, pushing, throwing things, kicking, beating, burning, choking, dragging and threatening using a weapon such as knife or sharp instruments were most commonly in other societies as expressed by FGD. Most of men used excessive physical force during sexual intercourse and forced to engage in sexually degrading acts. The use of physical muscularity and excessive alcohol causes conflicts and made women got separated and became single mothers.

During discussion they were able to mention some services known to them such as hospital, police station and community leaders where they can find help. It was further noted that lack of awareness about where to go first after violence incidence because women fear of husband and family retribution or rejection, and stigma turning to providers for care as a barrier to seeking care. Furthermore, women of particular age from community settings are not allowed to speak openly about their live experiences that may be socially stigmatizing among the groups such as old ages.

## **CHAPTER FIVE**

### **CONCLUSION AND RECOMMENDATIONS**

#### **5.1 Chapter Overview**

This chapter presents the conclusion and recommendations of the study. The

conclusion has been drawn from findings and recommendations to address the PGV problems. The conclusion summarizes what have been discussed above; while the recommendations part of this chapter presents the suggestions proposed basing on the gaps identified in terms of loopholes and enforcement of the laws and policies on PGV.

## **5.2 Conclusion**

### **5.2.1 Awareness on Physical Gender Violence**

Stakeholders perceived PGV as stirring commonly in their society specifically in Arusha rural because of culture and poor economic status among some marginalised populations. Consequently, efforts to combat PGV have been made at every level. The international and regional levels human rights treaties are part of this effort. They are codified standards for guiding state parties and assessing the adequacy of state actions in promoting, fulfilling and protecting the human rights of its people through legislative, judicial, administrative and other measures.

The study also found out that PGV is a reality. It occurs in various forms including domestic violence, marital/ intimate partner rape, rape by a stranger, sexual exploitation and violence against elderly women. Among these, domestic violence was the most prevalent type of PGV and women were found to be the major victims of the violence. On the policy level, violence against women is listed among the indicators of poverty in the MKUKUTA II. The MCDGC in collaboration with stakeholders is implementing a number of strategies on prevention of PGV and GBV including the National Action Plan on Violence against married Women.

### **5.2.2 Environmental Factors That Lead to Physical Gender Violence**

The study revealed the increased awareness among communities on PGV, entrepreneurship knowledge and skills. The low or lack of Education increases PGV as women are not aware of their legal rights. From discussions, groups expressed that the programme has changed their life compared before the programme. Generally, all participants acknowledged some initiatives to secure a house to rescue the PGV survivors who are disabled and pregnant teenagers with provision of all basic need as necessities. Therefore, the study has good reasons to share the lessons to other wards and districts which need to be worked on, to reduce and possibly eradicate PGV with the support of other NGO's, Partners and related ministries.

### **5.2.3 Cultural Factors Associated to Physical Gender Violence**

The study explored socio-cultural and economic related factors which influence physical gender violence that include excessive alcohol taking among men and women in communities, increased dependant and orphans, divorce, polygamy, forced marriages at young ages and more men escape from their family responsibilities. Traditions and cultural issues are the mainly identified such as FGM for the Maasai communities and others as a common practice to make the family respected and increases prestige to the clan in a social arena. Furthermore, the study examined the economic factors that influence men's involvement in PGV within the context of income status of an individual and occupation status.

Generally the study revealed that socio-cultural and poor economic status is the major influence of behaviour change. The PGV services are required to be integrated in other plans, institutions and other sectors to promote gender equality. However,

the good lessons can be shared while perceived barriers and hindering factors being mitigated or removed.

### **5.3 Recommendations**

According to the study findings it is recommended that the following issues should be done:

- i. The study recommends that; at educational level the activities to be undertaken should gear to create awareness among married women so that PGV cases will be minimized to its lowest level within the communities. There is a need to encourage educational curriculum developers so that they provide adolescents and young adults with vocational training and educational support or social development trainings to teach women and men social skills such as anger management and conflict resolution skills, so as to prevent violence in future life. This will involve changing the beliefs and behavioural patterns of individuals, especially those of men towards women.
- ii. National legislation should introduce effective legal and welfare provisions, including enabling and enforcing the immediate removal of the violent partner from the common household and the environment of the woman and her children, whilst fuller investigations are pending to ascertain longer term solutions.
- iii. Community should focus on preventing repeated violence and the maintenance of a healthy relationship between the survivor and the perpetrator, attention should be given to the creation of better women's shelters and community-based support services for women who are seeking assistance in coping with violence or safely leaving a violent relationship.

- iv. The Ministry of Community Development, Gender and Children affairs should facilitate a policy dialogue on the social, health and economic consequences of PGV on sustainable development and society as a whole. The ministry also should assist gender focal points in ministries on how to address PGV issues and develop specific gender strategy on PGV.
- v. The Ward social welfare officers should link directly to the survivors so that they can solve PGV problems at immediate grounds to support change in the perception of society so that violence against women is no longer deemed a private affair in order to elicit appropriate punishment for culprits.

#### **5.4 Areas for Further Research**

From the findings there is a need for further research on assessing the effect of physical violence against women who are in reproductive age.

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## APPENDICES

### Appendix 1: Questionnaires

Dear Madam, Currently, I am carrying out a research to assess **the factors contributing to physical gender violence among married women in Arumeru district Arusha region**. I kindly request you to respond to this questionnaire which aims at accomplishing the study. The information given will be utilised for academic purposes only.

#### Section A: Demographic characteristics of participant

- 1) Sex of participant
  - a. Male
  - b. Female
- 2) Age group in years
  - a. 20-25 years
  - b. 26-30 years
  - c. 31-35 years
  - d. 36-40 years
  - e. 41- 45 years
  - f. 46 -50 years
  - g. 51 <above
- 3) Marital status
  - a. Single
  - b. Married
  - c. Divorced

d. Widowed

e. Cohabit

4) Level of education

a. Primary

b. Secondary

c. University

d. Others

**Section B: Level of awareness on Physical violence against women**

1. Who is the head of the household?

a. male

b. female

c. Both genders

2. We all know that almost all couples sometimes quarrel or have tiff. Can you tell us how often quarrels occur between you?

a. Rarely

b. Often

c. Some times

d. Never

	Statement	Strongly agree	Agree	Disagree	I don't know
1	A good wife obeys her husband even if she				
2	Family problems should only be discussed				
3	A woman should be able to choose her own friends even if her husband				
4	If a man mistreats his wife, others outside of the family should intervene				

5	The woman is allowed to report at the Gender desk if her husband mistreat her				
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**Section C: Social cultural factors lead to Physical violence against women**

1. Have you forced to get married?
  - a. Yes
  - b. No
  
2. How old were you when you got married?
  - a. 15 years
  - b. 16 years
  - c. 17 years
  - d. 18 years
  - e. 19 years
  - f. 20 years
  - g. Other please specify.....
  
3. Does your most recent husband restrict your from contacting you with your family without his permission?
  - a. Yes
  - b. No
  
4. Does your most recent husband impose his religious beliefs on you against your will?
  - a. Yes
  - b. No
  
5. Has your most recent husband has slapped you or thrown objects that could hurt you?

- a. 1 Yes
  - b. No
6. Has your most recent husband has beaten you?
- a. Yes
  - b. No
7. What social cultural issues support the existence of physical gender violence against married women?
- a. Early marriage
  - b. Male dominance
  - c. Culture
  - d. Polygamy marriage
  - e. Neglecting

**Section D: Environmental factors lead to PGV**

1. Are your physical health and morale affected by your husband's (partner's) unhealthy habits such as:
- a. 1 Smoking
  - b. Alcohol consumption
  - c. Drug abuse
  - d. Gambling
2. Where do you get information about physical gender violence prevention?
- a. TV
  - b. Radio
  - c. Magazine

d. Other please specify.....

3. What are the sources of physical gender violence to you?

- a. Family conflict
- b. Husband alcohol intake
- c. Cultural practices
- d. Patriarchy system
- e. Other specify.....

4. Does community members react to your husband when physical gender violence occurs to you and other married women?

- a. Yes
- b. No

5. Have you ever reported the problems of physical gender violence to the Gender desk?

- a. Yes
- b. No

**Thank you for your time and ideas**

## Appendix 2: Interview guide for key informants

Title:.....

### Introduction

Dear Madam/Sir, Currently, I am carrying out a research to assess **the factors contributing to physical gender violence among married women in Arumeru district Arusha region**. I kindly request you to respond to this questionnaire which aims at accomplishing the study. The information given will be utilised for academic purposes only.

1. What do you understand on physical gender violence? Which forms of gender violence do you know?
2. Which of these cases do you think occur in your area? How frequent do they occur?
3. What are the causes for physical gender violence?
4. How does the programme you have support the gender violence prevention?
5. What type of gender prevention services does the programme offer to this society? Who is involved?
6. Where do PGV cases report soon after the offence has happened?
7. What actions taken for the cases?
8. What are the effects that Physical gender violence has to?
  - a. The survivors and their families,
  - b. The offenders and their families,
  - c. The community,
  - d. The governmental bodies?

9. Are there challenges with the programme services encountered?
10. What can the programme do better to improve services on Physical gender violence prevention within your village, ward, district and the country?
11. Which improvements could be made?
12. What has to be changed?

**Thank you for taking time to answer the questions**