



Women's Institute *for*  
Leadership Development

# GENDER BASED VIOLENCE

**SURVEY FINDINGS**

A close-up photograph of a hand holding a silver pen, poised to write on a survey form. The form is a bubble sheet with multiple rows of small circles for marking answers. The background is a soft-focus image of a woman covering her face with her hand, with a shadow cast on the wall behind her.

## **About WILD**

Women's Institute for Leadership Development is a feminist and women's rights organisation registered in 2012. The organisation's goal is enhance women's capacities and environment for their effective participation in leadership and decision-making processes in Zimbabwe and beyond. It came into being after realising the inequalities in Zimbabwean society as a result of the absence of women's voices and representation in leadership positions, local and national resource allocation, as well as strong laws and a Constitution that supported and promoted their rights and participation. Since the inception the organisation has made strides in building women's capacities and supporting them to be appointed and elected as public officials. It has also helped build social movements in the communities that drive policy advocacy and demand social accountability from their respected local leaders and authorities.

# Contents

<b>About WILD.....</b>	<b>2</b>
<b>1. Introduction.....</b>	<b>4</b>
<b>2. Background .....</b>	<b>4</b>
<b>3. Objectives of the study.....</b>	<b>5</b>
<b>4. Research questions.....</b>	<b>5</b>
<b>5. Methodology .....</b>	<b>6</b>
Data collection technique .....	6
Population of the study.....	6
Sampling Methods.....	7
Sampling unit .....	7
Validity.....	7
Data analyses and presentation .....	7
<b>6. RESULTS .....</b>	<b>9</b>
GBV perceptions findings.....	9
Response rate.....	9
Demographic features of the respondents .....	10
Gender .....	10
Age range of the respondents .....	11
Understanding on Gender Based Violence (GBV) .....	11
The gender mostly affected by GBV.....	12
Most common form of abuse perpetrated on women.....	13
Areas where women mostly face abuse .....	14
Distribution of the surveyed respondents according to their marital status. ....	14
Gender based violence amidst the Covid/19 pandemic. ....	15
Causes of diverse forms of gender based violence on women.....	16
Places women seek help after assault.....	17
Impacts of gender based violence on women.....	18
<b>7. CONCLUSION AND RECOMMENDATIONS.....</b>	<b>19</b>
<b>References.....</b>	<b>26</b>

## **1. Introduction**

While reports point to a decrease in crime during lockdown as a result of restricted movement, gender-based violence against women and girls, continues unabated, and has likely worsened in Zimbabwe (Mpungose, 2020). The Covid-19 pandemic has revealed the crippling inequalities that exist in Zimbabwe, where key populations, particularly women aged between 18 and 35 years, bear the impact of fragility and disparity. This social exclusion, arguably emanates from patriarchy which is normally superseded by distorted cultural perceptions, a lack of equal opportunities and barriers to learning and participation. There exists a clear gap of rigorous literature exploring this issue. It is against this background that this survey attempts to understand the ever shifting dynamics of GBV at the same time incorporating the aspect of COVID-19. It reviews the pattern of the rise in GBV cases and the resultant psychological, economic and social implications. It further attempts to create awareness by initiating a discourse urging for change in the response towards survivors of GBV. The research concludes by suggesting measures that can be used to mitigate the existence and spread of GBV.

## **2. Background**

To mitigate the impact of GBV against existing layers of vulnerability, Zimbabwe like other countries has employed various measures which include legislative reform and increased gender activism. Whilst commendable steps have been made through policies and government commitments on gender empowerment, there is still a lot of evidence of women abused at home, work places, tertiary institutions, political parties. Other factors include feminization of poverty, the use of women as a currency in corruption and inconsistencies between policy positions and practice. As well, the COVID 19 pandemic has exposed and intensified existing structural inequalities, with disproportionate impacts for marginalized women and girls especially those from low income communities and informal traders who were already facing life threatening economic challenges.

Amongst other things, poor service delivery, movement restrictions, loss of income, isolation, overcrowding, stress, stigma and anxiety, have increased the risk and severity of gender based violence against women and girls. In the case of Zimbabwe were women and girls had resorted to the informal sector and other self-employment gaps like commercial sex work to cushion themselves from poverty, COVID 19 has redrawn the power dynamics in a manner that increases GBV instances. A classic example is how the lockdown measures have criminalized the informal sector and opened up for state sponsored GBV with women in the informal sector

being more affected. This has pushed women and girls to work in unsafe spaces which have a minimal presence of the law and a low rate of service delivery.

### **3. Objectives of the study**

- To explore the perceptions on GBV in Bulawayo
- To explore the forms of GBV directed towards women and girls
- To suggest strategies for fighting GBV

### **4. Research questions**

- What are the perceptions of GBV in Bulawayo?
- What are the common forms of GBV?
- What measures can be put in place to curb GBV?

## **5. Methodology**

This survey used a mixed research approach to explore the consequences of GBV in light of the COVID 19 outbreak. The paper also reviews the published reports in scientific as well as mass media literatures focusing on the rise of gender-based violence during the imposed lockdown, its consequences, and the measures taken by the governments to tackle the issue. Welman Kruger (2015) defines the research methodology as a research framework that presents the direction that the study will take with regard to the research approach, population, sample procedure, data collection procedure, data analysis and ethical considerations. Whitely (2002) also highlights that research methodology is a collection of existential knowledge that is used for the purposes of validating new knowledge. The research design applied in collecting data and methods used in conducting this research are highlighted below. According to Jankowicz (2000) a research design can be considered as a blue print to guide the data collection, data processing and information transmission.

### **Data collection technique**

In acquiring data for this survey both primary and secondary data were used. Primary data was collected by means of questionnaires which were distributed to respondents and secondary data was derived through a tailor-made survey from sources such as online platforms, newspapers, articles, and books to get a thorough understanding about the research survey. Questionnaires were used due to time limitations hence questionnaires enabled quick and cost effective means for collecting information from respondents. Interviews were also conducted so as to gain in-depth understanding of the impact of gender based violence on women, key informant interviews were conducted. These methods of data analyses were used to acquire information on diverse perceptions of gender based violence, to show how women have been affected by gender based violence, if Covid/19 pandemic led to the increase of gender based violence and get an understanding of strategies that can be used to get rid of gender based violence especially perpetrated on women and girls.

### **Population of the study**

The survey purposively selected 100 respondents, these respondents were selected from cluster based gender based violence activities that were conducted in Cowdray Park, Nkulumane and Bulawayo Central Business District. Frazer and Lawley (2000) defines a population as the total set of possible respondents for a given research situation.

## **Sampling Methods**

The study used purposive sampling. Purposive sampling was used which allowed researchers to use their judgement to select respondents with a specific purpose in mind. The sample used is logically assumed to be representative of the population of which was composed of students formally and informally employed. Sampling was defined by Jankowicz (2000) as the deliberate selection of a number of people who are to provide data from which you will draw conclusions about some larger group, population, who these people represent. With the exception of situations where one is able to conduct a census, sampling is central to all research.

## **Sampling unit**

The sampling unit comprised of tertiary students, formally employed women, informally employed women, women in politics and a few unemployed man. These people were strategically selected due to the nature of the subject in question which requires diverse respondents from different fields to bring out gender based violence from diverse fields. The sampling frame is derived from attendance register data for gender based violence meetings in the selected areas. McNabb (2015) notes that the sample size in quantitative research should be at least 10 percent of the total population and should not exceed 100, therefore the sampling size was 100.

## **Validity**

To ensure validity a relatively large sample was used. The sample size for respondents aided in evidence gathering, validity and reliability of results. This method was used because it assists in unearthing opinions, behaviors and attitudes. This method assisted in gaining an in-depth understanding of respondents' judgements and perceptions about the cause of various forms of GBV. The research's exclusion/ inclusion criteria involved the use of respondents who attended meetings on gender based violence during the 16 days of activism against gender based violence campaign. .

## **Data analyses and presentation**

Primary data was analysed. The smallest unit that was analysed is the respondents' age and gender. To ensure data reduction, graphs and numerical summaries were done. Frequency analysis using pie charts was used to demonstrate trends in responses. The data collected was analysed descriptive statistical analysis techniques and visualization of the questionnaire. Results were used to describe the research findings and gain a deeper perspective on the impact of GBV on women. This approach provided statistical information on the percentage of women

who understand gender based violence and enabled researchers to ascertain the most perpetrated form of abuse. The statistical analysis provided descriptive analyses on the relationship between the highest level of education and the strategies that could work in mitigating Gender Based Violence.



## 6. RESULTS

### GBV perceptions findings

This section analyzed the responses from questionnaires and interviews. The perceptions on gender-based violence were explored and illustrated through the use of presentations, analysis and discussions derived from data gathered. In presenting this data, the researcher makes use of pie charts, tables and graphs which ease the process of translating the derived data for the better understanding of the problem associated with gender-based violence as perceived by the respondents.

### Response rate

Gender-based violence which became a global pandemic had a dire effect on victims, particularly women. In an attempt to gain diverse views of gender-based violence, the researcher distributed 100 questionnaires to respondents who were selected during the 16 days of activism against gender-based violence programs that were initiated by WILD, including a laundry café attended by 38 women, the governor movie screening attended by 30 and sex for grades by 32. The response rate will be shown in the table below;

**Table 1 Response rate**

Questionnaires	Number	Percentage
Dispatched	100	100%
Returned	100	100%
Non response	0	0%

*Source: Field questionnaires, December 2020*

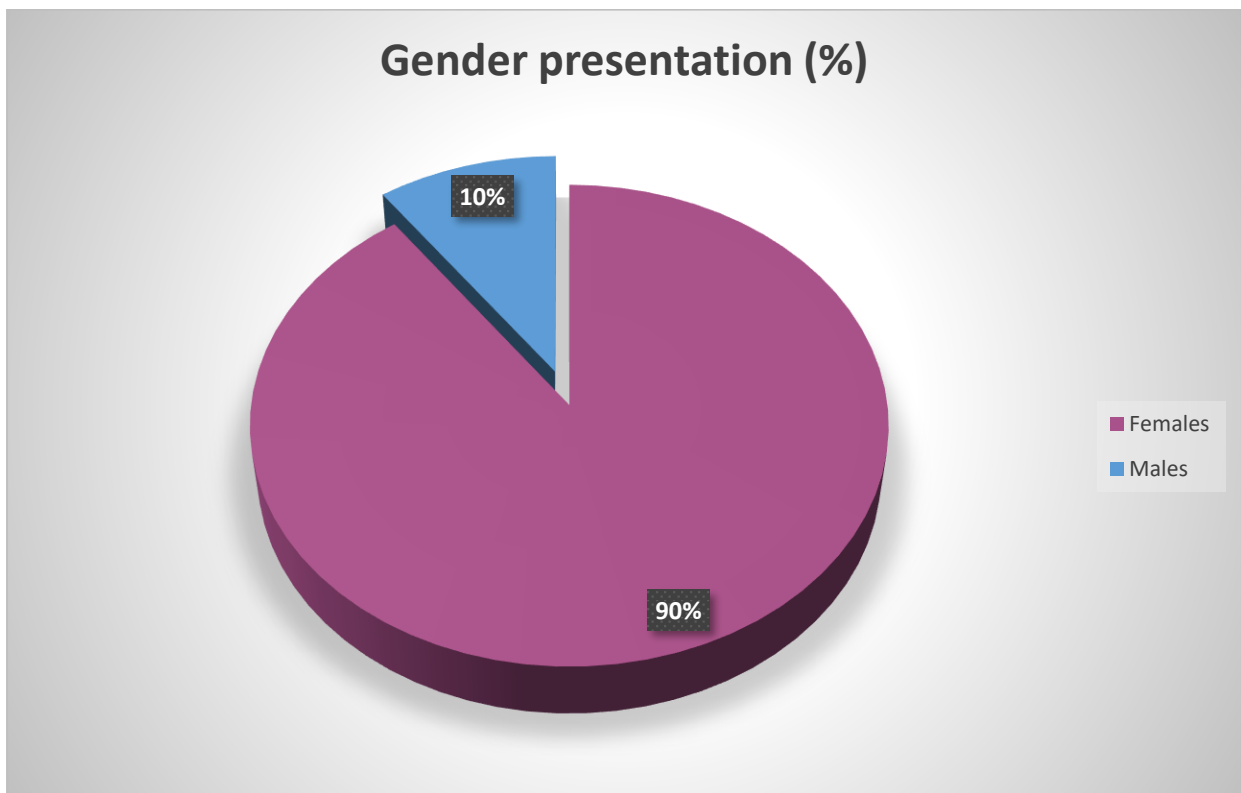
According to Tuckman (2008) to ensure the reliability and the validity of the data derived from the research, the response rate should be at least 80%. In this regard, the research survey had 100% response rate which denotes the reliability and validity of the findings for the survey.

## Demographic features of the respondents

### Gender

Responses obtained from the questionnaires indicated that 90 of the respondents were female and 10 were male. In percentages, 90% of the respondents were female and 10% were male. The vast number of female respondents was due to the activities that mobilized a significant number of women.

**Fig 1.1 Gender presentation**



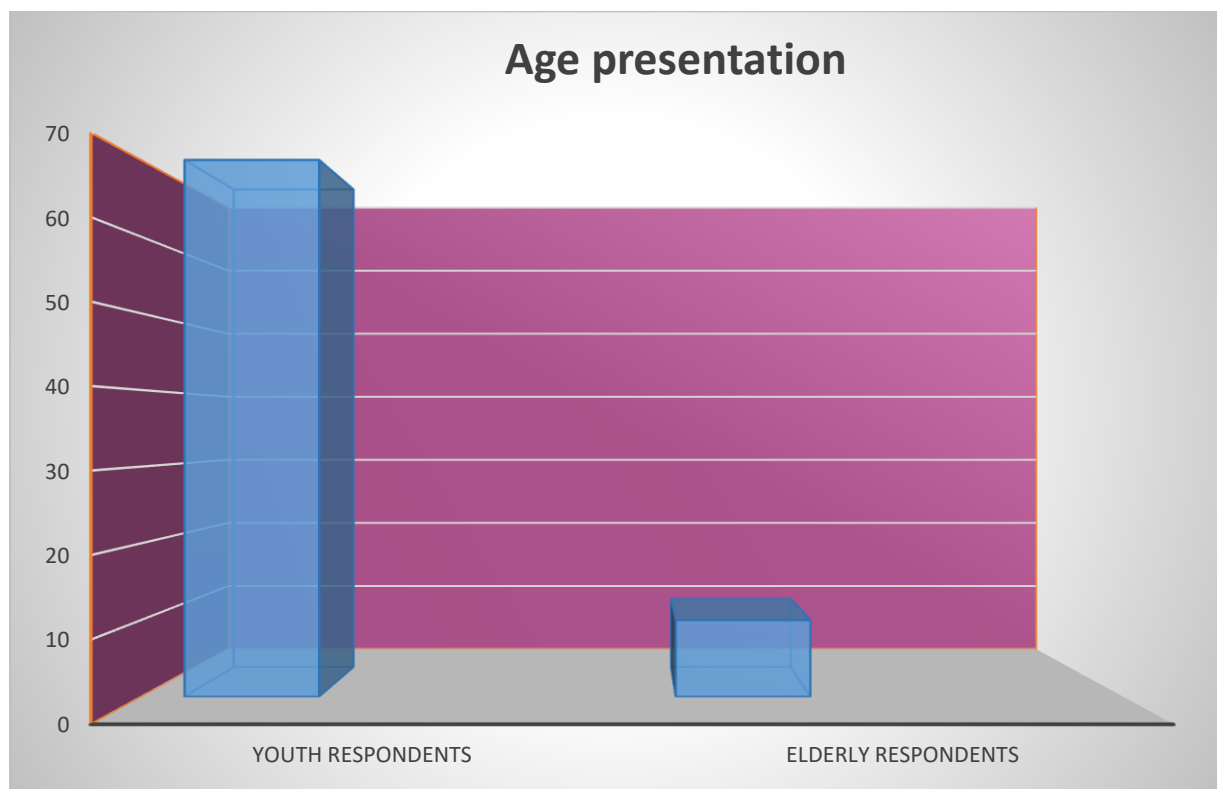
*Source; Field questionnaire, December 2020*

As highlighted above, a lot of responses were from women due to the fact that the target population was from the implemented activities which had a huge attendance of women and a few men. The 16 days of activism against gender based violence, which is commemorated every year, creates a platform for engagement on gender based violence. women who are mainly the victims of GBV are keen on attending GBV related activities as they disclose and share their experiences or their views on the subject. On the other hand, the low male respondents' rate can be attributed to their lack of interest on the subject and their busy schedules at their work or life.

### Age range of the respondents

The questionnaire was divided into 4 age ranges namely 18-24, 25- 35, 36- 49 and 50 and above. For the purposes of clear illustration of the age range, the survey in the above bar graph will show the number of youths that participated in the data collection and the elderly- where the youth will be from the 18-24 and 25- 35 age ranges then the elderly from 36- 49 and 50 and above range.

**Fig 1.2 Age range presentation**



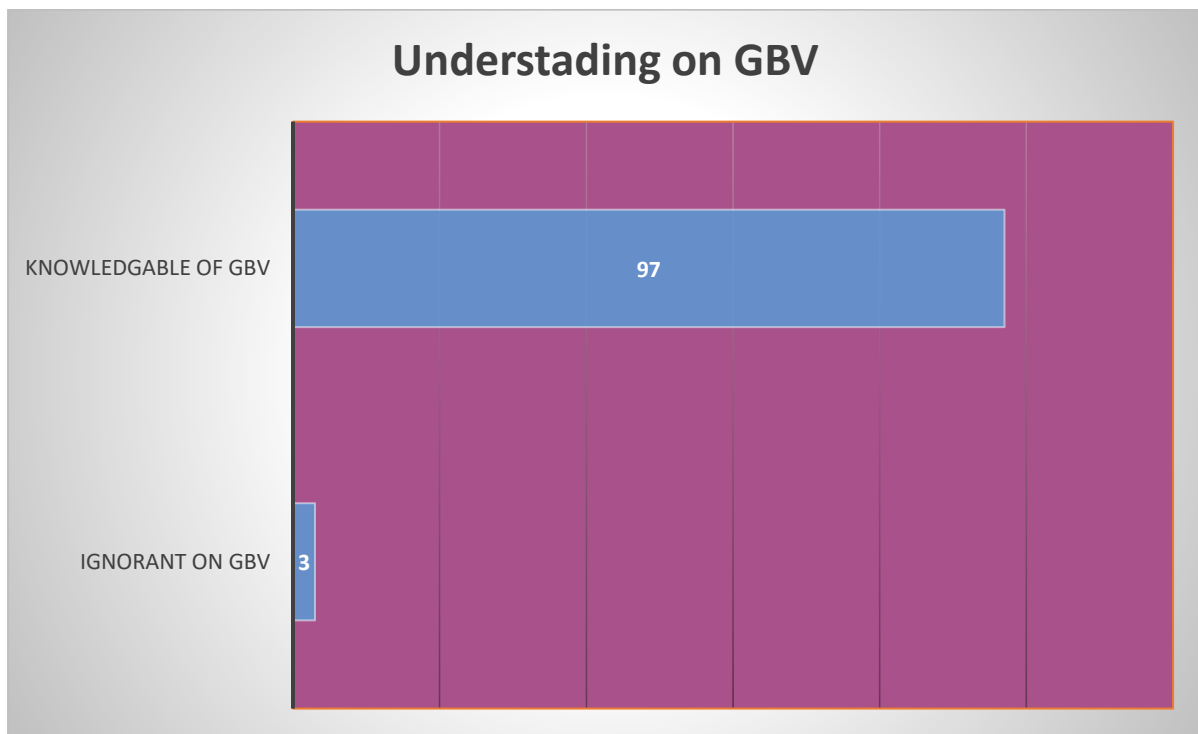
*Source; Field questionnaires, December 2020*

Over the years youths have been left out and have been seen not voicing out their concerns. In mobilization processes, then Women’s Institute for Leadership Development (WILD) has tried to recognize and capacitate youths to participate in political, economic and social processes which might be the reason for a high respond rate from the youth where 70 of the respondents were youths and 30 were elderly.

### Understanding on Gender Based Violence (GBV)

Out of the 100 questionnaires that were issued, only 3 were uncertain of what Gender Based Violence (GBV) is and what it entails. An explanation had to be given in a vernacular language, in order to enlighten them.

**Fig 1.3 GBV understanding**



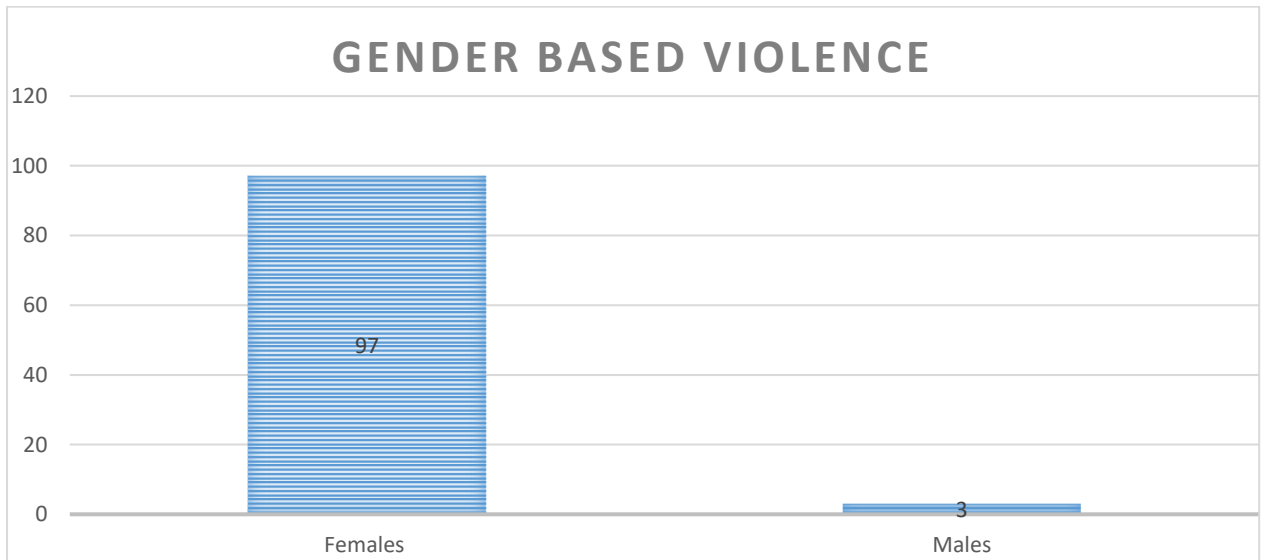
*Source; Field questionnaires, December 2020*

A lot of respondents demonstrated to be knowledgeable of gender based violence and what it entails. Ignorance that was illustrated by the 3 respondents was out of lack of distinction between mere violence and gender based violence and from the belief that violence is just violence and no such thing as gender based violence as noted by one respondent. So from the graph above, 90 were knowledgeable about GBV and 3 were ignorant.

### **The gender mostly affected by GBV**

The questionnaire asked respondents to identify the gender they think is mostly affected by GBV. From the findings, 97 respondents identified the female to be the mostly affect gender as they are mostly the victims of GBV and 3 said males are the most affected.

**Fig 1.4 Most affected gender by GBV**

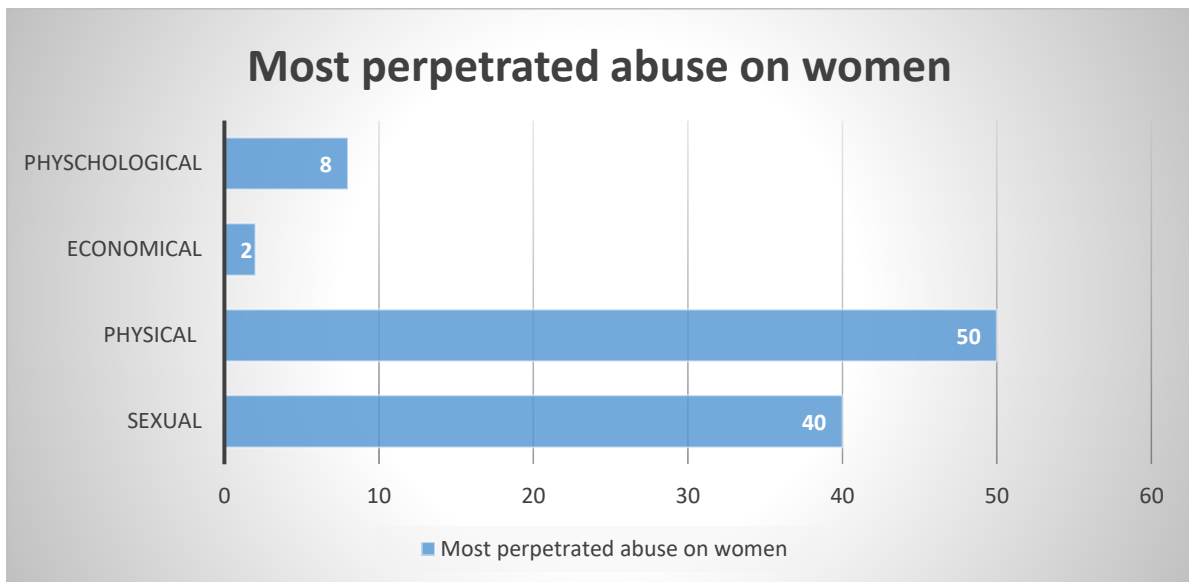


*Source; Field questionnaire, December 2020*

**Most common form of abuse perpetrated on women**

Gender based violence comes in many forms including sexual, physical, economical and psychological. The graph below shows the respondents’ responses on the most common abuse perpetrated on women.

**Fig 1.5 Most form of perpetrated abuse perpetrated on women.**



*Source, Field questionnaire, December 2020*

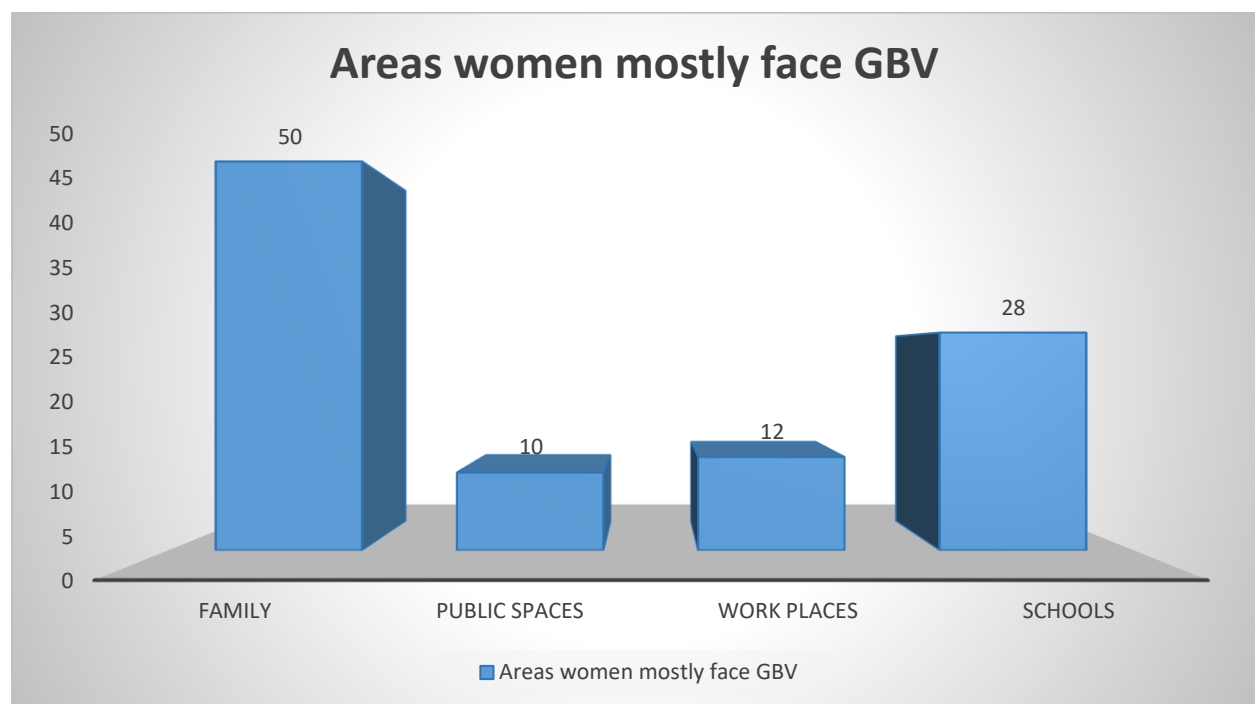
The above graph shows that 50 respondents pointed physical abuse to be the most perpetrated abuse on women with 40 pointing to sexual violence, 8 to psychological violence and only 2

to economical gender based violence. Hence it is clear that many respondents think women mostly succumb to sexual and physical gender based violence.

### **Areas where women mostly face abuse**

Women face different forms of gender based violence in different spaces. Upon being asked on the spaces where women mostly face gender based violence, respondents' responses are as illustrated by the graph below;

**Fig 1.6 Areas where women mostly face GBV**



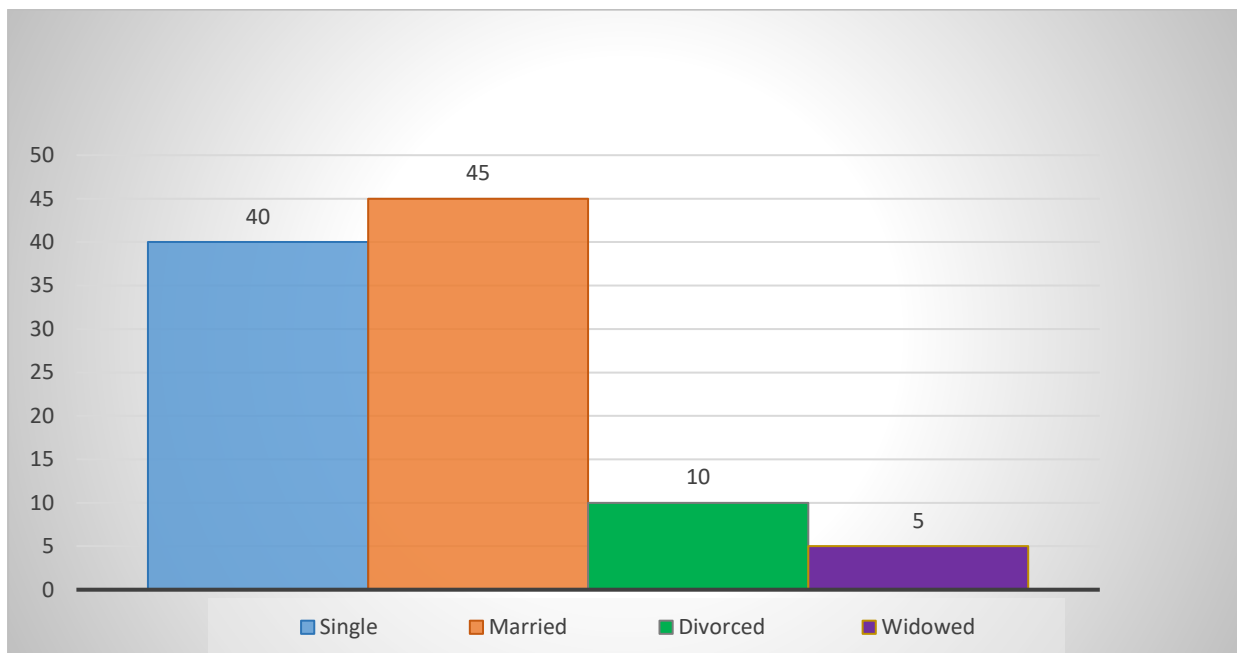
*Source, field questionnaires, December 2020*

50 respondents highlighted that women mostly face gender based violence within their families, 28 pointed to schools, 12 to workplaces and 10 said they mostly face gender based violence in public spaces. It is with this that the research concludes that most respondents believe that most of the gender based violence on women is mostly from the family as a result of the power mostly given to men within homes through culture in the societies we live in which in turn men use to violate women and their rights.

### **Distribution of the surveyed respondents according to their marital status.**

In a bid to investigate why respondents chose the family to be the area where women mostly face gender based violence, it was of paramount importance to determine the marital statuses of the respondents. The results are as follows;

**Fig 1.7 Respondents' marital status**



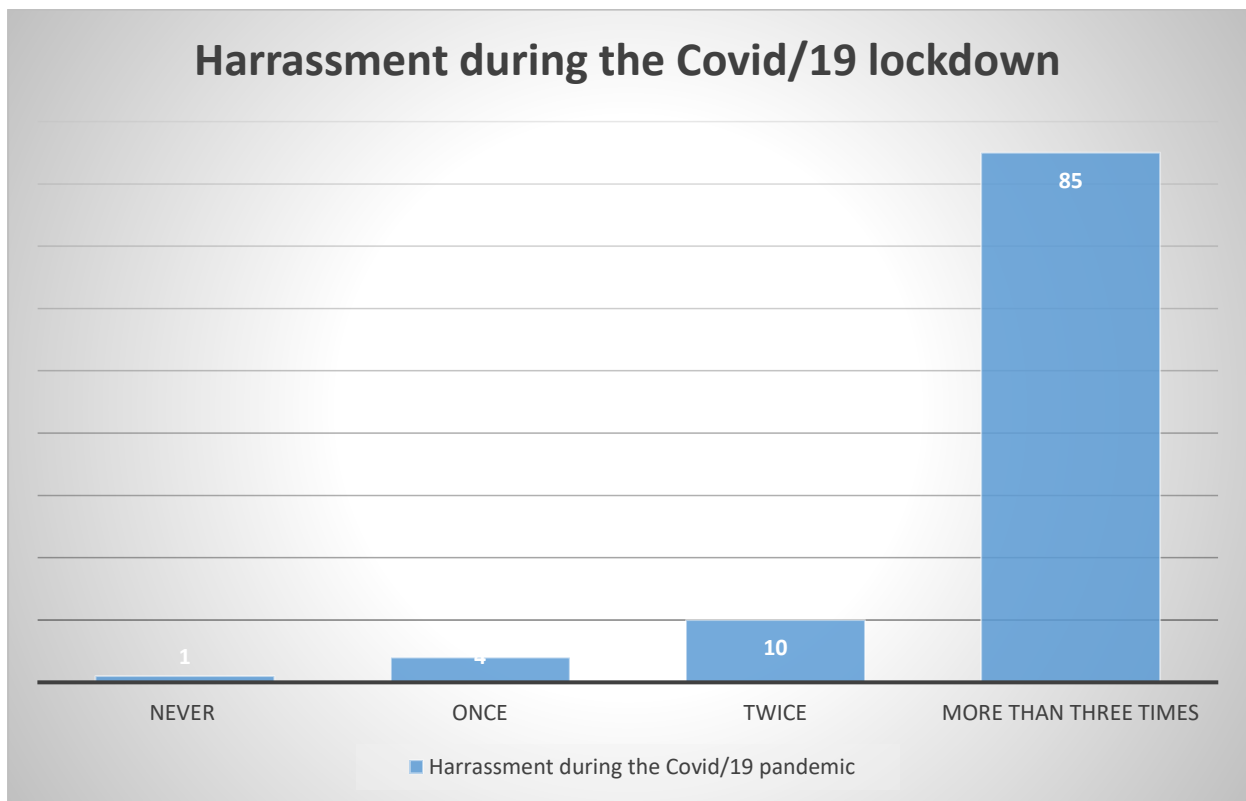
*Source; Field Questionnaires, December 2020*

Most respondents are married and some were once married which might be the reason why most women chose the families to be the epicenter of gender based violence for women. Women highlighted that some traditional beliefs make women more prone to abuse as most of them are tailor made to please men at the expense of women's rights and happiness. From the data collected, 45 respondents are married, 40 are single, 5 are widows and 10 are divorced as illustrated by the graph above.

#### **Gender based violence amidst the Covid/19 pandemic.**

The Covid/19 pandemic led to an enforced national wide lockdown which led companies to close and people were advised to stay in their homes. From the Musasa report on GBV, the Covid/19 pandemic enforced lockdown increased gender based violence cases perpetrated on women. Hence the results are outlined below;

**Fig 1.8 Gender based abuse during the Covid/19 lockdown**



*Source; Field questionnaires, December 2020*

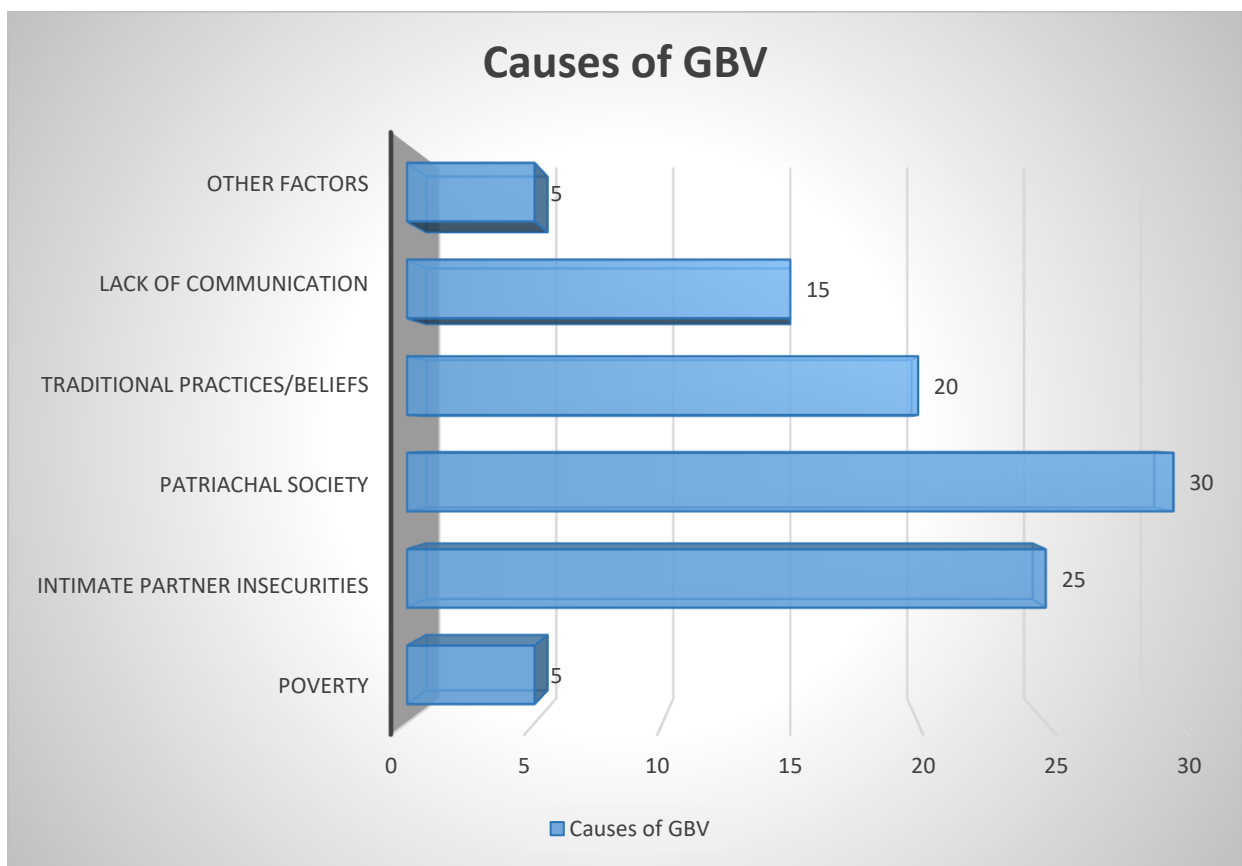
85 respondents highlighted to have been victims of gender based violence more than three times, 10 said they faced violence twice during the lockdown, 4 succumbed to it once and only 1 was never abused. From the findings it is clear that more people especially women were abused during the lockdown.

#### **Causes of diverse forms of gender based violence on women**

Respondents were asked to state what they think are the causes of various forms of gender based violence and the responses were as follows.



**Fig 1.9 Causes of diverse forms of GBV on women**



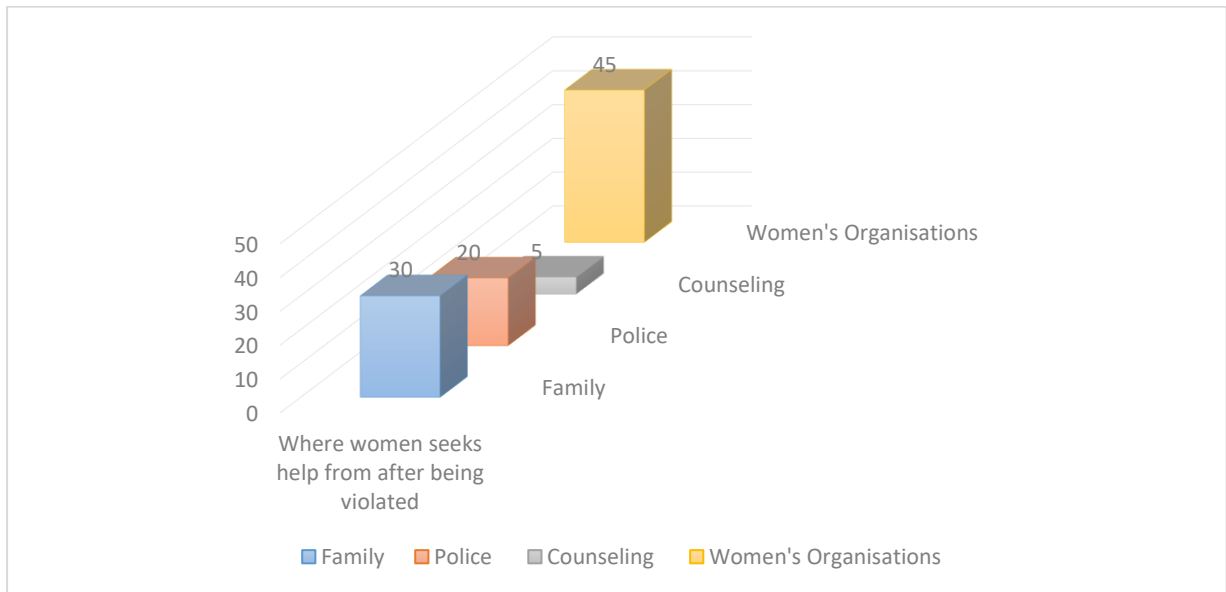
*Source; Field questionnaire, December 2020*

30 respondents noted the patriarchal society as the reason behind gender based violence where male dominance has been normalized and they misuse this to violet women. 25 respondents said intimate partner insecurities, 20 pointed to traditional practices and beliefs, 15 respondents highlighted lack of communication, 5 poverty pointed to poverty as the causes of gender based violence.

### **Places women seek help after assault**

The survey went on to investigate different places where respondents feel women go soon after being assaulted. Results are presented in the graph below;

**Fig 2.0 Where women seek help from after being violated.**



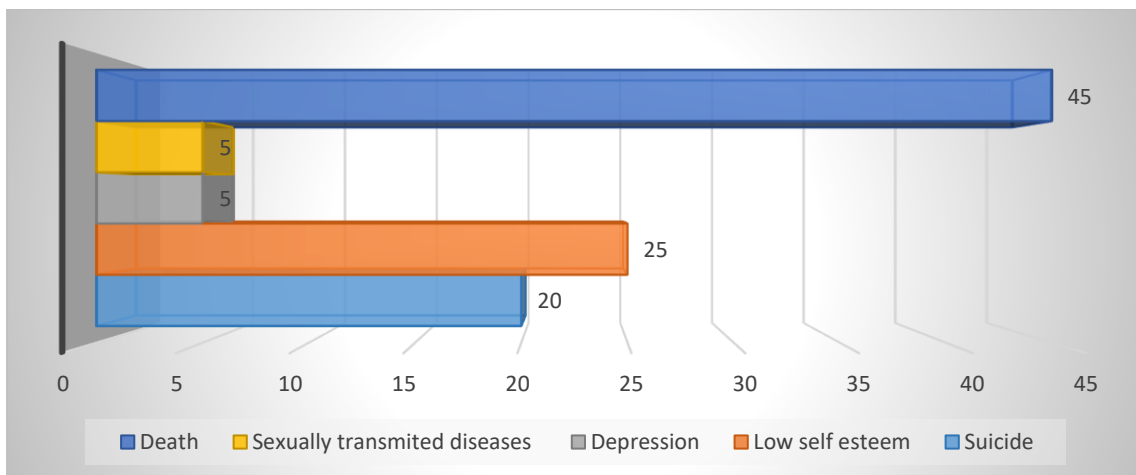
**Source; Field questionnaire, December 2020**

45 respondents said they seek help from Women’s organisations, 30 from family members, 20 from the police and 5 from counseling.

**Impacts of gender based violence on women**

The survey investigated on some of the impacts of gender based violence on women and the findings are illustrated in the graph below;

**Fig 2.1 Impact of GBV on women**

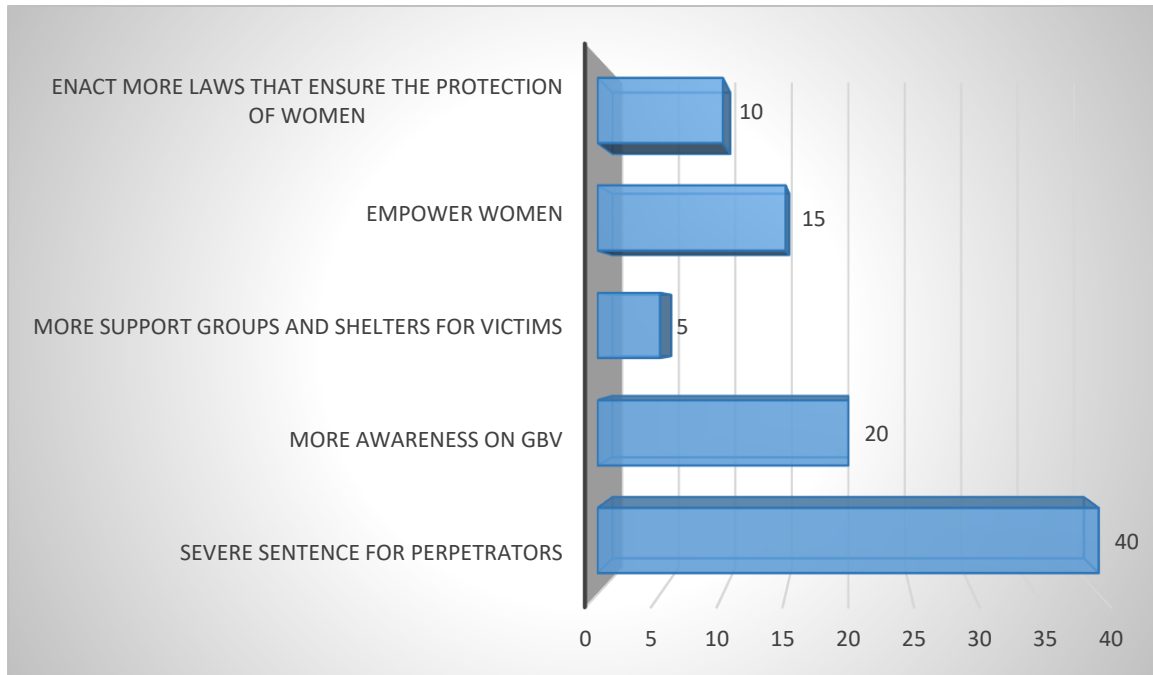


**Source; Field questionnaire, December 2020**

## Strategies that can be used to put an end to Gender Based Violence

The survey required respondents to state some of the strategies that they think can be employed to mitigate or put an end to Gender Based Violence. The responses were as follows;

**Fig 2.2 Strategies that can be employed to end GBV**



*Source, Field questionnaires, December 2020*

Severe sentence for the perpetrator was mentioned by 40 respondents to be a strategy to put an end to GBV while 20 say more awareness campaigns, 5 said more support groups and shelters for victims, 15 say women empowerments and 10 pointed the enactment of laws that ensure the protection of women to be a strategy that can be used to put an end to GBV violence perpetrated on women.

## 7. CONCLUSION AND RECOMMENDATIONS

In addressing GBV, this research proposes well-integrated approaches and engagement with multiple stakeholders. The research also suggests that policy makers should address underlying risk factors for violence, including social norms regarding gender dynamics and the acceptability of violence. These examples point to the urgency of greatly increasing investment both in innovative programming in primary prevention, as well as in high-quality experimental and quasi-experimental evaluations to guide Zimbabwe's effort in ending GBV. A larger section of the respondents argue that a lot has to be put in place to address the effects of GBV. The prescribed alternatives range from severely sentencing offenders, more awareness on

GBV, creation of more support groups, women empowerment and the legislation and implementation of laws that protect women and girls from GBV.

During a crisis, such as COVID19, institutions and systems for physical and social protection may be weakened or destroyed. Police, legal, health, education, and social services are often disrupted; many people flee, and those who remain may not have the capacity or the equipment to work. Families and communities are often separated, which results in a further breakdown of community support systems and protection mechanisms. Against such a finding, it is essential that policy interventions on GBV are directed on female youths who constituted 90% of the sample but again experienced 97% of all cases of GBV. Primary prevention programs address the underlying attitudes, norms, and behaviors that support GBV. To end GBV, more programs that empower women and girls, and promote nonviolent, equitable, and respectful relationships should be prioritized.

Public policy makers should invest in curbing physical and sexual violence against women. This is in light of how 50% of GBV cases are earmarked as physical violence and 40% being sexual harassment. It is in this context that civil society organisations should design programs that aim to educate firstly males who are the major perpetrators of physical and sexual violence. Focus should be placed on empowering communities with non-violent conflict resolution skills especially at a family level which according to the findings of this study is the breeding ground for GBV. As well, CSOs should invest in programs that talk about sexual rights of women. Particular focus should be given to issues of consent and self-restraint. Males who are the major perpetrators of GBV arguably have a limited understanding on issues of consent and how to sexually maintain themselves around women. Many cases of sexual violence are usually accompanied with physical violence which therefore calls for an integrated approach in mitigating physical and sexual violence against women.

Schools are another area of concern for GBV cases, although early social and emotional learning programs and bullying prevention programs are outside the purview of this review, it is worth noting that there are prevention opportunities along the entire developmental trajectory. Social and emotional learning programs that develop emotional awareness, responsible decision-making, relationships, self-management, and self-awareness ultimately address some of the risk factors for later GBV (R. D. Taylor, Oberle, Durlak, & Weissberg, 2017).

Moreover, efforts to address GBV should be implemented at the family unit focusing mainly on intimate partner violence. This research discovered that the majority of GBV cases are between married couples followed by unmarried singles who however have intimate partners. Research shows that addressing intimate partner violence requires working at society, community, household and individual levels to promote relationships built on respect, equality and peace (Martins, 2017).

Patriarchy is one of the leading causes of GBV, patriarchy is commonly described as „a system of social structures and practices, in which men govern, oppress and exploit women”. Patriarchal violence is then any kind of violence that creates or maintains men's power and dominance, or avenges the loss of their power. Patriarchal culture is one of the biggest barriers in ending violence against women in the region. Violence against women is considered as a private matter that should be dealt with privately within the family or relationship. Women fear reporting violence since they might be told that they have encouraged such acts. To counter patriarchy which is an obvious catalyst of GBV, policy makers should prioritize gender equality and mainstream it throughout the education. Education will be the main trigger of a change of mindsets and for the promotion of zero tolerance for gender-based violence (UNW, 2019).

Moreover, intimate partner insecurity is another key trigger of GBV, various studies indicate that intimate partner violence (insecurities) largely emanate from patriarchy which suggests that women should be controlled and their activities should be monitored. The case also involves female partner insecurities who after approaching their partners are negated to GBV. To counter this problem policy makers need to design more gender equality advocacy programs to be implemented at community levels where much of the GBV cases take place.

Extreme cases of poverty are also another key factor fueling GBV, against a backdrop of COVID19 regulations which forced a predominantly informal economy to close, many families were pushed to abject poverty. The COVID 19 regulations were not accompanied by a meaningful economic intervention measure hence factors like hunger and income deficiencies becoming key vectors of GBV. Against such a case, policy makers should increase the rate of economic recovery particularly the restoration of income streams for poor communities. Cushioning allowances and cash disbursements should also be considered as an option to mitigate poverty as a root cause of GBV.

One of the key factors sustaining the continuity of GBV is that there are very few victim friendly spaces to report GBV. Victims still rely on NGOs which despite their relevance in fighting GBV should be complimented by other structures of society starting with the family, schools, police and government counselling facilities on a psychological level, GBV is deeply disempowering. It takes from a person, it can destroy self-esteem and propel one to be a dysfunctional member of society. Without proper reintegration systems, women and girls who experienced GBV may never be allowed to reach their potential and may at times lose confidence in the who concept of a society. Some women even fail to go to school, to socialize, to work, and to fulfill their civil obligations.

To increase the pace of mitigating GBV, policy makers should capacitate community structures to be responsive towards GBV and be more ready to deal with GBV in a manner that is consistent with the law and best international practices on gender. At large, greater emphasis should be directed towards capacitating NGOs which according to this research are a preferred resort for GBV victims.

Community structures should also be capacitated with skills to mitigate the long-term effects of GBV on both the individual and the society. Community education is a key variable to be incorporated in the fight against GBV. Equally awareness raising sessions help to challenge preconceived ideas and explain how survivors should be taken care of. In some instances, the whole community is involved in protecting women and girls, a status that the Zimbabwean community has yet achieved.

Recognition that there is a symbiotic relationship between COVID19 and the increase in GBV is an essential and lifesaving move in addressing the “GBV pandemic within the COVID19 pandemic.” For something to become a policy issue, it must first come to the attention of policymakers (Kingdon, 2003). Therefore, without a shared analysis on how COVID 19 affects society, it remains difficult for policy makers to design a comprehensive strategy of combatting the effects of covid19. As well, COVID 19 has been identified as a problem however the manner in which COVID19 has been problematized does not reflect the urgency of its impact on GBV. This has created a surge in cases of COVID19 which has not been accompanied by a surge in the fight against COVID19. For policy makers to completely resolve GBV within the context of COVID 19, they firstly need to acknowledge how the pandemic has exacerbated instances of GBV and understand the new patterns of GBV which

are induced by the pandemic. CSOs which are mainly involved in civic education should increase efforts on educating citizens on how to deal with COVID 19 related cases of conflict.

Gender-based violence (GBV) increases during every type of emergency whether economic crises, conflict or disease outbreaks. Pre-existing toxic social norms and gender inequalities, economic and social stress caused by the COVID-19 pandemic, coupled with restricted movement and social isolation measures, have led to an exponential increase in GBV. Many women are in ‘lockdown’ at home with their abusers while being cut off from normal support services (UNDP, 2020). This research provides concrete actions and strategies that Zimbabwe can take to prevent and address GBV in the context of COVID-19. It includes recommendations for adapting dedicated GBV services and support to the crisis context and for mainstreaming GBV prevention and response in non GBV specific interventions.

Lockdown measures are necessary to reduce the spread of the Coronavirus disease, but they also have serious psychological and socially disruptive consequences, (Mittal & Singh, 2020) argues that this phenomena can be called the ‘quarantine paradox’ given its interrelation with the surge in the cases of gender-based violence. However, there exists a clear gap of rigorous literature exploring the issue. Hence, there should be an increase in attempts to understand GBV as an aspect of the COVID-19 lockdown. Effort should also be directed towards giving a conceptual framework for the patterns of GBV cases and the resultant psychological, economic and social impact. This can be done by initiating a discourse urging for change in the response towards the victims of GBV.

Another key area of note is how countries like Zimbabwe should setup early warning systems for GBV cases. This is in light of how it takes a lot of time for local communities to identify cases of GBV and how even policy makers, law enforcement agencies and CSOs take long to identify and understand new dynamics of GBV. There is need for ratification to best international practices on the rights of women and girls who are mostly affected by GBV. The state should play a leading role in the fight against GBV.

All States must protect against gender based violence, whether by State or private actors, pursuant to their obligations under the International Covenant on Civil and Political Rights, the UN Convention Against Torture, the Convention on the Prevention of all forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child. Most African countries are parties to these international treaties. In addition, States of

the African Union are bound to respect a range of international law and standards which prohibit gender based discrimination and sexual violence, most notable are the African Charter, and the Protocol to the African Charter on Human and People's Rights on the Rights of Women (the Maputo Protocol) and the African Charter on the Rights and Welfare of the Child.

Article 4 of the Maputo Protocol provides that “every woman shall be entitled to respect for her life and the integrity and security of her person. All forms of exploitation, cruel, inhuman or degrading punishment and treatment shall be prohibited. States parties shall take appropriate and effective measures to enact and enforce laws to prohibit all forms of violence against women, including unwanted or forced sex whether the violence takes place in private or in public.” Article 16 of the African Charter on the Rights and Welfare of the Child includes sexual abuse of children as a form of torture, cruel, inhumane and degrading treatment (Mpungose, 2020).

### **Enact more laws that protect women and girls from GBV**

Zimbabwe has various important constitutional provisions on gender rights and protection against gender discrimination. Section 80(1) provides that “every women has full and equal dignity of the person with men.” Section 56 stipulates that everyone has the right to equal protection of the law and women have the right not to be discriminated against on the basis of their gender.

The criminal law must deal effectively with gender-based violence. For instance, the criminal law must severely punish a man who responds with violence towards a woman when he misguidedly believes that he is entitled to special privileges from the woman and she refuses to grant him these privileges. Such an attack must be condemned under the criminal law in order to disabuse the accused and like-minded men of these mistaken notions (Feltoe 2018)

The primary focus of GBV laws should be to layout the measures required to effectively achieve the principle of gender equality, to repress and make perpetrators accountable and guarantee support to victims. It should not limit violence to the context of marital relationships; it should consider isolated or recurrent or prior, irrespective of cohabitation. GBV laws should take into account into account physical, psychological, sexual, moral, and financial as well as sexual harassment.

### **Empower Women**



Women economic empowerment is central in the fight against GBV. Women empowerment will give women the ability to overcome poverty, cope with shocks and improve their well being. When women realize their economic goals, whether its growing a business, improving their home or investing in training or education, they will be more resilient and able to provide for themselves and their families. “to achieve gender equality and empower all women and girls,” and is a crucial part of work in education, finance, advocacy, and other initiatives contributing to “women’s empowerment” all over the world.

The world Vision (2020) prescribes 7 ways of empowering women which are relevant in the case of Zimbabwe. Supporting women and girls during a crisis is one of the strategies recommended by the world vision (2020). Many girls growing up in Zimbabwe are held back by poverty, poor-performing schools, and even teen violence.

### **Create more support groups for GBV survivors**

Each incident of gender-based violence is a violation of an individual’s rights, and experiences with GBV can have significant impact on survivors’ safety, health, and quality of life. Survivors of GBV can suffer significant health consequences, including unwanted pregnancies, HIV and other sexually transmitted infections, physical trauma, and even death. Survivors also experience a range of psychological and social consequences of GBV, including shame, guilt, depression, isolation, abandonment and abuse by family members. All survivors of GBV should be able to access care and support to reduce the impact of such violence. However, quality and compassionate services are often not available in emergency settings, and survivors face multiple barriers to receiving support, including fear of perpetrators, social stigma, and discriminatory laws and policies. Support groups ensure a safe space for self-expression where women and girls who have survived GBV or are at risk of it receive direct psychological support. The objective of the sessions is providing an opportunity to work on: 1) The individual level and develop self-awareness and self-help capacities 2) the relational level to build a supportive social network 3) the broader coping level to deal with the daily stressors

### **Increase awareness on GBV**

Raising awareness of the different forms of violence against women and domestic violence is an important element in the prevention of violence against women, because heightened awareness is a first step in changing attitudes and behavior that perpetuate or condone the various forms of violence against women. All parties in the fight against GBV must promote or conduct, on a regular basis and at all levels, awareness-raising campaigns or programs,

including in co-operation with national human rights institutions and equality bodies, civil society and non-governmental organisations, especially women’s organisations, where appropriate, to increase awareness and understanding among the general public of the different manifestations of all forms of violence against women and girls. All actors must also ensure the wide dissemination among the general public of information on measures available to prevent acts of gender based violence.

### **Capital punishment for offenders**

Gender based violence, particularly against women and girls, illicit some of the strongest responses from the public and legislators. While a multitude of policies aimed at managing GBV offenders in the community have surfaced over the last several decades, attempts should also been made to enact legislation enabling the capital punishment for GBV offenders. GBV offender capital punishment policies, however, have been challenged and addressed by politicians in Zimbabwe. Currently, sentencing an offender to death for a crime that did not result in the aggravated death of the victim is considered unconstitutional.

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