BINDURA UNIVERSITY OF SCIENCE EDUCATION

FACULTY OF SOCIAL SCIENCES AND HUMANITIES

DEPARTMENT OF PEACE AND GOVERNANCE

EFFECTIVENESS OF ZIMBABWEAN LAWS AND POLICIES IN REDUCING GENDER BASED VIOLENCE IN CHITUNGWIZA (SEKE SOUTH DISTRICT)

BY

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ABSTRACT

Gender-based violence is a global problem that affects women and girls of all races, color and creed. This study explores the effectiveness of Zimbabwean laws and policies to fight against GBV. This study also locates gender-based violence within the development agenda, explores related theories and points out how culture, patriarchy and tradition influences gender-based violence perpetration and can also contribute to positive behavior change. The research was based on Marxist feminism theory which evaluates gender relations within more fundamental structure of the capitalist class system. Women were viewed as men's property and they performed unpaid labor. Marxist feminism takes advantage of the fact that patriarchy exploits women, meaning that society are structured on men dominating and subjugating women on political, cultural, economic and social spheres. Focus groups discussions questionnaires and semi-structured interviews are mixed methods of data collection methods that enable the researcher to acquire information directly from participants and ask follow-up questions for clarification. The study also shows challenges faced by the government in implementing laws and policies related to addressing and preventing GBV. The research findings reflected that GBV is still a serious problem in Chitungwiza and it needs serious attention from government, agencies and the community as whole to eradicate GBV and promote equality. GBV policy makers should evaluate and review laws and policies for GBV reduction in order to make sure that they are comprehensive. Healthcare providers and residents should also work together to reduce GBV in the community through advocacy campaigns, support groups and workshops to support victims and provide them with education and raise awareness about GBV, its effects and available services for survivors.

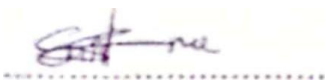
DECLARATION FORM

I Prisca Chikuwira, student number B213168B, here by declare that this dissertation is the result of my own research and study except to the extent in the acknowledgements and references included in the paper. And that it has not been submitted in part or in full for any other degree to any other university.

Student's Signature

13/10/2025

Date



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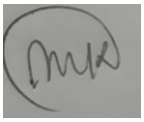

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DEDICATION

I dedicate this dissertation to the pillars of my life, my parents, Mr and Mrs Chikuwira who have shaped me into who I am today. Thank you for the unconditional love, support and the guidance you have given and I thank you for all your sacrifices, encouragement and your constant prayers. Without your support this whole academic year was never going to be a success and I am so blessed to have you in my life.

LIST OF ABBREVIATIONS AND ACRONYMS

AIDS- Acquired Immune Deficiency Syndrome

AU-African Union

CEDAW- Convention on the Elimination of All Forms of Discrimination Against Women

CSOs- Civil Society Organizations

GBV- Gender-Based Violence

HIV - Human Immune Virus

NGO- Non-governmental Organization

NGP- National Gender Policy

SADC- Southern African Development Community

SDGs- Sustainable Development Goals

SGBV- Sexual and Gender Based Violence

STIs-Sexually Transmitted Infection

UN- United Nations

VACS- Violence Against Children Survey

WHO- World Health Organization

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CHAPTER 1

INTRODUCTION

1.0 Background of the study

All genders, ages, and origins are impacted by the pervasive problem of gender-based violence (GBV) around the world. 71% victims of human trafficking are women and girls, and one third women worldwide are victims of violence, according to the World Health Organization (2019). Social norms that support discrimination and gender inequity are the drivers of gender-based violence. GBV has serious repercussions that include mental health problems, bodily and emotional injury, an elevated risk of HIV/AIDS, and even death (UNAIDS, 2019). A number of frameworks and activities have been formed by the worldwide community to address GBV. Addressing GBV requires a comprehensive approach that involves changing societal norms, increasing access to education and economic opportunities, and ensuring effective implementation of policies and laws.

Millions of people throughout Africa are also impacted by GBV. In Africa, 45% of women have either suffered from abuse, with 34% reporting physical violence and 24% reporting sexual assault, according to the World Health Organization (2020). Gender inequality and power disparities (UN Women, 2020) and social norms that support violence and discrimination are the main causes of GBV in Africa (WHO, 2020). The problem is made worse by limited access to economic and educational possibilities (UNICEF, 2020). The United Nations and regional campaigns to end child marriage in Africa also seek to address these issues.

The SADC region struggled with high levels of gender-based violence (GBV) for decades. According to the SADC Gender Protocol Barometer (2020), 44% of women in the region have

experienced physical or sexual violence. GBV in SADC is perpetuated by patriarchal norms and power imbalances (Mwambene & Ntata, 2020). The region's high levels of challenges also contribute to GBV (SADC, 2020). The SADC Protocol on Gender and Development (2008) aims to address GBV through legal and policy reforms, however, implementation remains a challenge (Mwambene & Ntata, 2020). In South Africa, for example, GBV has reached epidemic proportions, with 41% of women experiencing physical or sexual violence (Stats SA, 2020). In Zimbabwe, 35% have faced physical violence, while 14% have faced sexual violence.

GBV affects millions of people in Zimbabwe, especially women and girls. The 2020 Zimbabwe Demographic and Health Survey found that 14% of women had suffered sexual assault and 35% had experienced physical abuse. In Zimbabwe, power disparities and patriarchal norms sustain GBV (Mushunje, 2020). High rates of unemployment, poverty, and drug usage are among of the nation's economic problems that also contribute to GBV (ZimStats, 2020). Sexual Offences Act (2001) and the Domestic Violence Act (2006) are two laws that Zimbabwean government has put in place to combat GBV. Further victimization of survivors can result from cultural and social norms that support GBV in Zimbabwe, such as the tradition of "kuripa ngozi" (avenging spirits) (Sachikonye, 2020). For instance, there has been a high prevalence of GBV in Zimbabwe's dormitory town of Chitungwiza. 42% of women in the Chitungwiza Municipality had been victims of physical or sexual violence, according to the GBV Report (2020). Preventing GBV and advancing gender equality are further goals of the National Gender Policy (2019). However, despite these initiatives, GBV is still common in Chitungwiza, according to Mushunje (2020). Implementation difficulties, a lack of funding, and social and cultural norms that support GBV make them ineffective.

Recently, there has been vastcases of GBV in Chitungwiza highlighting the need for urgent action to the problem. The Zimbabwe Republic Police ZRP reported a 25% increase in reported cases of GBV in Chitungwiza between 2020 and 2022 (Musiiwa & Gwanzura 2022).This trend led Zimbabwean Officials and NGOs to take action in implementing and upgrading policies that can help citizens to reduce GBV.

1.1 Aim

The purpose of the study is to evaluate the effectiveness of government policies in reducing Gender Based Violence in Chitungwiza.

1.2 Statement of the Problem

In Zimbabwean cities like Chitungwiza, gender-based violence is a serious problem that continues to stand in the way of attaining gender equality and the upper-middle-class society of Vision 2030. The government has attempted to combat GBV through a variety of initiatives. GBV in Zimbabwe is still too high, despite the country's progressive legislative framework, combined efforts of the government, development partners, CSOs, and communities. According to statistics, women are seen as being more impacted by GBV than males, which keeps them from actively engaging in development. Despite Zimbabwe's efforts to address GBV through national and international accords, the frequency of GBV is still shockingly high, and survivors especially women and girls face terrible physical, emotional, and financial repercussions.

1.3 Objectives

The study is going to be guided by the following objectives:

i. To examine state of GBV in Chitungwiza

ii. To explore strategies used by Zimbabwean government to reduce GBV in urban areas.

iii. To evaluate the effectiveness of the government policies in reducing Gender Based Violence in Chitungwiza.

1.4 Research questions

i. What is the state of Gender Based Violence in Chitungwiza?

ii. Which strategies are being used by the Zimbabwean government to reduce GBV in Chitungwiza?

iii. How effective are the policies in eradicating GBV in Chitungwiza?

1.5 Assumptions of the study

The laws and policies implemented by the government would be at the forefront in handling GBV in both urban and rural set ups. The traditional methods is failing to reduce GBV since there is still an increment in GBV, and abuses despite people's active participation in gender protection. The researcher assumed that a lot of women and girls are being abused because of socio-economic challenges, cultural and religious beliefs. The other assumption is that there is still GBV cases in Chitungwiza that shows some challenges of traditional and community methods in reducing GBV, the study would necessitate the traditional legal systems working together with government policies to reduce the issue of GBV. The researcher also assume that, the continued involvement of government laws and policies in eradicating GBV in Chitungwiza has to be effective and efficient to promote gender equality and unity between men and women.

1.6 Significance of the study

This study holds significance for various stakeholders, including government policymakers, law enforcement agencies, non-governmental organizations (NGOs), and Chitungwiza communities affected by GBV.

Government Policymakers

Policymakers are at the forefront of creating and implementing laws aimed at combating GBV. This study provides them with empirical evidence and insights that can help shape more effective policies and legislative frameworks. By understanding the gaps and successes in current laws, policymakers can make informed decisions that enhance the protection of victims and promote accountability for offenders.

Non-Governmental Organizations (NGOs)

NGOs often work directly with survivors of GBV and play a crucial role in advocacy, support services, and community outreach. The insights gained from this study can help these organizations tailor their programs to better meet the needs of victims. Additionally, NGOs can use the findings to advocate for policy changes and increased funding for GBV initiatives.

Community leaders

Community leaders like councilors, Districts Officers, MPs and local influencers are vital in shaping societal attitudes toward GBV. The study can provide them with the knowledge needed to educate their communities about the legal protections available and the importance of supporting survivors.

Victims and survivors of GBV

The direct beneficiaries of this study are the victims and survivors of GBV in Chitungwiza and the surrounding areas. By highlighting the effectiveness of existing laws and policies, the study can help empower these individuals to seek justice and access support services. Increased awareness of their rights and available resources can foster a sense of agency and encourage survivors to speak out against violence.

Academics and Researchers

For scholars, this study contributes to the existing body of knowledge on GBV and its legal frameworks in Zimbabwe. It can serve as a foundation for further research, helping to identify trends, and explore new avenues for intervention. Academic discourse can play a critical role in informing both policy and practice.

Community health workers

The study is of significant to community health workers because it make them easily direct community members to line with GBV solutions by teaching them about how the policies are effective.

1.7 Limitations of the study

Limitations are factors that researcher cannot control, that affect the research process or its results and have an effect on the methodology of choice and the research's conclusions (Fintel, 2019). The absence of important informants and restricted access to essential sources will hinder the research's progress. She might be unable to obtain the necessary sources, the researcher will turn to other pertinent sources like newspapers and journals in the same field. In order to conduct and complete the study in a meaningful and manageable way with the available funds, time and

resources, the researcher experienced some limitations. The researcher may faced limitation while studying like public ignorance then limited access to more information about GBV and public threats as some people view the researcher on other way round. The research under study is sensitive, most violated women are not assertive to disclose everything due to fear of their husbands and relatives. This compromises the information the researcher find. The researcher guaranteed confidentiality to research participants so much that they disclosed all the necessary information. The area to be covered also is very wide, due to limited time, the researcher focus with a manageable area and left some parts not studied.

1.8 Delimitations of the study

Delimitations are elements of the research that the researcher intentionally controls and that determine the study's borders and scope (Berg, 2019). Delimiting elements frequently include the theoretical viewpoint a researcher chooses choice of research questions, variables of interest, and research location (Brewer, 2019). The researcher's first delimitation is to focus on the causes of GBV that led the government to implement policies to eradicate violence especially in urban areas like Chitungwiza. Another area of focus is explanation of policies implemented to curb GBV and to discuss their effectiveness to victims and survivors of GBV. Theories that support empowerment and non-discrimination between genders are also an issue the researcher is going to focus on.

1.9 Definitions of key terms

Gender Based Violence

Refers to any harm or suffering inflicted upon individuals or groups of people because of their gender or sex, it is also refers to violation of human rights and forms of discrimination against women and girls (WHO, 2020).

Law

According to Higgins (2020), law is defined as the system of rules and regulations that govern human behaviour and are enforced by institutions and authorities.

Policies

According to Murray (2020)policies refers to deliberate courses of action adopted by governments, organizations, or individuals to achieve specific goals, it can be used to prevent and respond to GBV by addressing its root causes and providing support to survivors.

Violence

UNICEF (2020), defines violence as many forms of harm including physical, sexual, and psychological.

Peace

United Nations (2020) defines peace as a fundamental human rights and essential for promoting gender equality and preventing GBV.

Human Rights

Human rights include the right to life, liberty and security of person, and the right to equality and non-discrimination (Freeman, 2020).

1.10 Dissertation outline

The dissertation includes five chapters as shown below:

Chapter one: Introduction

This chapter consist of background of the study, purpose and objectives, statement of the problem, questions of the research, assumptions, delimitations, limitations, and definitions of key word also discussed. Additionally, this chapter emphasized the importance of the study.

Chapter Two: Literature Review and Theoretical Framework.

This study's theoretical foundations will be examined in the literature review and theoretical framework. It will also attempt to give a review of the pertinent literature that is currently accessible, emphasizing any gaps.

Chapter Three: Research Design and Methodology

Research Approach and Design will aim to showcase the research design while outlining the study's approach. Additionally, detailed tools and procedures used for gathering field data discussed in this chapter.

Chapter four: Data presentation, analysis, and discussion of findings

Presentation of data, analysis of findings, and discussion of findings presented the findings, analyze them, and then discuss them. The new data discoveries presented, with an attempt to link the existing literature.

Chapter Five: Summary, conclusions and Recommendations

This chapter include a summary, references, suggestions, and areas to recommend. In order to determine whether the study was successful in producing the needed solutions, the next research l aimed to synthesize the entire investigation and offer conclusions.

CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.0 Introduction

This chapter introduced and explained the literature review and theoretical framework used in the study, contains literature and text that are related to the policies implemented by the government to reduce GBV and how they are effective especially in Chitungwiza area where GBV is mostly recorded. This chapter also include the effectiveness of local institutions, and other Organizations in reducing GBV. Various policies implemented by the government of Zimbabwe is also explained in this chapter

2.1. Theoretical Framework

This research is based on the ideology of Marxist feminism. The primary source of female oppression is the capitalism economic system, which placed men at the top of the economic hierarchy because they owned the means of production. Women were viewed as men's property and performed unpaid labour in the private sector. Engels (1984) asserts that "women's subordination is a product of social relationships rather than their biological makeup and that men's attempts to satisfy their desires for control over women's labour and sexual powers have gradually become institutionalized in the nuclear family". However, Benston (1972) said that, "capitalism profits from a huge army of unpaid women who are eager to obey commands because women have been conditioned to operate in this way and raised future workers to think similarly". She continued by saying that, "social reproduction of labour includes not only the generation of future workers in the form of children, but also intellectual conditioning". Marxists hold that social class reproduction occurs within the family as well. Further, Ansley (1972) explores that, "the wife acts as an emotional safety valve by absorbing the husband's frustrations caused by the capitalist system". This explanation holds that society is not united but rather divided.

According to this theory, women are oppressed because they do not own the means of production, while men are seen as the ones who make decisions and are in control. Because men are seen as powerful and therefore unable to show vulnerability, society places a lot of expectations on them. Because men are seen by Marxist Feminism as having more economic power and control than women, they are viewed as GBV perpetrators rather than victims (Khan et al., 2016). Marxist feminists hold that women's economic dependence within the family is the root cause of their

oppression and what keeps them exploitative. Women have historically been mistreated and beaten. Because of capitalism and patriarchy, women are double exploited.

In families, women and girls are mostly exploited and sexually harassed because men use their powers as providers and they dominate women. Cottais, (2017) argues that, for Marxist theory, even domestic work is a way to exploit women because it is work done for free, not remunerated at its fair value, women should be free to work for payment so that men and women unite to avoid GBV.

Marxist feminism takes advantage of the fact that patriarchy exploits women, meaning that society are structured on men dominating and subjugating women in political, cultural, economic, and social spheres. Marxists disagree with radical feminism, which holds that patriarchy is the only system causing gender inequality. Chabata (2023) contends that high rates of GBV, which are reported virtually daily, are especially common in Zimbabwe's patriarchal culture. Because of this culture, GBV is not addressed by the government because it is accepted as normal.

2.2. State of Gender Based Violence

Women and children around the world continue to be seriously threatened by gender-based violence, which includes intimate relationship and sexual assault as well as child sexual abuse. Victims of gender-based violence face serious and detrimental health consequences, such as sexual, emotional, and bodily harm, unintended pregnancy, HIV/AIDS exposure, and STI exposure. The World Health Organization reports that although GBV is a worldwide issue, rates are much higher in developing nations, with rates in the US and Western Europe as low as 20% to 25% and in some regions of the Middle East and Africa approaching 40% (WHO, 2021). United

Nations' Spotlight Initiative aim to eradicate all forms of violence to women and girls by addressing the root causes of GBV and promoting gender equality. To this end, practitioners, policymakers and researchers is working on a number of measures to tackle GBV through the provision of a variety of integrated services, such as health, psychosocial, legal and police support for victims and survivors of GBV.

GBV is seen as a major obstacle to attain sustainable development and gender equality in Africa. According to Moyo (2019), "the high frequency of GBV in Zimbabwe is a result of well ingrained social norms and attitudes regarding the crime." In order to prevent, protect against, and respond to GBV, the government has created the National Gender Policy, Domestic Violence Act and the National Action Plan to End GBV (Zimbabwe Gender-Based Violence Assessment, 2023). These policies aim to enhance legal frameworks, improve access to justice for survivors, and promote public awareness campaigns to change societal attitudes towards GBV.

The state of GBV in Chitungwiza is pressing concern that requires attention and action. The serious water shortage in Chitungwiza has turned into a major social problem, escalating cycles of poverty and family conflict and fostering GBV cases. According to the ActionAid Organization (2024), the region's severe water scarcity puts women at greater risk of abuse and injustice. Additionally, rather than working at jobs that empower them, women and girls spend a large portion of their time looking for water for household use. As Zimbabwe struggles with a complex water crisis, ActionAid Zimbabwe's call for action is in line with a larger global imperative to address environmental injustice and work toward a future in which everyone has access to clean and safe water as a right, not a privilege (Adeodun 2024). Also economic challenges

in urban areas affect women and girls in Chitungwiza with rise of GBV and they struggle for equality and empowerment.

2.3. Strategies used by Zimbabwe to reduce GBV

The African Charter on Human and Peoples' Rights and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) are international treaties and conventions that Zimbabwe has ratified in an effort to eradicate GBV. Zimbabwe has put in place a thorough legal framework, which includes the Sexual Offences Act and the Domestic Violence Act, to address GBV. These laws are intended to properly prosecute perpetrators and safeguard victims. To improve GBV response mechanisms and put best practices in preventive and support services into practice, the government works with international organizations like UN Women and the United Nations Population Fund (UNFPA) (African Union, 2023). The government, with support from NGOs and international partners, has established that provide centers comprehensive services to GBV survivors, including medical care, legal assistance, and psychosocial support.

2.4. Strategies used by the government to reduce and address GBV includes the following policies:

I **NATIONAL STRATEGY TO PREVENT AND ADDRESS GENDER BASED VIOLENCE 2023-2030**

The Ministry of Women Affairs, Community, and Small and Medium Enterprises Development has partnered with the Secretariat SADC to introduce the National Strategy to Prevent and Address Gender-Based Violence (GBV) for the years 2023 to 2030. In addition to outlining priority areas for the nation and specific actions and strategies for the government in its

efforts to prevent and respond to GBV, the National Strategy offers a guiding framework for the national response to GBV (Ministry of Women Affairs, 2023). The approach acknowledges that GBV is a multifaceted, intricate, and widespread issue that interacts with a wide range of socioeconomic and gender factors, necessitating a multi-sectoral and coordinated response.

The areas of Zimbabwe's National Strategy to Prevent and Address Gender Based Violence 2023-2030 includes prevention and response to GBV, capacity strengthening of stakeholders, to address GBV in emergencies, humanitarian, disaster and conflict situations. The aim of the strategy is to end conflicts in families and in the economy and to manage GBV within the country (Ministry of Women Affairs, 2023). This indicates that the ministry and the government is working together on addressing and reducing GBV within the country to promote good behaviors and development

ii. National Gender Policy (NGP, 2023-2030)

The NGP was superseded from 2013 to 2017. In order to prevent, punish, and eradicate all forms of violence against people, including domestic abuse, sexual offenses, human trafficking, and sexual harassment. NGP aims to adopt legislative, administrative, social, and economic measures. It also investigates all cases of violence thoroughly, imposes severe penalties on offenders, and develops and implements prevention programs which targets the underlying challenges of GBV. Enhancing quality of programs through the adoption, use, and maintenance of relevant GBV data broken down by age, type of violence, and victim-perpetrator relations. Number of complaints, investigations, prosecutions, the sentences meted out to GBV perpetrators against all women in their diversity and the redress offered to victims, including monetary compensation for the implementation of policies, data collection, and analysis, as well as collaboration with organizations and partners on GBV research and documentation. The NGP also places a special

emphasis on reducing human trafficking, underage marriage, and gender-based violence in the workplace.

iii. National Women in Leadership and Decision- Making Strategy (2023-2030)

By 2030, the policy seeks to eradicate sexual and gender-based violence (SGBV) against female candidates in both political parties. Among other things, political driven GBV directed at current and prospective girls candidates has hindered women's participation in politics. The Strategy suggests incorporating election-related sexual and gender-based violence (SGBV) within the existing legal measures addressing SGBV, such as the Criminal Codification Act and the Electoral Act (Ministry of Women Affairs, Community, Small and Medium Enterprises Development, 2023). Political parties are also required by the Strategy to develop a collective agreement with sanctions that outlines the types of penalties that will be imposed on those who commit SGBV during elections. To discourage possible violators from taking part in elections, the penalties ought to be severe.

2.5. Effectiveness of policies in reducing Gender Based Violence

A number of programs have been started to address GBV. Spotlight Initiative of the United Nations is one of the most important international initiatives to end violence against women and girls. Strengthening legal frameworks, improving services for survivors, and altering detrimental social norms are the main objectives of this program. According to preliminary assessments, the Spotlight Initiative has raised community awareness and engagement, but there are still issues with resource allocation and long-term political commitment (UN Women, 2021). The National Action Plan to End GBV and the Domestic Violence Act are two of the laws Zimbabwe's government has

put into place trying to lower GBV. These regulations seek to increase survivors' access to justice and legal protections.

However, the effectiveness of these policies is undermined by systemic issues such as corruption, inadequate training for law enforcement, and societal norms that perpetuate violence against women (Zimbabwe Gender-Based Violence Assessment, 2023). Reports indicate that many survivors face significant barriers in accessing legal recourse and support services, which limits the overall impact of these policies. The response that are given by different institutions that are responsible for GBV cases on their reports shows that policies implemented by the government is in active and they are effective. The sectors that are responsible includes health sector, legal or justice sector, NGOs and local authorities.

2.6. Summary

Marxist feminism is the theoretical framework that was discussed in this chapter, along with how the theory contributes to our understanding of the field. Effectiveness of Zimbabwean laws and policies in reducing Gender Based Violence were discussed and it is importance. To determine the existing knowledge on the subject under investigation, literature related to GBV policies in Zimbabwe was also showcased and deliberated.

CHAPTER 3

RESEARCH DESISGN AND METHODOLOGY

3.0 Introduction

Research methods and strategy for data collection are covered in this chapter. Mixed methods which are qualitative and quantitative methods was used and the researcher explained them in this chapter. Also provided are the study population and sample strategy.

3.1. Research Design

Research design describes the methods and procedures used to collect and analyse the variable's measures that are specified in the research topic (Cruz (2019). In order to gather information, the researcher conducted interviews using interview guides. Because the interviewee responds right away, the researcher can save time waiting for answers, making interviews simple. The researcher also used focus groups and questionnaires to gather information from various stakeholders who are in charge of the policies put in place to lessen gender-based violence in Zimbabwe, such as the local government of Chitungwiza Municipality, law enforcement agencies, healthcare providers, and GBV survivors who are looking into how they reacted to the policies.

3.2. Research Methodology

Research methodology identifies the methods that used in the process and the manner in which the data was analyzed and presented (Brunt, 2019). The researcher used mixed methodology to find the results of the research. Mixed methodology includes using both quantitative and qualitative methods to collect and analyze data. On quantitative, the researcher developed questionnaire to collect data on GBV experiences, awareness of laws and policies, and perceptions of their effectiveness. Qualitative method, the researcher conducted in-depth interviews with key

stakeholders including healthcare providers, survivors of GBV and government officials, the researcher also conducted focus group discussion with community members including men and women to gather data on their perceptions of the effectiveness of laws and policies of reducing GBV. Mixed methods used because it allows comprehensive understanding of the research and the researcher can validate findings and increase confidence in the results. Quantitative provides statistical evidence in the prevalence of GBV and qualitative methodology provides insights of victims and survivors of GBV by using policies of reducing GBV.

3.3. Data collection methods and research instruments

Interview guides are developed for Key Informant Interviews and Focus Group Discussions. This helps to ensure consistency and comparability of data across different interviews and focus groups. Structured survey questionnaire is developed to collect quantitative data on the prevalence of GBV and the effectiveness of laws and policies in reducing GBV.

3.4. Target Population

An exact definition of a study population is a collection of objects or lone individuals that are known to share characteristics or traits that the researcher finds intriguing. To conduct a specific type of research, a population must be sufficiently described and its characteristics comprehended (Dean, 2021). The entire population under the jurisdiction of the Chitungwiza GBV survivors (girls and women), GBV perpetrators (boys and men who committed GBV), local government officials, and members of civic organizations, NGOs, and healthcare providers who work for the local government in the Chitungwiza constitute the research population in this instance.

3.5. Sample and Sampling

Instead of concentrating on accurately representing the entire population, the researcher employed non-probability sampling, which chooses study participants by non-random techniques. Rather, the sample was chosen using predetermined and subjective criteria (Ratanji, 2018). One of the non-probability sampling techniques that was applied in this investigation is purposeful sampling. Participants for focus groups and in-depth interviews was chosen using this method. The selection of participants was predicated on their proficiency, background, and understanding of GBV. The study was anticipated to involve GBV victims, Chitungwiza municipality officials, and medical professionals. The total sampling size of the research was 42. Purposive sampling was used in this study since it enables the emphasis on a particular demographic of interest.

3.6. Data presentation and Analysis procedures

The researcher developed research questions to address the primary goal of the study and this serves basis for the interview guides. Questions was of presented with their responds on a paper to show how people accepted the policies implemented by government to reduce GBV and the effectiveness of policies. To ensure that the information is adequately articulated for clarity and the purpose of clearer analysis, the demographic data gathered and presented in a table. Tables and figures was used showing responds from different gender, and ages. The statistical findings or gathered information presented on bar graphs and pie charts showing different results based on different interview perceptions including sex and percentages of findings.

3.7. Ethical Issues

As data collection techniques are developed, it is critical to evaluate if the study procedures are likely to cause bodily or psychological harm to anyone. Informed permission was the primary

ethical factor taken into account for the research that is done during the project. This guaranteed that interviews only happened with respondents' permission, that they won't suffer any harm, and that their privacy and dignity was respected. The option to accept or refuse study participation should always be available to participants. Before being interviewed for the study, all research participants was asked for their consent. The researcher should be respectful of the cultural norms and values of participants and protect identity and confidentiality of the participants.

3.8. Validity and reliability

Two important ideas in research that relate to the caliber and precision of the data being gathered are validity and reliability. Validity is the extent to which a research study accurately measures the concept it is supposed to measure Creswell (2014). However, dependability is "the degree to which the results of a research study can be replicated or repeated," according to Kahn (2019). Making sure a research study is legitimate is crucial since it guarantees that the information gathered is correct and accurately represents the main idea. This in turn guarantees that the findings are significant and applicable to the formulation of policies or the making of well-informed decisions. Without validity, the rest of a research study would be unreliable and could lead to inaccurate conclusions.

3.9. Feasibility

The study was completed in 6 months from October 2024 to March 2025, data is collected. The amount of time available allowed the researcher to complete the study because the targeted population and area of study is bounded and manageable on given time. Access to participants may be a challenging issue as the area have a mixture of ethnic people and the researcher may be challenging to access and recruit participants.

3.10. Summary

The researcher discussed methods of data collection which was used during the study. Mixed methods was favored because it gives the researcher the quality and quantity of how laws and policies to reduce GBV are effective. Questionnaires, focused group discussions and interview guides are instruments that are provided in the chapter that were used to collect data.

CHAPTER 4

4.0 DATA PRESENTATION AND ANALYSIS

4.1 Introduction

This chapter analyses the researcher's data analysis, presentation and discussion of findings gained in Chitungwiza Community on the effectiveness of laws and policies of government policies to reduce GBV. In Chitungwiza, data was acquired through interviews, questionnaires and a focus group discussion. Feedbacks from the discussions were used to present the findings.

4.2. Biographical data of participants

Gender of participants

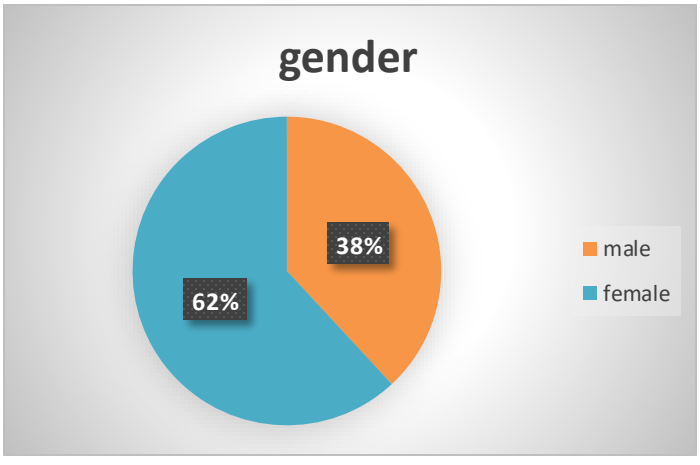

Fig 4.1

Fig 4.1 shows the research findings, the highest number of participants were 26(62%) females, followed by 16(38%) males indicating that female mostly responds and follows the effectiveness of laws and policies for reducing GBV meaning that they are mostly victims and counselors of GBV.

Number of participants and ages

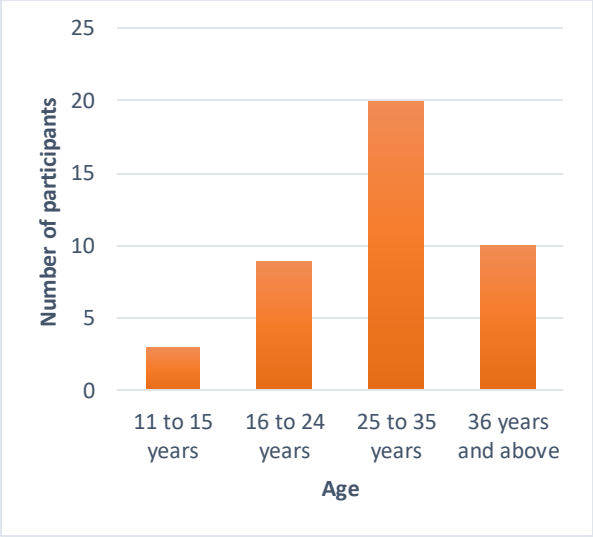

Fig 4.2

Fig 4.2, graph shows the number of all participants who participated during the practical research. The total number of participants is 42 and they are arranged according to their ages both females and males. From the research the age between 25 to 35 years participated more than other age groups, this shows that they are active participants and victims of GBV in Chitungwiza mostly

aiming to seek assistance such as laws and policies reforms that can relieve them from trauma and depressions caused by GBV.

Percentage of participants

Age	Number of participants	percentage
11 to 15 years	3	7,2%
16 to 24 years	9	21,4%
25 to 35 years	20	47,6%
36 years and above	10	23,8%
Total	42	100%

Table 4.1

Table 4.1indicates hows the percentage of participants according their ages who played role during the research. The most active age with highest competition is 25 to 35 years meaning that when one talks of GBV there are the ones who act fast seeking advices as argued by UNICEF (2020) that they are the most age suffering from GBV in families and communities.

4.3. State of GBV in Chitungwiza

4.3.1. Current situation of GBV in Chitungwiza

GBV is a serious problem in Chitungwiza and it affects all age groups especially women and girls. According to the research, most people at risk are girls and women aged 15 to 35 years and the causes of GBV according to responds from participants includes poverty, patriarchal attitudes, economic hardships and drug abuse. In an interview with the Chitungwiza Municipality health officer, she argued that, GBV is a big problem in Chitungwiza, especially in areas like Zengeza and St. Mary's. She adds that, "*I have seen many women being beaten by their husbands,it is like the men think they own us".* This clearly shows that, many women are too afraid to leave their abusive partners because they depend on them financially. They need safe better mechanisms and support services to report GBV and access economic support.

One of the health workers interviewed by the research also highlighted that,

> *I have worked at this clinic in Chitungwiza for 5 years, and I have seen a significant increase in GBV cases. Many victims are reluctant to report abuse due to fear of counterattacks or stigma. We need to create a safe and supportive environment for victims to seek help.*

The current situation of GBV in Chitungwiza is alarming. There is a significant increase in reported cases of GBV, particularly physical and emotional abuse. The economic instability and poverty in the area have contributed to the rise in GBV cases. Many women and children are suffering in silence, the community should have to come together with the government to address this issue.

In a Focus Group Discussion done by the researcher, men and women had different views on the effectiveness of laws and policies implemented by the government of Zimbabwe to reduce GBV. People argued that, the situation of GBV in Chitungwiza surely needs an attention from everyone because even within the community they insists that they counsel many cases of GBV from community members mostly women and children being abused within their families. Participants argues that, the situation in Chitungwiza is dire especially among young women and girls. There are several instances of forced prostitution, early marriages, and sexual assault. The issue is made worse by a lack of economic and educational prospects. According to a study by Dube (2018), GBV is more common among women in urban Zimbabwe than among those in rural areas. Dube added that GBV is significantly supported in Zimbabwe by traditional gender norms. In communities like Chitungwiza, the patriarchal framework frequently normalizes violence against women and dissuades people from reporting such events. When comparing South Africa to Zimbabwe, Khumalo et al. (2019) contend that South Africa emphasizes the significance of tackling GBV in urban areas, where women may face particular dangers and problems, and Zimbabwe need to follow suit.

4.3.2. Areas or hotspots of GBV in Chitungwiza

Chitungwiza is a big area near CBD and it is overcrowded so that many things happens with many effects that can affect the development of the community and of the country. During the research, participants mentioned areas or hotspots that are prone to GBV and other illegal and criminal actions like prostitution and drug and substance abuse. Areas mentioned includes, Zengeza 4 area (Pagomba), St. Mary's (Chigovanyika), Huruyadzo, Seke Unit A, B, L and Unit P (Kuzvipoto). In a FGD, the community members highlighted that they visit the hotspots for

“witnessing or preaching”. They claimed that their goal in going to these places is to try to persuade people to turn from their evil deeds and pursue the right path. Participants contended that the designated areas are harsh, overpopulated with jobless and uneducated individuals, and still adhere to patriarchal views in which males control women and mistreat children by marrying them off at a young age. According to Bulte and Lensink (2020), by fostering women's autonomy and decision-making authority, economic empowerment initiatives can aid in the reduction of GBV in certain regions. This implies that in order to preserve equality when addressing problems like GBV in these hotspot communities, citizens must be involved.

4.3.3. Types of GBV most prevalent in Chitungwiza

Participants raised different views on types of GBV according to their residing area lines and their occupations. In an interview with the Municipality health officer, she argued that mostly physical and sexual abuse are most prevalent types of GBV in Chitungwiza. In areas mentioned above, sexual violence is mostly happened as children are forced into marriage at early ages and they suffer from depressions and forced labor and sexual harassments. One of the health providers supported by highlighting that, “*Sexual abuse is a significant concern, particularly among young women and girls. We have seen cases of rape, forced prostitution, and other forms of sexual exploitation."* Young pregnancy women at the clinic maternity hall also gave the researcher the picture of early marriages in Chitungwiza. This clearly shows that sexual violence in the area of Chitungwiza is common.

Physical abuse is another mentioned type of abuse prevalent in Chitunwiza. One of the participants insisted that, *"physical abuse is the most common form of GBV in Chitungwiza. There*

are cases of beatings, stabbings of women, and other forms of physical violence." Physical abuse can also begat emotional abuse by threatening victims hence push them to suffer from physical and emotional trauma.

4.4. Strategies used by Zimbabwean government to reduce GBV

The government has implemented several strategies to reduce GBV, including the establishment of the National GBV Prevention and Response Strategy, which outlines a comprehensive approach to addressing GBV. The research claims that, some people in Chitungwiza are aware of the laws and policies implemented by the government to address GBV. What they expect is those laws and policies to be amended and reformed to be of more strict and powerful than before to perpetrators of GBV so that others may abstain from GBV and maintain peace within families and the society. Participants during the research identified policies and laws which include the National Gender Policy, Domestic Violence Act and the Constitution of Zimbabwe. They argue that these policies guide people from committing GBV but some are criminals by nature and they build fear to their wives and children so that they do not report, they decide to suffer silently in the sense of protecting and saving their partners. One of females ranging between 25 years to 30 years insisted that young women is suffering in families and old women are comforting them saying that GBV is natural, one should be strong to protect her family. Others argues that women and children must remove fear within themselves and they should report any threats to recommended agencies. One of the participant asserted that, *"One of the key strategies is the establishment of GBV support services, such as counseling and healthcare services, which provide critical support to survivors."* This can assists in strengthening government laws to address GBV.

Men must take action to combat GBV in their communities and counsel friends and family to do the same. Marxist feminists contend that by addressing the emotional and psychological trauma that causes GBV, psychosocial support services like those provided by the government can effectively lower the prevalence of GBV (Chitimira, 2022). Psychosocial support services that offer treatment and counselling to GBV survivors, for example, can lessen their psychological and emotional suffering and aid in their recovery (Moyo-Nyede, 2023). This affirms that it is the responsibility of both genders to combat GBV.

In an interview one of the participants argues that, the government has also supported community-based initiatives, such as community sensitization programs and awareness campaigns, to raise awareness about GBV and promote behavior change. Government is trying to address GBV in all spheres and some of the laws and policies are active and some are not effective meaning that government have to work more to assist victim and survivors of GBV for them to live with hope not fear of the future.

The Zimbabwean government has put in place legislative frameworks to address GBV, as mentioned by Magede and Mbwirire (2019). For example, a legal foundation for safeguarding women and girls against GBV is provided by the Sexual Offences Act (2001) and the Domestic Violence Act (2007). In order to combat GBV, the Zimbabwean government has also accepted regional and international agreements including the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).

4.4.1. Effectiveness of the strategies on reducing GBV

Different views had mentioned by participants on how Zimbabwean laws and policies have been effective in addressing GBV. Some believed that laws and policies have been effective

because they met better results by applying them to their relatives and to them as victims and survivors of GBV. Especially women raised the view that most of them is suffering in families because these laws and policies is not efficient in solving GBV problems in families. The effectiveness of these policies is undermined by systemic issues such as corruption, inadequate training for law enforcement, and societal norms that perpetuate violence against women. Participants supported government policies and raised contributions that these policies must be amended to become more strict so that to change behaviors of the perpetrators and abusers. Also the reasons that leads the policies to be ineffective includes, poverty, inequality, economic hardships and cultural attitudes. For example one of the participant highlighted that, *"the government's strategies have been somewhat effective in raising awareness about GBV. However, government needs to address the root causes of GBV, such as poverty and inequality, to make a lasting impact."* Participants and other local people is supporting government policies so the policies should be reformed to favor everyone in the community.

In Chitungwiza, participants insisted that, most of residents support community-based initiatives and their support groups and awareness campaigns. They argues that they know these initiatives more than government initiatives and the strong point raised is that, these initiatives should work together to address GBV hence brings equality within the community. A male participant argues that, "*the community-based initiatives have been more effective in raising awareness and promoting behavior change, but more reforms needs to be done to address the systemic and structural factors that contribute to GBV*." The strategies have been moderately effective, but there are still significant gaps in the response, particularly in terms of accessing support services and justice for survivors. The policies as the researcher observed is effective on

paper than in practical, so the government should step forward to make these policies effective to victims and survivors of GBV.

4.5. The effectiveness of the government policies in reducing Gender Based Violence in Chitungwiza

4.5.1. Policies or laws that have been effective in reducing GBV

Participants mentioned different policies that have been effective in addressing GBV. Different policies are to different people accordingly and they take the policies differently. The government implemented these policies to punish perpetrators and to protect victims and survivors of GBV. The government has implemented several strategies to reduce GBV, including the establishment of the National GBV Prevention and Response Strategy, which outlines a comprehensive approach to addressing GBV. Other policies mentioned by one of participant is the Domestic Violence Act and this is sometimes effective in protect victims of GBV. She argued that,

> *the Domestic Violence Act has been instrumental in reducing GBV in Chitungwiza. It provides a framework for protecting survivors and holding perpetrators accountable. The Domestic Violence Act is a good law, but it's not enforced effectively. The government need to strengthen the justice system to ensure that perpetrators of GBV are held accountable.*

In the research the researcher noted that people in Chitungwiza is aware of policies implemented by government and these policies are in use as others testifies the effectiveness of them from them as victims and survivors of GBV and their relatives. Two different participants also mentioned other policies as, *"the National Gender Policy has been effective in addressing GBV. It promotes gender equality and empowers women to report cases of GBV*". Another participant argued that, *"the Sexual Offences Act is another critical law that has helped reduce*

GBV. It provides for harsher penalties for perpetrators of sexual violence." Different laws and policies and laws raised by different participants shows that Chitungwiza residents is aware of many policies that can assist them to fight against GBV.

Community-based interventions have been effective in reducing GBV in Chitungwiza. For example, the community-based committees established by the Ministry of Women's Affairs, Community have been effective in raising awareness about GBV and providing support to survivors (Mhute et al., 2019). Additionally, NGOs such as Musasa Project and Zimbabwe Women's Lawyers Association have implemented community-based programs that have been effective in reducing GBV in Chitungwiza (Dube, 2019). Hence government should work together with CBOs and NGOs to fight and address GBV in urban areas.

4.5.2. Challenges or barriers to implementing policies at reducing GBV

During the study, the researcher find that there are many challenges that hinder the implementation of the policies and laws of reducing and addressing GBV in Chitungwiza. This perpetuates GBV in the community because perpetrators took advantage and they feel free to abuse women and children. The challenges raised by different participants includes,

Participant 1 *"the major challenges is the lack of resources, including funding and personnel. This hinders the effective implementation of policies and programs. There is need for more funding to implement programs that address GBV."* Participant 2 argues that,

> *lack of community awareness and engagement is a challenge to the implementation of laws and policies of addressing GBV. Many people in the community do not understand the severity of GBV and the importance of reporting cases. There is need to engage men and boys in the fight against GBV. The lack of coordination and collaboration among*

different stakeholders, including government agencies, NGOs, and community-based organizations, is also a challenge. This can lead to duplication of efforts and gaps in service delivery

Participant 3 highlighted that, *"Cultural and social norms that perpetuate GBV are also a significant barrier. These norms can make government difficult to implement policies and programs that promote GBV prevention."*

The cultural and social norms that perpetuate GBV need to be addressed (Sibanda, 2025). Scholars argue that the implementation of laws such as the Domestic Violence Act and other related legislation has provided a legal framework for addressing GBV. Despite challenges in enforcement, these laws represent a step forward in protecting victims.

Marxist feminist scholars contend that government-established legislation frameworks, such the Domestic Violence Act of 2007, are essential but insufficient to address the structural causes of gender-based violence in Zimbabwe (Mushayavanhu, 2022). Chitimira (2023), for example, argued that the Act ignores the economic disparity and reliance that can increase women's susceptibility to GBV.

4.5.3. Improving policies effectiveness to address GBV

For the policies to be of more effective, many steps should be followed and people raised the views that the government must not work alone when implementing policies that helps the civilians to address GBV. People’s sides of views are very important when implementing policies which are of their benefits. There is need to review policies and laws to ensure that they are effective in reducing GBV and also the need to engage the community in the development of these policies and laws not just impose policies on people without their input. Participants during the

research argues on some views that done to improve policies to better address GBV. Legal reforms, including the enactment of laws aimed at protecting women's rights and punishing offenders, have been a focus of the government. Scholars argue that effective enforcement of these laws is crucial.

One participant makes the case that additional funding for GBV prevention and response would enhance policy. This covers the cost of support services including therapy and medical treatment. Another participant believed that enhancing community involvement and engagement might help enhance policies. According to experts like Ndlovu (2024), providing GBV survivors with support services like counseling and legal aid is essential since it promotes greater rehabilitation and legal redress. To promote GBV prevention, this may entail collaborating with community-based groups, traditional leaders, and other stakeholders. Furthermore, another participant emphasized that,

> *policies can be improved by providing more support for survivors of GBV. This includes providing safe shelters, economic empowerment programs, and other forms of support. Also there should be improved by addressing the root causes of GBV, such as poverty and inequality including implementing policies that promote economic empowerment and social justice.*

Since they frequently cover the gaps left by official legislation, NGOs and civil society have played a critical role in promoting the rights of GBV victims. According to academics, these groups offer crucial assistance and services that enhance government initiatives (Sifile, L., & Maposa, 2025). This demonstrates that in order to address the underlying causes of GBV and safeguard its victims and survivors, the government should work with various institutions.

In addition to enforcing stringent laws and sanctions against GBV offenders, the government must increase victim protection and support. According to the research, it is necessary to address the structural and systemic problems that lead to GBV, such as poverty and inequality, as well as to give women and girls with education and training and to generate economic opportunities. It is crucial that men and boys participate in the battle against GBV in order to educate them about the rules and regulations that will punish them for committing GBV. The patriarchal attitudes and actions that reinforce men's dominance over women and sustain GBV must also be challenged. The government has put policies in place to address and lessen GBV, and everyone in Chitungwiza should be aware of them.

Marxist feminists advocate for the importance of community-based initiatives that meet women's material and economic demands (Mohanty, 2021). As in Zimbabwe, Marxist feminist scholars contend that addressing the economic and social disparities that underpin GBV can make community-based interventions—like those carried out by the Ministry of Women's Affairs, Communities, Small and Medium Enterprise Development is effective in lowering the prevalence of GBV (Mhute). Community-based programs that offer women social support and economic empowerment, for example, can lessen their susceptibility to GBV.

4.6. Chapter summary

This chapter presented the findings of the study on the effectiveness of government policies in addressing GBV in Chitungwiza. The study involved a mixed method approach, combining both qualitative and quantitative data collection and analysis methods. The findings from the research shows that the government policies is somewhat effective and they are challenges that hinder the effectiveness. The study findings are consistent with the Marxist feminism model, which

emphasizes the need for radical changes in the economic and political systems to address the root causes of women's oppression.

CHAPTER FIVE

5.0. SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

Some of the main conclusions of the study are presented in this chapter. Following the presentation of the results, conclusions will be drawn from the data as well as additional observations gathered throughout the investigation. The conclusions and findings are then used to formulate recommendations. This chapter summarized the whole study, summary of findings and recommendations to different institutions and also areas for further research for other researchers.

5.2. Summary

The research was categorized into five chapters

The study's introduction, the first chapter, gave background information about GBV, particularly in metropolitan areas, and how the government has taken action to combat it nationwide. The problem statement, research objectives, research questions, study purpose, and study importance were all provided. The establishment of GBV in Zimbabwe forces the government to look for help from various organizations in order to eradicate GBV and foster positive behaviours that will help the country reach upper middle income status. The goal of the study was to examine how well government rules and policies worked to lower GBV.

The literature review, text, and other resources pertaining to addressing GBV in Zimbabwe were the main topics of Chapter 2. The study's underlying idea is examined in this chapter. This chapter covered the theoretical underpinnings of Marxist feminism and how the theory advances our knowledge of the topic. The empirical research on GBV in Zimbabwe is also reviewed,

emphasizing the condition, incidence, and repercussions of GBV. The chapter examines how the laws and policies put in place by the government to lessen GBV work to address GBV in the Chitungwiza community.

Chapter three outlines the research methodology use in the study. The chapter describes the research design which is mixed methods approach combining qualitative and quantitative data collection and analysis methods. It also outlines the sampling strategy which is purposive sampling data collection instruments which are questionnaires, Focus Group Discussion guides and Interview guides. Data analysis procedures was also discussed in this chapter. The chapter concludes by discussing the ethical considerations and validity and reliability of the study.

Chapter four concentrated on the researches and analyses of important results. The findings demonstrated the results of the qualitative and quantitative data analysis highlighting the perceptions and experiences of survivors of GBV, community leaders, health providers and government officials. The chapter presented findings of the study showing that frameworks established by the government in addressing GBV have been less effective in eradicating GBV in Chitingwiza and challenges that hiders the effectiveness was also discussed in this chapter. The findings discussed in this chapter explores ways that can be taken to improve these policies to be more effective.

Chapter five emphasis were on the summary, findings, recommendations and areas for further research. The study discovered that the policies and laws established by government is politicization are somewhat effective and there are many challenges that hinders the effectiveness of these policies in urban communities. Government should engage different institutions and agencies that can assist on policy implementation on addressing GBV to come up with better

results on changing behaviors of GBV perpetrators. Community engagement is also important when making policies for the people of that community.

5.3. Summary of the findings

Findings from the research indicated that GBV in Chitungwiza is a serious problem that needs everyone's attention. Laws and policies established by the government to prevent, protect and address GBV is theoretical more than practical. There are challenges that causes strategies to be effective and this creates culture of abuse to women and girls by men. Chitungwiza according to research findings is associated with patriarchal practices which promotes male dominance over women. Participants complained about corruption from law providers and this leads the laws and policies not to be taken seriously by both victims and perpetrators. Also lack of education about laws and policies and were to report GBV cases is another challenge the effectiveness. The researcher ended up find that, government and citizens of Chitungwiza should engage, coordinate and work together to prevent GBV and promote equality. Policies and laws should be reviewed and amended so that they address the route cause of GBV hence finding a better way of eradicating GBV, the perpetrators should also suffer from punishments of their cases so that they cannot repeat committing GBV and characters which meant for development and innovations.

5.4. CONCLUSIONS

The conclusions are presented for each specific research objective.

- **To examine the state of GBV in Chitungwiza.**

GBV remains a significant threat to women and girls in Chitungwiza and this leads to gender inequality and poor development within the community. People are complaining of the GBV issues

that it is disturbing development because those are facing abuses may be the participants in development hence they fear because of their situations. The situation of GBV needs an attention from both government and all residents within the community so that to cooperate in addressing the root causes and to change behaviors of the perpetrators. Types of GBV which are more prevalent is physical, emotional and sexual abuse. Despite laws imposed by the government to punish the offenders of GBV, corruption and patriarchal beliefs promote GBV indirectly in urban areas. Offenders are given protection orders and charges but because of corruption the charges sometimes ignored and the same perpetrators continue to abuse the law because the view the law as of no value to them. The state of GBV is disturbing hence government and agencies has the duty to promote equality and empowerment to women and girls.

- **To explore strategies used by Zimbabwean government to reduce GBV in urban areas.**

Government is playing an important role trying to address and eradicate GBV in both urban and rural areas. Strategies established by the government include laws and policies that protect victims and survivors of GBV from perpetrators and to provide them services needed at time. The government establishment of the National GBV Prevention and Response Strategy, which outlines a comprehensive approach to addressing GBV shows that government is responding to GBV cases and they are trying to hold their duty in protecting victims and survivors of GBV. Government also implemented laws and policies protect citizens from GBV and they include Domestic Violence Act, Sexual Offenses Act and National Gender Policy respectively. The Constitution of Zimbabwe also address the issue of gender equality to empower women and girls on section 17.

- **To evaluate the effectiveness of the government policies in reducing Gender Based Violence in Chitungwiza.**

Laws and policies put in place by the government to combat and eliminate GBV is hampered by a number of factors. Zimbabwe's circumstances and culture have an impact on and lessen the efficacy of laws and regulations put in place to combat gender-based violence and inequality because they encourage male dominance, which in turn encourages abuse of women and girls.

Additionally, a lack of finance resources hinders the government's ability to enact laws and programs that effectively alleviate inequality and GBV. The effectiveness of laws and policies is also impacted by poverty since, in Chitungwiza, women and girls are mostly assaulted because they are dependent on men, which makes them unable to report abuse. Lack of community awareness and engagement is another factor that hamper the success of policies to eliminate GBV. The government is not talking to the people in the community about what they need to do to end GBV in their neighbourhoods.

Additionally, the government's laws and regulations are only partially effective. They are only partially successful because Chitungwiza's GBV situation indicates that they are insufficiently powerful to stop violence. In Chitungwiza, gender-based violence is a severe issue, with reports of it appearing in newspapers, articles, and social media news sites virtually daily. This demonstrates how ineffective government rules and regulations are in ending GBV. The government should enact stringent laws and regulations from other organizations and nations to better combat GBV and establish an equitable economy. Because of the impacts mentioned above, the research findings showed that government regulations and programs aimed at reducing GBV are effective for some people but ineffective for others.

5.5. RECOMMENDATIONS

The study makes recommendations to Zimbabwe policy makers, Chitungwiza health providers, Chitungwiza residents and Chitungwiza ZRP in order to improve equality and better addressing GBV in Chitungwiza.

- **Zimbabwe policy GBV makers**

The researcher wants to advise policymakers to evaluate and revise laws and policies for GBV reduction in order to make sure that they are comprehensive, victim-centered, and offer sufficient protection to GBV victims and survivors. This is because the research indicates that policy weaknesses contribute to an increase in GBV instances. In order to ensure that resources are distributed and that foreign financial institutions are included in the funding process, policymakers should enhance funding for GBV prevention and response programs. In order to guarantee that the requirements of the local populace are taken into account, they should also include or engage community leaders and organizations in the policy-making process.

- **Chitungwiza Healthcare providers**

Abused people end up suffering from diseases, trauma, and depressions according to findings from the research. Healthcare providers should provide training for healthcare workers on identifying and responding to cases of GBV sensitivity effectively and they shall understand the psychology and physical impacts of GBV on survivors. Community outreach is important for community health education campaigns to raise awareness about GBV, its effects and available services for survivors.

- **Chitungwiza residents**

The leaders of the Chitungwiza Residents Association should urge locals to start community groups devoted to GBV prevention, awareness, and support for survivors. These groups can include advocacy campaigns, workshops, and support groups. In order to combat damaging stereotypes that support gender-based violence, encourage men and boys to participate in conversations on gender equality and the value of respecting women and girls. Additionally, residents ought to back neighborhood projects and non-governmental organizations that work to combat GBV and support survivors.

- **Zimbabwe Republic Police**

The researcher advises ZRP to manage GBV situations tactfully and successfully, stressing the value of empathy and privacy. In order to develop a coordinated response to GBV that offers survivors legal, medical, and psychological support, police should also work with NGOs and community organizations.

5.6. Areas of further research

The research is based on the effectiveness of Zimbabwean laws and policies to reduce GBV. Other researchers may explore the following various areas of study:

Effectiveness of support services for GBV survivors, including counselling and legal aid.

Responsiveness of the ZRP to GBV cases

Impacts of community awareness campaigns on GBV prevalence and reporting rates

Cultural perceptions and attitudes towards GBV and how they affect the implementation of laws and policies.

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APPENDIX 1 :INTERVIEW GUIDE FOR THE HEALTHCARE PROVIDERS

My name is Prisca Chikuwira, and my registration number is B213168B. I am a final year student at Bindura University of Science Education (BUSE). I am carrying out research on the effectiveness of government laws and policies in reducing Gender Based Violence as part of the fulfilment of the Bachelor of Science Honors Degree in Peace and Governance. I kindly ask you to participate in the interview questions that are relevant to my study as part of the fieldwork. Please note that the findings will be strictly used for academic and research purposes. Your participation and cooperation will be greatly appreciated.

Section 1

i. Can you describe the current situation of GBV in Chitungwiza?

ii. Are there any specific areas or hotspot in Chitungwiza where GBV is more prevalent?

iii. What type of GBV is most prevalent in Chitungwiza (physical, emotional and sexual)?

Section 2

i. What strategies has the government implemented to reduce GBV?

ii. How effective do you think these strategies have been at reducing GBV?

iii. Are there any gap or challenges in the government's response to GBV in Chitungwiza?

Section 3

i. Can you identify any policy or law that have been effective in reducing GBV

ii. How can policies be improved to better address GBV

iii. Are there any challenge or barriers to implementing policies at reducing GBV

APPENDIX 3: QUESTIONNAIRE

My name is Prisca Chikuwira, and my registration number is B213168B. I am a final year student at Bindura University of Science Education (BUSE). I am carrying out research on the effectiveness of laws and policies implemented by the government of Zimbabwe in order to reduce Gender Based violence. I am generously seeking for your assistance to contribute to my study by answering some of the following questions.

- Please either tick [✓] your answer in the box or fill the spaces provided
- Do not write your name anywhere on this questionnaire
- Your participation in this research is voluntary and you have the right to withdraw from the research any time.
- If you have any questions or concerns about completing the questionnaire or the research, feel free to notify the researcher.

Participants Information

- **Age**

  11-15 years [ ]

  16-24 years [ ]

  25-34years [ ]

  35 years and above [ ]

- **Sex**

  Male [ ]

  Female [ ]

- **Occupation**

  Self- employed [ ]

  Employed [ ]

- **Marital Status**

  Married [ ]

  Single [ ]

  Divorced [ ]

Select one answer from those given below each question (put a tick)

Section 1

1. How would you rate the prevalence of GBV in Chitungwiza

   Very high

   High

   Moderate

   Low

2. Have you or someone you know experienced GBV in Chitungwiza

Yes

No

3. What types of GBV have you observed in Chitungwiza

   Physical violence

   Emotional or psychological violence

   Sexual violence

   Economic violence

   Other (please specify)

Section 2

1. What strategies that have been initiated by the government to address the state of GBV in Chitungwiza?

   ……

2. How do you think these government strategies are effective in addressing GBV in Chitungwiza

   Very effective

   Effective

   Neutral

   Ineffective

   Very ineffective

Section 3

1. How familiar are you with the laws and policies regarding GBV in Zimbabwe?

Very familiar

Familiar

Not familiar

2. In your own opinion, how well do these laws and policies protect victims of GBV?

   Very well

   Well

   Neutral

   Poorly

   Very poorly

3. What barriers do you believe exist that prevent effective implantation of these laws and policies in Chitungwiza?

   Lack of awareness

   Insufficient resources

   Corruption

   Cultural norms

   Other (please specify)

4. What additional measures do you think could be implemented to improve the laws and policies in Chitungwiza?

……..……..……..……..……..……..……..…
……..……..……..……..……..……..……..…
……..……..……..……..……..……..……...

APPENDIX 2: FOCUSED GROUP DISCUSSIONS QUESTIONS FOR THE RESIDENTS

My name is Prisca Chikuwira, a student at Bindura University of Science Education undertaking a Bachelor of Science Honors Degree in Peace and Governance and my registration number is B213168B. I am carrying out research on the effectiveness of laws and policies implemented by the government of Zimbabwe in order to reduce Gender Based violence. I am generously seeking for your assistance to contribute to my study by answering some follow up questions during this discussion. The information that you will provide will be strictly for research and academic purposes only and as a student I promise that confidentiality anonymity is guaranteed.

The discussion will be based on these key questions:

1.What are your thoughts on the current situation or state of GBV in Chitungwiza

2. What types of GBV do you think are most prevalent in Chitungwiza (eg physical, emotional, sexual, etc)

3. How do you think GBV affects individuals, families and the community of Chitungwiza?

4. What changes would you like to see in Zimbabwe's laws and policies to better address GBV?

5. Are there any successful initiatives or programs that you think should be replicated or scaled up?

Thank you for your time and your contributions. Lets all of us try to play roles in reducing GBV in our community, try to maintain peace in families and individually. Thank you!

APPENDIX 4:CONSENT FORM

Bindura University of Science Education
Faculty of Social Sciences and Humanities
Department of Peace and Governance

CONSENT FORM

Topic: Effectiveness of Zimbabwean laws and policies in reducing Gender Based Violence in Chitungwiza.

Student: Prisca Chikuwira (0783166874)

I am a student at Bindura University of Science Education currently studying Honors Degree in Peace and Governance undertaking an academic research aimed at assessing the effectiveness of Zimbabwean policies in reducing Gender Based Violence in Chitungwiza. The study is also aimed at showing the importance Zimbabwean policies and their efficiency. The information obtained from the research will be strictly used for academic purposes. It will be highly confidential and all identities will be kept anonymous. You are free to withdraw from the interview anytime if need be.

Participant's Agreement

I am fully aware of the purpose of this research and that my contribution to this research is voluntary. I have understood the above information concerning the aim, purpose and requirement of the research and agreed to participate freely in the research.

Participant's signature …….. *Date* ……

Interviewer's signature ……..

CHITUNGWIZA MUNICIPALITY

The Municipality of CHITUNGWIZA

All Correspondence to be addressed to the Town Clerk

If Calling, Please
Ask for...Ms Murungu.

P. O. Box 70, ZENGEZA
CHITUNGWIZA.
Mobile : 0719386506

17 March 2025

Prisca Chikuwira
32982 Unit L Ext
Seke
Chitungwiza

Dear Madam

RE: REQUEST TO CARRY OUT AN ACADEMIC RESEARCH IN CHITUNGWIZA MUNICIPALITY: EFFECTIVENESS OF ZIMBABWEAN LAWS AND POLICIES TO REDUCE GENDER BASED VIOLENCE.

I refer to your letter dated 17 March 2025 requesting to carry out a research in Chitungwiza and I am pleased to inform you that your request was considered and permission has been granted.

Please be advised that permission is granted on the following conditions:

1) That you do not publish the name of Council officials.
2) That you also seek police clearance in the case that you want to interview residents.
3) That Chitungwiza Municipality shall not be liable of any action arising from your research.
4) That you undertake to deposit of the said research which shall be submitted to the Town Clerk's office.

MS M. MPUKUTA
ACTING CHAMBER SECRETARY

CHITUNGWIZA MUNICIPALITY
HEAD OFFICE-REGISTRY
19 MAR 2025
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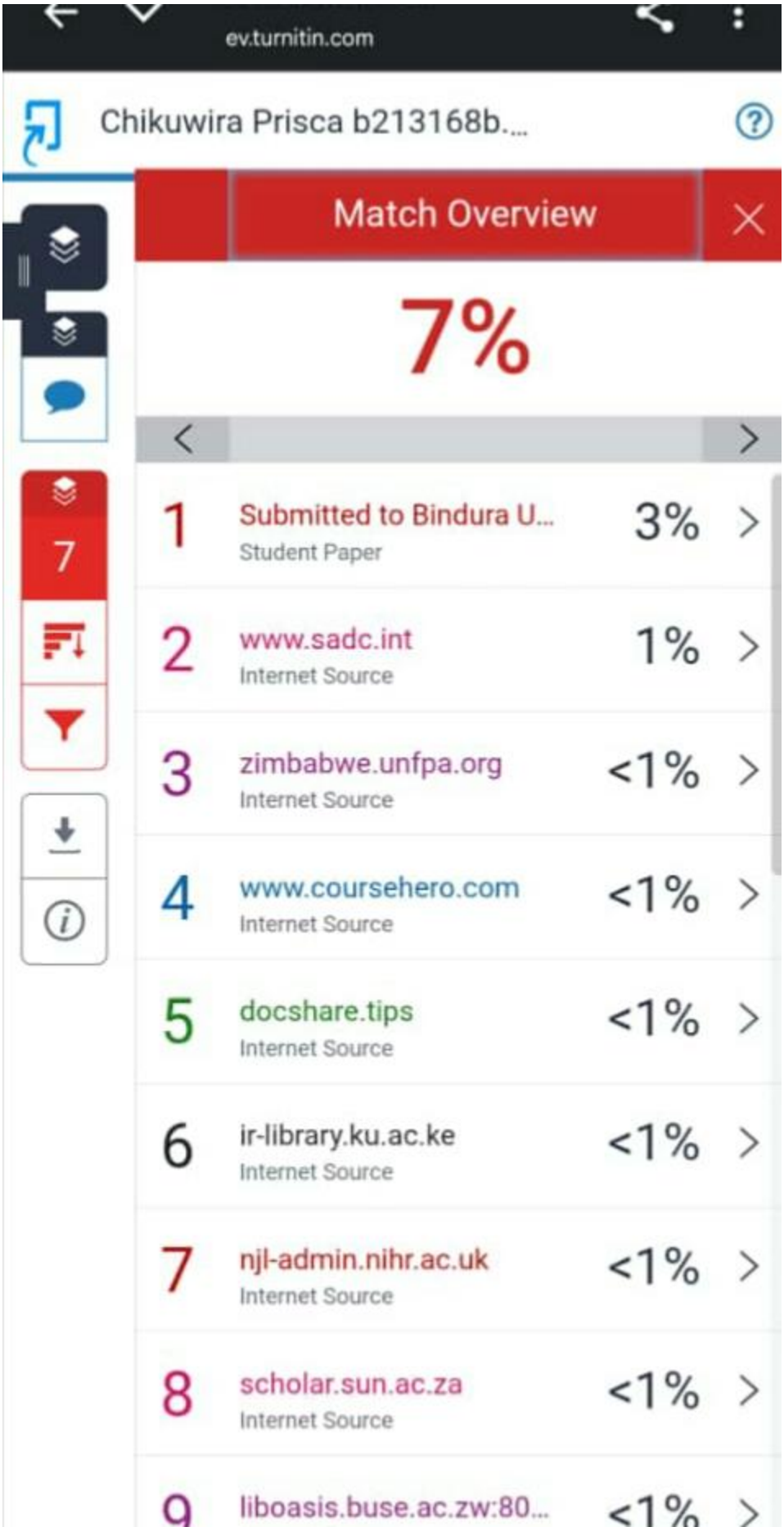
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