

An analysis of gender-based domestic violence and reactions In Southern Africa

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The global community has a multiplicity of challenges and problems that include, amongst others, gender-based violence, which is a global problem. Since the early 1980s, Third World scholars including gender activists have formed interest groups to fight against gender-based violence in all fronts especially in Southern Africa. The purpose of this paper is to analyze different forms of gender-based violence and how women have reacted to violence, taking Botswana, Southern Africa and Zimbabwe as case studies. Gender based violence has increased in statistics and severity over the last ten years and has cut across all age groups. The paper is informed by the ecological model on individuals as perpetrators of violence, relationships, community and society at large as factors crucial in the incidents of GBV (Heise, 1999). Furthermore, the paper is informed by research-based reports on violence, HIV and AIDS and data from anti-HIV and AIDS governmental and non-governmental organizations. The author also conducted an empirical study to add to existing database on GBV. Based on the results of understanding the ecological model, a desk study and an empirical study, the author provides GBV as important for readers to take it as one of the top most agenda for everybody, and especially all stakeholders globally. Social scientists and others who may professionally have the acumen to provide lasting solutions to a problem that has adversely affected humanity are called on board to join the bandwagon in fighting GBV at different levels: individual, relationship, community and society at large.

Key words: Global gender-based violence, Southern Africa.

INTRODUCTION

The main argument posed in the paper is that gender-based violence is life threatening, contributes to disability and increases victims' vulnerability to HIV/AIDS. The ultimate goal of this paper is to explore gender-based violence, showing its impact on women, and to a less extent on men in light of HIV/AIDS. Different reactions to gender-based violence in Southern Africa are also mapped.

In Botswana, the Government of Botswana adopted a comprehensive multi-sectoral approach for all levels in the country to fight against gender-based domestic violence because it disproportionately affects women and predisposes victims to vulnerability to the HIV/AIDS epidemic. This paper is very crucial as it illuminates not only the work of gender activists who act to fight domestic violence, but that women are reported most affected. Women are well represented in numbers of victims and social issues, as more affected by GBV than men. Women react to gender-based domestic violence in

ways that are may not be socially acceptable in the Africa, and particularly in the global context.

Gender-based violence is the highest level or descriptor of women's and men's oppression globally. It ranges from a hot slap to suicide and murder. However, because men's oppression in most cases goes unreported, women's oppression, regardless of its scope and nature, is reported as a universal problem (Modie & Raditloaneng, 2008). Gender-based violence is an unjust practice that needs to be eradicated as a matter of urgency. It is also a violation of human rights, because it is both emotionally and physically costly to human life. Gender is a set of relations based on power and notions of masculinity and femininity (Gboku and Raditloaneng, 2005a/b).

Part of the goals of this paper is to analyse gender-based violence and its severity, and how women are predisposed to violence, and inability to negotiate safer sex for protection against HIV/AIDS. The possible

response strategies are also mapped in recognition of GBV as a global problem, using Africa as a contact point.

Theoretical framework

The author used a combination of the ecological model, The National Gender Framework, (NGF) and the Gender and Development Approach (GAD) as adopted by Botswana to illuminate gender-based violence and the way it affects mental health (Ministry of Finance and Development Planning, 2000). With a feminist standpoint as a lens for articulating gender based violence, and feminist activism, violence against men has not attracted researchers as most of it goes unreported.

Therefore, discourses of gender - based violence may appear skewed in favor of women because of women's vulnerability and reported incidents.

Women and men were perceived as one another's opposites: Women as passive and "passionless", and men as "aggressive and sexually charged." With the rise of the enlightenment came values of equality, fraternity and liberty reflected in the works of female thinkers including Mary Wollstonecraft and other Liberal feminist actors (hooks, 1984).

The ecological model

At a macro level, applied globally, the ecological model itemizes individuals, especially men, as more recorded in global statistics as perpetrators of GBV than women. GBV is also a function of human interaction and intimate and non- intimate relationships between men and women, boys and girls in different communities, and society at large. A cocktail of these are factors crucial in the incidents of GBV.

The gender and development approach

Gender roles as relations of power

Gender roles at individual household, community and national levels are relations of power. At household level, men particularly in Botswana and generally in the African context have a final say where major decisions are to be made.

At community and national levels, men still predominate as major decision makers. Women are expected to be subordinate and submissive. Power is the ability to coerce and dominate. Power is a function of sex and gender roles. Men are able to use their physic to beat and oppress women and children depending on their mood at any particular time. Power determines social status, economics and participation in education and other public sectors.

Gender analysis and its role in social and demographic processes

Gender roles have an important role to play in the social and demographic processes although there are many constraints. Marital rape offence is not openly recognized by Botswana courts of law where sex between married couples is claimed to be 'lawful' and therefore forced sex between husband and wife is not treated as a rape offence. This may make them more vulnerable to HIV/AIDS. (Women's Affairs Department, 1999).

HIV and AIDS as gender- based problem

Botswana is one of the countries that have been hardest hit by the worldwide HIV epidemic. The 2007 Sentinel survey data indicated about 207,000 people in Botswana had been infected with HIV, bringing suffering to the infected individuals, families, communities and the nation at large. There are estimates of over 200,000 orphans who are sat risk of gender- based violence due to lack of parental guidance and care, poverty, and illiteracy (Ministry of Health, 2007).

METHODOLOGY

Methods

The methods used to collect data for this paper were:

- Review of relevant literature and research to inform about the seriousness of gender based violence.
- Observation checklist of violent behavior in schools, public places and homes, and reports of violent behavior in and around Gaborone.
- Workshop methodology during a series of four workshops with topics on Gender, HIV/AIDS, Gender-based violence (GBV), and intergenerational sex.
- Police reports on violence and its seriousness since (Police Reports on National Statistics on violence, 2005
- The Southern African Community SADC gender activism relating to the annual commemoration of the "Sixteen Days of Activism against GBV" and "International Women's Day 2010." which feature calls to action to sign and commit to the SADC Gender Protocol.
- Evidence-based life stories of survivors of GBV in the Botswana Television Talk Shows every March which is the annual Month of Youth and Commemoration of International Botswana-based Women's Day.

The author's contents of this journal article are thus based on an analysis of international and national the qualitative data sets generated from the methodology

articulated above. The statistical data, workshops and events that informed the paper discussed the common causes, types of violence, covariates and reactions in Southern Africa.

This was done by the author by interviews with the police, HIV, university students, survivors of gender based violence, gender and other training workshop deliberations with gender based- violence as point of focus that influences gender based problems such as poverty, physical injuries, disability, emotional traumas, mental health problems and economic disempowerment.

A triangulation of the different research strategies used above were used to collect data that informed this paper. These methods illuminated risk factors such as maternal death, HIV epidemic from inability to negotiate safer sex, high fertility rates high dependency ratio and other problems as echoed by Rumbold (2008); Anderson N et. Al 2004; and Abrahams et al. (2004).

Furthermore, within the Southern African Development Community (SADC) region, based on a case study of Botswana and Zimbabwe and on analysis of statistical and empirical studies by gender activist in Southern Africa (with Botswana as a point of contact), the author uses gender as a lens for analyzing violence and reactions to different forms of abuse in Southern Africa.

Gender activism

Gender activism and research

Theories of women's subordination, and empirical studies amongst gender activists at the University of Botswana and other members of the gender movement who attended commemorations of the International Women's Day and World Population Day presentations since the last five years from 2009 to 2013 informed this paper. (Gender Programme and Policy Committee, 2009; 2012).

The major research questions posed for stakeholders in preparation for the commemoration were as follows:

- a) What are the different forms of violence that counted as gender based violence in Southern Africa? (GBV?)
- b) What are the common causes of GBV?
- c) What are the covariates of GBV?
- d) What are common reactions to GBV in Southern Africa?

Data collection

Data was collected between 2008 and 2012 during different annual commemorations of World Population Day, International Women's Day, and used for presentations to commemorate the last Sixteen Days of

Activism against GBV in 2008-2012. Focus group discussions were also held with stakeholders in preparations for the commemorations. Some of the thematic areas for International Women's Day and the Sixteen Days of Activism Against GBV commemorations included "investing in women is a smart choice", "the role of women in paid and unpaid work," and other forms of advocacy against demeaning women what was used to commemorate the last sixteen days.

The respondents included, amongst others, survivors of GBV, Gender, HIV/AIDS workshop participants in four areas, two urban and two rural areas, and police officers in the capital city of Gaborone. A total of over 100 respondents were reached between 2008 and 2012.

Data analysis

Data sets were mainly qualitative in nature. A qualitative content analysis of social issues related to GBV was done. These were arranged according to thematic areas each year, and broken into chunks for analysis.

Review of related research and literature

There is a dearth of literature globally, regionally and locally in Botswana that illuminate the extent of various forms of gender-based violence in Africa as presented by Rumbold (February 2008) under the auspices of Population Council.

Literature reviewed includes a desk study of research reports on the influences of GBV globally, and the dissemination of the 2007 major National sentinel survey on HIV/AIDS, gender and gender - based domestic violence and the State of the World's Children 2009.

Desk study

A desk study of police reports by Gender Affairs Department (GAD) (formerly known as Women's Affairs Department) on violence, and related studies on gender based violence informed the desk study of GBV.

Police reports on violence and its seriousness since 2005 to date have indicated an increase in GBV. The national death toll from GBV has ranged from 500 to 800 reported cases each year since 2005.

A desk study of the latest on GBV was done to update older statistical versions of the same topic. The following statistics were noted from the latest Botswana's Study on GBV, 2012:

Other glaring findings of the research as indicated in the GAD (2012) study include that:

- The most common form of Intimate Partner Violence (IPV) is emotional violence.

- Eleven per-cent of women experienced and 10.7% men perpetrated non-partner rape in their lifetime.
- Only 15% of the 188 analysed political speeches referred to GBV. Of these, only 6% had GBV as the main topic.
- Of those interviewed, 46.2% of women and 42.5% of men said they had heard about the Domestic Violence Act.
- The most commonly reported form of GBV to police is physical followed by verbal, sexual, emotional and lastly economic.
- Only 36% of GBV cases before courts in 2011 resulted in prosecution. Thirty one percent of the cases before courts resulted in convictions. Six percent of GBV cases before courts resulted in acquittals.
- Less than half of the sample, 47.9% of women and 48.6% of men, heard of events or prevention campaigns to end GBV. Women (62.8%) and men (51.3%) who heard of GBV campaigns found them empowering.
- Government has not formally adopted the draft "365 Day National Action Plan to End Gender Violence" developed in 2007 or made any budgetary allocations for its implementation.

Some of the recommendations ensuing from the research include that:

- The president, cabinet and all political leaders need to declare a national emergency on GBV based on this study's findings.
- Government needs to allocate more financial resources for GBV focal points in police stations; provide facilities of protection as specified in the Domestic Violence Act; and conduct follow up and periodic GBV surveys using the same methods.
- WAD (officially rebranded Gender Adffairs Department in 2012) needs to ddevelop and institutionalise an effective referral system for GBV survivors.
- Botswana Police Services need to publicise the annual GBV statistics widely for the purposes of informing the public and decision makers on extent of violence reported.

Over two thirds of women in Botswana (67%) have experienced some form of gender violence in their lifetime including partner and non-partner violence. A smaller, but still high, proportion of men (44%) admit to perpetrating violence against women (Abrahams et.al, 2004). However, in Botswana, there are also under reported cases of men as victims of gender-based violence.

Nearly one third of women (29%) experienced Intimate Partner Violence (IPV) in the 12 months to the prevalence survey that formed the flagship research tool in this study. In contrast, only 1.2% of Batswana women reported cases of GBV to the police in the same period. Thus, the prevalence of GBV reported in the survey is 24 times higher than that reported to the police. This suggests that levels of GBV are far higher than those

recorded in official statistics and that women have lost faith in the very systems that should protect them as well as offer redress.

Patriarchal attitudes are a significant underlying factor driving the incidence of GBV in Botswana. While women and men affirm gender equality in the public domain this has not been translated in their private lives particularly in their intimate relationships.

While the findings from the survey and police data (Government of Botswana Police Report on Violence, 2012) show that GBV is the most flagrant violation of human rights in Botswana at the present time, only 6% of the 188 speeches by politicians over the last year focused on GBV while 9% made some mention of the scourge.

Only 5% of the monitored news articles from Botswana covered GBV and in these, the perpetrators were three times more likely to be heard than survivors. The media still reports on GBV in sensational ways that trivialise the experiences of women.

These are among the key findings of the GBV Indicators Research Project in Botswana undertaken by Gender Links and the Gender Affairs Department (Gender Affairs Department,, 2012) indicate the following as crucial factors in GBV:

The influence of childhood experiences and family dynamics

This perspective suggests that influence of early childhood and upbringing are factors in GBV. For example, families that are violent in most cases tend to breed children that emulate their early socialsitin and grow up as violent because it is entrenched in their culture. The perspective relates to systems theory and the ecological helps to clarify the contextual correlates of gender-based violence globally. While domestic violence occurs across the world, in various cultures, and affects people across society, irrespective of their economic status, the etiology of abuse in relationships is often linked with childhood experiences.

For example, witnessing acts of violence at home increases the likelihood that boys will batter and that girls will be submissive victims as culturally obtained in the African setup. Adolescent females experience violence at their homes, at schools, and as adults in their communities. The exposure of youth to chronic community violence tends to be related to increased levels of aggression and acting out (Osofsky, 1999).

The influence of social institutions

Gender-based violence is in part rooted in gender and power inequities that marginalize girls and women within relationships and society overall. While it is important to

understand and identify the individual correlates of violence, it is also important to understand the role of social institutions in impacting gender-based violence. The previous legal right of men to beat their children and wives - the notorious "rule of thumb"- provides some insight into the institutionalization of gender inequities and gender-based violence globally (Raditloaneng, 2010).

Economic disparities

The economic disparities that continue to exist between men and women continue to reflect inequities and contribute to conditions that increase the vulnerabilities of young girls and women to victimization by violence. As adult educators committed to social justice and gender equity, it is important to advocate for policies and practices that promote gender equity and equal treatment of women and girls in their relationships, their families, and in society. This would cushion women and girls from staying in abusive relationships that predispose them to gender-based violence (Dissemination Seminar of the Ministry of Finance and Development Planning, Botswana MDG Status report, (Ministry of Finance and Development Planning/UNDP, 2010).

The Influence of gender socialization

Gender socialization and accepted social norms about adolescent development contribute to the varied experiences of males and females during these years. These experiences however, are often stratified in ways that are harmful to adolescent girls and ripen conditions for victimization through violence. The issue of sexual harassment provides an example. The sexual harassment of girls by boys during adolescence has been socially viewed as a part of normal adolescent development. The notion that "boys will be boys" has framed societal thinking and responses to this issue, the immediate and long-term consequences of which have not been considered until recent years. Socially permissive attitudes about gender-based violence have been internalized by both youth and adults (Women's Affairs Department, 1999).

HIV / AIDS as gender- based problems

Botswana is one of the countries that have been hardest hit by the worldwide HIV epidemic. In 2004 there were estimated 260,000 people in Botswana living with HIV, or 350,000 according to a UNAIDS estimate for the end of 2003 (UNAIDS&WHO,2000/ 2002). There are around 60,000 registered orphans in the country but it is feared that Botswana will have about 200,000 orphans in 2010 if

the current situation is not reversed. In an address to the UN General Assembly in 2001, the President of Botswana, said 'we are threatened with extinction. People are dying in chillingly high numbers. It is a crisis of the first magnitude.' The 1997 Sentinel survey data indicated about 207,000 people in Botswana had been infected with HIV, bringing suffering to the infected, family, community and the nation at large (in Gboku and Raditloaneng, June 2005 b).

Gender- based violence disproportionately affects men and women in Southern Africa

Evidence from police reports and survivors of GBV suggested that GBV disproportionately affected men and women as perpetrators and victims respectively. The work of the Southern African Research Center and other centers of women's studies in academic and non-academic institutions, Environmental groups and activists in gender and development in Southern Africa and important stakeholders from the international agencies for instance, UNDP and UNICEF, are important to recognize in the provision of financial support and experts who boosted African scholarship in gender issues, and illumination of illiteracy, HIV and AIDS, and gender-based violence as an unjust social practice that violates human rights.

Due to gender inequality and patriarchal structures that promote male supremacy, in Africa, women, and to a less extent men, are adversely HIV and AIDS, forms of gender- based violence, poverty and oppressive socio-cultural practices. that represent gendered reactions of victims to perpetrators of domestic violence. These trends disproportionately affect men and women in Southern Africa.

All research and literature reviewed illuminated the magnitude of domestic violence as a mental health bio-behavioral problem, gender inequality, HIV/AIDS. The literature further labels GBV as a social problem that requires medical management, psychological counseling, where there is rape or evidence of assault, the need for referral of GBV survivors, the need for collaboration with police, agents of the law enforcement and health facilities, and community- based prevention strategies.

In addition to the desk study, the author conducted an empirical study that generated several data sets on GBV. The qualitative empirical study entailed data produced by interactions with both men and women during workshops and symposiums on Gender, HIV and AIDS and how these affect GBV. Empirical evidence from different data sets suggest that GBV is a serious problem that has increased especially since ten years ago.

a) What are the different forms of violence that count as gender based violence in Southern Africa? (GBV?)

- b) What are the common causes of GBV?
- c) What are the covariates of GBV?
- d) What are common reactions to GBV in Southern Africa?

DISCUSSION

Forms of gender based violence

According to participants of the commemorations of both International Women's Day (IWD) and 16 Days of Activism and workshop participants on gender, HIV and AIDS, forms of violence against women and their children take many forms ranging from Murder/Suicide, Sexual harassment, incest, Sexual exploitation of under 16 year olds, psycho-social and economic abuse, verbal abuse mild slap, assault, severe beating, threats to kill or commit suicide, sexual assault including rape by other male, sexual assault including rape by partner and back to murder suicide.

These findings are echoed by Women's Affairs Department (1999) study on GBV. These forms of violence are not in any order as the impact varies from person to person. However, murder and suicide (masked in passion killings) are ranked very high as they mean loss of human life. Other serious consequences include maternal death, high HIV epidemic, intimate partner violence and high fertility rates that run through all the life phases from prenatal, infancy, childhood, adolescence, reproductive and old age. The irony is that while it is very emotive and serious to terminate life, the courts use circumstantial evidence to argue that perpetrators of murder were enraged enough to kill and the likelihood of a death sentence is never enforced unless it is incest. forms of violence include rape and defilement, sexual violence, physical violence, emotional violence.

Domestic violence takes place among singles, married couples, same sex partners and cohabittees of various sexual orientations. Emang Basadi's study of rape in 1994 indicated that between 1982 and 1992, a total of 5,794 cases were reported and 1,473 perpetrators were convicted. About 443 cases of defilement of girls fewer than 16 years were reported. (Women's Affairs Department, March 2000). Whatever its form, domestic violence makes it difficult for women and girls to negotiate safer sex. This is further aggravated by secrecy in matters of sexuality which is socio- culturally a private territory not openly discussed.

Rape and defilement

According to the Botswana Police Service Annual Report for 2005, trends in rape and defilement of girls fewer than 16 have increased between 1996 and 2001. In 1996, 1107 cases were recorded and these increased to 1383

in 2000 and 1364 in 2001. Defilement in 1996 was recorded at 83 but rose to 184 in 2000 and 218 in 2001. This condition could be described as reflecting *an unsafe and insecure nation*. The WAD as a leading organization in gender issues has made promising efforts to forge partnerships in redressing gender issues with NGOs and CBOs such as Emang Basadi, Women against AIDS/Rape, and HIV and AIDS centers over the last decade.

Rape between men and female goats, (though relatively less than rape cases between human beings) have been reported in Kweneng, South East District and North East Districts in recent years. Men were caught in the act by eye witnesses to the unnatural act, alerted by the screaming of female goats. Although there is a medical conviction that sex between domestic animals and human species does not predispose any to HIV and AIDS, one wonders how many unnatural acts of violence go unnoticed especially with home pets which do not roam the streets.

Sexual violence

According to Rubenstein (1992), sexual harassment is defined as:

Unwanted conduct of a sexual nature or conduct based on sex which is offensive to the recipient (p2).

This definition is also captured in the sexual harassment policy of the University of Botswana. Several studies have indicated that sexual harassment of working (and non- working) women takes place women in the vocational and other sectors although some of it goes unreported because of fear of intimidation and dismissal (Raditloaneng and Gboku, 2005 a, Women's Affairs Department (1999). Sexual assault, (by spouse or other male) sexual exploitation of under 16s are other forms of sexual violence identified by Women's Affairs Department (1998/1999/2000) in drafting, popularizing and implementing, and reporting on the National Gender Framework.

Physical violence

As mentioned earlier, violence against women is dynamic and comprises mild slap, severe beating murder/suicides, incest and so on. Male supremacy, dominance and ultimately, anger in particular are perceived enough to create an understanding that men are "enraged to kill."

Emotional violence

Psycho- emotional abuse takes many forms such as

incest, verbal/emotional abuse, and socio-economic. The WAD study indicated that in order of prevalence amongst research participants, three forms of violence ranked higher than others. Verbal abuse (27%), beating (24%) and economic exploitation (25%) had the highest number of reported victims of abuse and physical violence.

Statistics on passion killings

Passion killings have taken many lives since 2000. Weekly newspaper reports, Emang Basadi reports, NGO network on Women's Rights have documented reports on violence against women. Botswana Police Service reports (2012) and statistics on GBV from the Ministry of Labor and Home affairs indicate that in 2003, there were 54 passion killings, which claimed 46 women. One of the incidents involved two UB students. In 2004, there were 56 cases with 54 women victims, and the figures escalated in 2005 to 85 cases with 74 female victims. Figures from January to September 2006 indicate 44 women were murdered in 46 cases reported. As the year ended, statistics indicated an increase in murders of women in particular perpetrated by men.

What are the common causes of GBV?

Common causes of GBV range from individual to psycho social to economic. A total of 160 workshop participants in four areas of Gaborone, Serowe, Tsabong and Lobatse (40 per area) gave a variety of reasons as follows:

Infidelity by men, and to a lesser extent, women, men's desire to dominate, poor enforcement of the law, suspicions and lack of trust, excessive alcohol abuse and using violence to silence women, poverty and dependency on intimate partners.

Another data set was generated from a Workshop methodology during a series of four workshops with topics on Gender, HIV and AIDS. The topics covered included gender, gender-based violence, (GBV), and intergenerational sex. The qualitative workshops conducted by the author illuminated girls' and women's poverty, unemployment, love of money-cash, cellphones, and expensive cars as factors in making them stay in abusive relationships which sometimes result in death.

Intergenerational sexual relationships and love of materialism made women and girls resilient to GBV. Cases of men were not easy to record since most of them silently go through violence that goes unreported because it is by African socio-cultural norms an embarrassment and not masculine to be abused by women.

The reasons advanced are consistent with study findings by the Women's Affairs Department which is the overseer of issues of women's status. While workshop

participants placed infidelity as the chief cause of gender based violence, the earlier study done by the Department of Women's Affairs identified that in the semi-urban areas of Botswana, financial problems as the cause of violence against women accounted for 37.6% (167), jealousy 43.9% (195), and alcohol 34.0% (151) out of a sample of 444 respondents. It can be argued that causes can not be accurately ranked, and are a cocktail of all the above mentioned reasons.

An analysis of this situation is that single women have multiple roles, a high dependency ration, workload constraints and strains compounded by lack of enforcement of child maintenance and paternal responsibility. Whatever its form, domestic violence makes it difficult for women and girls to negotiate safer sex. This is further aggravated by secrecy in matters of sexuality which is socio-culturally a private territory not openly discussed.

The author generated other data sets from an observation checklist of violent behavior in schools and visited two schools within Greater Gaborone, and the Botswana Alcohol and Substance Abuse Network (BOSASNET) office in Gaborone to observe cases of alcohol and substance abuse. Both men and women referred to the centre by clinics and referral hospitals displayed prolonged use of alcohol and substance abuse that had resulted in separations from intimate partners and relatives as care givers. Observation of violent behavior in schools, public places and homes, and reports of violent behavior in and around Gaborone indicate that secondary schools are prototypes of gender-based domestic violence. Violence is particularly common where students are engaged in alcohol and substance abuse especially from junior to senior levels of secondary schools where students are teenagers and get subjected to, amongst others, peer pressure.

BOSASNET (Botswana Alcohol and Substance Abuse Network), amongst others, provides outreach counseling for both adults and children of school going age individually on referral by hospitals, teachers, parents or personal capacity. The author visited the network to observe different clients without disclosing any identities and the number of chronic cases and client served increase each year

SADC gender activism relating to the annual commemoration of the "Sixteen Days of Activism against GBV" and "International Women's Day 2010." Commemorations depicted Gender-based violence as a cross-cutting and complex phenomenon that needs to be tackled on all fronts. Stakeholders at the annual commemorations include survivors and their families, communities, service providers from Non Governmental organizations and others, institutions such as the police, health, cultural and religious leaders, and perpetrators.

Evidence-based life stories and of survivors of GBV in the Botswana Television Talk Shows, and Radio Botswana RB 2 station suggest that an integrated

approach is needed to respond to the needs of all, while ensuring that those of the survivor – access to medical attention, counseling or legal recourse – are paramount.

What are the covariates of GBV?

Covariates of gender- based domestic violence

Socio-cultural

There is a multiplicity of socio-cultural factors that aggravate gender based domestic violence in Africa. Among these are the struggle for political independence in the region, and other daily social practices. For example, violence in South Africa, Zimbabwe, Mozambique, Angola, Namibia, Lesotho, and Zambia is intrinsically weaved into the political struggles for independence.

These national and regional struggles became dominant over other forms of violence and had a spillover effect on the trend and nature of domestic violence in different countries of Southern Africa (not clear). The weak and socially unequal power between men and women, which underlies many aspects of women's vulnerability, especially their relatively weak position in being able to make decisions about sex and their lack of economic empowerment is another factor that aggravates gender- based domestic violence (Kalichman et al., 2007).

The authors further argue that there is the need for social and structural HIV prevention strategies in alcohol serving establishments to curb the spread of the deadly virus.

Many ideas and expectations regarding male and female (sexual) behaviour neither encourage men to act responsibly and protect themselves and their partners from infection nor stimulate women to challenge notions of female inferiority and social structures which keep women vulnerable. Low social status and economic dependence prevent many women and young people (street children) from controlling their own risk. With little negotiating power, they may have no choice other than barter sex for survival

Strategies to reduce men's and women's risk of HIV infection demands gender-based responses that focus on how the different social expectations, roles, status and economic power of men and women affect and are affected by the epidemic. This involves analysis of gender stereotypes and definition of male and female relationships and roles.

Human and gender- based poverty

Women especially in Botswana have a high dependency ratio and remain vulnerable to human and gender- based

poverty because of poor resource base, inadequate training and education. (Presidential Task group on a Long Term Vision for Botswana (1997). Poverty as a gender- based problem predisposes women to income insufficiency and other human dimensions of it.

Although poverty is more than lack of income, income is a common descriptor as it impinges on human survival and decisions to resort to commercial sex work. This disempowers women, and in cases of intimate relationships, women are exposed by the quest to for survival to engage in behaviours that make them vulnerable to HIV and AIDS (Kalichman, Eaton and Pinkerton, 2007).

Polygamy/polyandry

Polygamy refers to a situation where a man has more than one wife, while polyandry means a woman has more than one husband. Such situations lead to quarrels and vulnerability to HIV and AIDS since the partnerships become too crowded and dissenting voices are treated very privately as matters of sexuality do not belong to the public domain. The HIV status of the people involved may change depending on who they interact with in the absence of their "official" partners. Generally it is difficult to guarantee faithfulness even in polygamous relationships because a man rotates amongst different women who may assume it is one circle when there may be other partners outside the marriage box. Although faithfulness and violence-free relationships are not guaranteed even in monogamous relationships, multiple partnerships and spouse inheritance promote vulnerability to gender- based violence, HIV and AIDS.

Major effects of GBV

Women, HIV and AIDS

Women, regardless of their age category, are not only at risk of their own infection but as caregivers; shoulder the total burden of the HIV pandemic. In the African context, women remain vulnerable, as long they are in the reproductive age, because they are expected to bear children. The Presidential Task Group on a Long Term Vision for Botswana (1997) noted that:

Women of child bearing age have the greatest risk of contracting HIV and women of all ages bear the greatest burden of caring for AIDS sufferers and their dependents.

Murder/suicide/passion killings

Murder/Suicides and passion killings exist both as forms or expressions of gender- based domestic violence and

as the ultimate results or products of violence. In Botswana, passion killings/ murder/suicides have taken many lives since the last ten years. Weekly newspaper reports, *Emang Basadi* reports, NGO network on Women's Rights have since 2000 documented reports on violence against women. Police reports for and statistics from the Ministry of Labor and Home affairs indicate that in 2003, there were 54 passion killings, which claimed 46 women. One incident involved University of Botswana students February 2003 in which two university students (alleged to be lovers) lost their lives. In 2004, there were 56 cases with 54 women victims, and the figures escalated in 2005 to 85 cases with 74 female victims. Figures from January to September 2006 indicate 44 women were murdered in 46 cases reported. As the year 2012 ended, possible that statistics indicated an increase in murders of women in particular perpetrated by men.

What are common reactions to GBV in Southern Africa?

Government and NGO efforts

Since 2000, intensive efforts of women from the government, NGOs international community, private and parastatal sector have joined the government of Botswana in conducting gender sensitization focusing on the interface between gender, domestic violence, HIV and AIDS. Selected examples include the Women's Shelter project's conscientization workshop on Passion Killings held in Lobatse in 2000.

As part of the commemoration of the International women's day in 2006, women from the government sector (including WAD) and NGOs organized a sensitization march to sensitize members of parliament and the international community members supportive of gender activism to rethink ways of addressing gender-based violence and in particular, passion killings. Protective measures are counteracted by women who withdraw rape cases.

Within the University of Botswana, the counseling center provides programmes to protect victims and help them cope after different forms of abuse and violence.

The Men's sector plan anti passion killing

Although passion killings have escalated since 2000, Kweneng East village of Lentsweletau is one of the most affected by murders perpetrated by men. The recent initiative by the Men's sector plan anti passion killing meeting held 3rd November 2006 is one of the consultative meetings with an effort to put an end to passion killings by encouraging men to be mature, and manage their emotional stress including excessive

drinking, as well as to stand up against domestic violence including murders and rape. Testing for HIV, diabetes and high blood pressure was encouraged (*Mmegi Newspaper*, 2006).

State led advocacy against GBV

State of emergency call to end GBV in Botswana was declared on the 29 March 2012 at Phakalane Golf Course, Gaborone (Figure 1). This was a march led by Botswana's Minister of Labour and Home Affairs Honourable Minister to launch The Gender Based Violence (GBV) Indicators Study Botswana (2012) report which reveals the high prevalence of GBV in the country. The research is a product of the partnership between Gender Links (GL) and the Women's Affairs Department (WAD) in the Ministry of Labour and Home Affairs in Botswana.

The study, carried out between 2010 and 2011, shows that over two thirds of women in Botswana (67%) have experienced violence in their lifetime including partner and non-partner violence.

A smaller, but still high, proportion of men (44%) admit to perpetrating violence against women. In 2011 alone, 29% of women experienced violence perpetrated by men

and 22% of men admitted to perpetrating GBV.

Silence

Some victims of abusive relationship remain silent and strive to work on the relationship by being more loving or doing what may be perceived right by the abuser (this is arguable, I suppose). In particular, women in and out of marriage stay in abusive relationships especially where there is a lot of dependency on the abusive partner, or a feeling that one's life would be in more danger if they quit the intimate relationship with the abuser than if they stay in it and hope for the best (Modie and Raditloaneng, 2008).

This "Culture of Silence" as coined by Freire (1970/1973) is typified in lack of voice of all the oppressed people including the illiterate, the poor, the exploited and all categories of oppressed people.

Use of the legal system

Victims of gender-based domestic violence resort to the police and court rooms when they feel their lives are threatened but there is judicial bias in proving rape and other forms of violence. For instance, men claim not to understand the language of sexual refusal by women and there is a "general theoretical understanding" in Africa that a "No to sex" by women is usually a "yes" but in



Figure 1. State of Emergency call to end GBV. Wording Adapted from The Presidential Task Group on a long Term Vision for Botswana pillar “A safe and secure nation”.

practice that sought not be the case. Marital rape is not recognized by law in Botswana, yet rape outside marriage is subjected to litigation. The Marital Power Bill, and Affiliations Act are some of the legal instruments most oppressive to women and children. After years of lobbying, the two were through the Abolition of Marital Power Act in May 2005 and the Children’s Act of 2009 respectively. The two instruments serve to protect women’s and children’s rights, and thus play a contributory factor in combatting gender- based violence.

Use of husband taming herbs

Research carried on gender wars in rural Zimbabwe suggest that the formation of cluster groups of peers and friends who interact with one another, guide and use “husband taming herbs” as part of the strategy to react to gender- based domestic violence are very common. Herbs, according to women’s stories, are allegedly useful to make the abusive spouse less abusive (physically, sexually and emotionally), calm, obedient and very loving.

To sum it all, the use of such herbs perceivably turns around a broken intimate relationship into a very stable and sustainable one Kesby, M. (1996; 1999).

Alternative sexual orientation, religion and belief systems

Moving out of the intimate relationship, cohabiter’s life or

matrimonial home is another common reaction among people who strongly look down upon domestic violence and think it is not worth their lives.

This results in homelessness for young women and possibly their children in matriarchal societies where children born outside wedlock belong to the mother. Experience of gender- based domestic violence has resulted in victims resorting to a different sexual orientation-gay or lesbian orientation in cases where the heterosexual orientation or vice versa has failed.

The gay and lesbian population does exist in Africa though most of the population has not gone public about their status due to social disapproval related to the African culture and the influence of Christianity. Victim’s experiences give them an opportunity to have changed perceptions and resort to new religions and belief systems.

Inclusion of boys and men in gender sensitization campaigns

On a macro level, the African gender focus has recommended a paradigm shift from gender as synonymous with women to including sensitizing boys and men as partners in curbing gender- based domestic violence and passion killings. Any development strategy can not afford to exclude men and boys because a lot of the incidents have to do with socio- cultural ways of socialization at household, community and national levels. Intensive efforts of women from the government, NGOS international community, private and parastatal

sector have complemented the government of Botswana in conducting gender sensitization focusing on the interface between gender, domestic violence, HIV and AIDS. Selected examples include the Women's Shelter project's conscientization workshop on Passion Killings held in Lobatse in 2000, International Women's Day celebrations of 2006 and 2007 themes supportive of gender activism to rethink ways of addressing gender-based violence and in particular, passion killings (Kagisano Society, 2000).

Within the University of Botswana, the counseling center provides programs to protect victims and help them cope after different forms of abuse and violence. However, these protective measures are counteracted by women who withdraw rape cases.

Conclusion

Gender-based domestic violence has changed from socio-culturally condoned ant-hill type behaviors and festered like an ulcer to become fatal and a predisposition of women (as a disadvantaged group) to HIV, AIDS, and ultimately, death from murder, AIDS and AIDS opportunistic infections. The greatest challenge is how to bring about a multi-sectorial approach to effect psycho-structural changes at family, community and national levels to reprimand all forms of violence against women (and men). Problems of lack of knowledge, gender-based poverty and socio-cultural stereotypes that promote male supremacy over females must be tackled from the root.

Problems of lack of knowledge, gender-based poverty and socio-cultural stereotypes that promote male supremacy over females must be tackled from the root aggravators such as socialization of gender roles, practices of the school system and inclusive structures of micro and macro level decision-making.

Gender-based violence, HIV and AIDS are socio-cultural factors that can be changed by a multi-sectorial approach. With the introduction of ARVs in the health sector to control the impacts of HIV and AIDS, the gains made are still lost because until a cure is found, human life in Botswana is under siege. With the combination of gender-based violence, HIV and AIDS as threats to human life and longevity, the future of human resources generally in Africa, and particularly in Botswana, is bleak.

Recommendations for overcoming GBV globally

Unfortunately there are very lenient court sentences for murder and passion killings. Tough measures should be used as a deterrent for murder and passion killings.

There is a need for education, planning, finance, transport, sports, and the legal framework, policies, if well managed and services delivered, can help prevent the

spread gender-based violence, HIV and AIDS. Education and good health can also give children, youth, orphans and others a chance to achieve full developmental potential. Education and health are the biggest sectors and therefore have the capacity to improve health, access and quality of goods and services delivery.

All stakeholder who are part of the southern African states machinery must join hands in the war against GBV as campaigners and suggest measures to control and reprimand the perpetrators of GBV. The National Gender Framework should be revised so that besides advocacy, it should infuse firm measures for reprimanding perpetrators of gender-based violence.

The way forward

There is a need to interrogate the ecological model and reprimand GBV cognizant of its root causes: individual perpetrators, individual interactions and relationships with the opposite sex, the role of the community in framing culture spaces that are factors in violence, and the role of

society in framing legislations that oppress the aggrieved men or women. Economic independence is one of the key ingredients in the empowerment of women and making them assertive about what kind of model life they would like to build, what kind of relationship to have with who, how the relationship has to be managed, and the overall, global quality essential to insulate women and children from domestic violence.

There is need for an intensified political struggle at societal level supported by legislators using the state machinery to end women's oppression and subordination which convert into violence. Initiatives such as protection shelters to house survivors of GBV in Botswana are ongoing to strengthen the legal and ethical environments to support empowerment of women and youth (Kagisano, 2000). These are not adequate to end GBV.

As a deterrent, national policies and legislation must be put in place to reprimand perpetrators of domestic violence. Lenient sentences and making domestic violence a sensational joke for the consumption of law enforcement officers which is typical of Botswana society must come to an end as a matter of urgency.

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