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ROOTS OF GENDER BASED VIOLENCE IN WARD 23, SHAMVA DISTRICT,
MASHONALAND CENTRAL.

Declaration.

I Lavender Jiya declare that the dissertation entitled "EXPLORING THE SOCIO-CULTURAL AND ECONOMIC ROOTS OF GENDER BASED VIOLENCE IN WARD 23 SHAMVA DISTRICT" is my own work and it has not been submitted in any institution for academic purposes. I confirm that all sources used have been acknowledged and referenced correctly.

Signature.....

Date.....

DEDICATION

I dedicate this dissertation to loving daughter, my parents and my sister and her family who made it possible for me to study this degree program through their financial and emotional support from day one. May our good Lord continue to bless you.

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Firstly, I would like to thank my supervisor Dr. P. Mukwenyi who helped and guided me from the beginning to the end of my research. I would also like to thank Bindura University of science Education staff and students who made my academic journey a success. Above all my appreciation goes to the Almighty for guiding me and making the whole process successful.

ABSTRACT

This research examines the socio-cultural and economic roots of gender-based violence (GBV) among women aged 18-49 in ward 23 Shamva district. The study aims to evaluate the prevalence and trends of GBV in this group , emphasizing the intricate relationship between societal norms and economic factors .By analyzing how women’s economic and social empowerment affects both the incidence and reduction of GBV , the research seeks to identify key elements that increased women’s susceptibility to violence .Additionally, the study intends to formulate tailored strategies for incorporating GBV prevention into community programs , promoting a comprehensive approach to tackle this widespread issue. The findings are anticipated to offer valuable insights for policymakers and community leaders, to enhance women’s safety and empowerment in the area.

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LIST OF ACRONOMYS

GBV.....Gender- based violence.

NGO.....Non- governmental organization.

MWACSMED.....Ministry of women affairs community small and medium enterprise
development.

AW.....Awareness campaign.

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CHAPTER ONE: ORIENTATION OF THE STUDY

1.1 Introduction

Gender based violence (GBV) is a widespread and challenging issue affecting millions of people worldwide giving traumatic outcomes for both individuals and communities. In Zimbabwe GBV is a pandemic especially in rural areas and mining towns where economic and socio-cultural situations worsen vulnerability. Ward 23, Shamva District, Mashonaland Central, is also experiencing high and disturbing levels of GBV, therefore this study seeks to examine the socio-cultural and economic roots of GBV. Through examining the relationship between traditional practices, community norms and economic factors, this research seeks to contribute to a deeper understanding about GBV and contribute to strategies for its prevention. This chapter lays a framework for this study by including the background, statement of the problem, research objectives, research questions, significance of the study, assumptions, limitations, delimitations, key term definitions and a summary. This structure can establish a comprehensive understanding of GBV in this study.

1.2 Background of Study

Globally, gender-based violence (GBV) is a pervasive and complex issue affecting millions of individuals globally, especially women and girls transcending cultural, economic and geographical boundaries (Heise, 2011). According to Impe (2019), one in three women experience either physical or sexual violence world- wide from partners and the violence maybe in form of violence, sexual assault and genital mutilation and this will result in them suffering from depression, anxiety as well as post- traumatic stress disorder. Nogradi (2018) argues that, GBV is rooted in entrenched socio-cultural norms and patriarchal values that perpetuate gender inequality. Economic imbalances further worsen the issues limiting access to education and financial independence, creating cycles of abuse and stigma (Cameron and Tedds, 2021).

There are notable researches which highlight the prevalence and socio-cultural underpinnings of GBV globally and in Africa, however, certain gaps are left out, especially in understanding the socio-economic and cultural factors within specific local contexts. Much of the information put more emphasis on larger trends, but localized areas like rural and resource constrained areas remain limited. For example, Thelma (2024), conducted a study in Zambia that explored the cultural dynamics underlying GBV, showcasing how culture causes violence despite legislative

efforts. Similarly, Kantende-Kyenda and Ani (2025), examined GBV experiences across 25 Sub-Saharan African countries, identifying rural women with limited education as particularly vulnerable and emphasizing the need for tailored, evidence-based interventions. Despite these contributions, there is insufficient exploration of how specific socio-cultural practices and economic vulnerabilities interact at the local level, particularly within the Southern African Development Community (SADC). Regional issues such as HIV/AIDS, displacement and conflicts further worsen the problem, yet there is limited focus on their intersection with traditional norms to sustain GBV. In Zimbabwe, while there are a lot of studies about GBV (Bengesai and Chikhungu, 2024) on their study about violence against women, this review underscores for more research to fill these gaps for effective and tailored policymaking and strategies. This may include rural communities like Ward 23, Shamva District, which receive less research attention despite exhibiting unique challenges, including traditional patriarchal systems and economic hardships.

This study is important because it seeks to cover these gaps by providing an in-depth exploration of the socio-cultural and economic roots of GBV in Ward 23, Shamva District. Understanding these interconnected factors is important to formulate effective and tailored interventions. The study also will also address gap in knowledge about how traditional practices, community norms and economic vulnerabilities shape the prevalence of GBV in rural Zimbabwe. The study's findings will make several fundamental contributions. The findings will provide policymakers with a better understanding of GBV in rural settings, inform the creation of tailored interventions and enrich the broader discourse on GBV within socio-economic and cultural contexts. The research will also offer practical insights for community leaders and organizations working to reduce GBV, emphasizing evidence-based approaches to promote gender equality.

The main aim of this research is to explore and examine the socio-cultural and economic roots of gender-based violence in Ward 23, Shamva District, Mashonaland Central. By identifying the factors that transpires GBV and examining their relationships, the study seeks to contribute to sustainable solutions for GBV and fostering gender equality.

1.3 Statement of the Problem

Gender based violence (GBV) continues as a widespread and deeply ingrained problem in Zimbabwe, particularly in rural areas like ward 23 Shamva district Mashonaland Central. Despite specific literature on GBV, there remains a significant knowledge gap regarding the socio-cultural

and economic factors driving this violence in rural Zimbabwean communities. This study will examine how patriarchal norms economic dependence and cultural practices contributing to GBV in Ward 23 are not well understood. This study aims to bridge this knowledge gap by exploring socio-cultural and economic roots of GBV in ward 23, through a mixed method approach. By examining the experiences of women and girls, and perceptions of community members, this research seeks to provide evidence-based data to inform effective interventions and policy reforms in Shamva District ward 23.

1.3 Research Objectives

1. To assess the prevalence and patterns of gender-based violence (GBV) among women aged 18-49 in Ward 23, Shamva District.
2. To investigate the impact of women's economic and social empowerment on the occurrence and mitigation of GBV in Ward 23.
3. To develop context-specific strategies for integrating GBV prevention into community programs in Ward 23.

1.4 Research Questions

1. What is the prevalence and what are the patterns of GBV among women aged 18-49 in Ward 23, Shamva District?
2. What is the relationship between women's economic and social empowerment and the occurrence of GBV in Ward 23?
3. How can GBV prevention strategies be effectively integrated into existing community programs in Ward 23?

1.5 Significance of the Study.

This study will benefit stakeholders like Ministry of women affairs, ministry of health, NGOs, residents of ward 23, local community leaders as well as Zimbabwean society at large.

1.5.1 Ministry of Women Affairs.

This research benefits the ministry of women affairs by providing essential insights into socio-cultural and economic factors that contribute to Gender based violence. This helps the ministry in policy making program creation and the distribution of essentials targeted at preventing GBV. The study will also strengthen the Ministry's capacity to implement laws, advocate for change and

enhance collaborations with different community stakeholders and it will also help in finding strategies to empower women and girls who are at risk of gender- based violence.

1.5.2 Ministry of Health.

Ministry of health will benefit from this study because it will be able to shed light to health consequences of gender- based violence therefore it will develop targeted healthcare programs and services to GBV survivors, strengthening health care provider training on GBV screening and response as well as improving mental health services and psychological support for gender-based violence survivors. Therefore, this study will help the ministry to fulfill its duties as well as to improve health outcomes.

1.5.3 Non- Governmental Organizations (NGOs).

Non- governmental organizations which deals with community development, gender -based violence as well as women empowerment will benefit from this study because this research will provide evidence- based programming, offer resource allocation and also improve services which are provided to gender-based violence survivors, therefore by so doing it improves the lives of girls and women as well as helps in achieving SDG number 5.

1.5.4 Residence of Ward 23, Community Leaders and Zimbabwe Society at large.

This study helps residents of ward 23 to understand the causes of gender -based violence as well as its effects. It also helps to empower women and girls through education and community engagement.

1.6 Assumptions of the Study.

This study works with several key assumptions. It assumes that power imbalances between men and women impact the occurrence and transpires GBV in Ward 23, Shamva District. Limited access to education, inadequate enforcement of laws and insufficient public awareness campaigns are also presumed to exacerbate the occurrence of GBV in Ward 23. It is also assumed that survivors of GBV participating in this study will provide accurate and honest information about their experiences, enabling the research to capture authentic insights. The study further assumes that local stakeholders, including community leaders and organizations are willing to collaborate in addressing GBV and support efforts to mitigate it. To add on, it is assumed that the study will develop actionable strategies that will eventually reduce GBV, which can be integrated with the existing community programs to enhance sustainable prevention and fostering gender equality.

1.7 Limitations of the study.

The study of socio-cultural and economic roots of GBV faces several limitations. Data bias may arise, as some survivors may be afraid to share their real experience due to the fear of retaliation from perpetrators, this will affect the accuracy of the findings. Furthermore, since the study is more focused on Ward 23, Shamva District, its results may not be representative of Zimbabwe as a whole, limiting the applicability of the solutions to other areas in the country and providing incomplete national statistics on those affected by GBV. Access to marginalized groups, such as disabled women, poses a challenge due to their heightened vulnerability stemming from power imbalances, social isolation and dependence on caregivers. Additionally, resource constraints may affect the study's findings, making it very difficult to include a large and diverse group of participants, which could impact the depth and reliability of the data collected. These are the limitations showcased the challenges that might affect conducting this study on GBV.

1.8 Delimitations.

The study focuses on Ward 23 Shamva District, Mashonaland central, Zimbabwe, and it targets women from the age of 18 -45, who are especially vulnerable to GBV. The study will use a mixed-method approach, integrating both quantitative and qualitative methods to comprehensively address the research aim. The study further delimits its scope to socio-economic and cultural context of Ward 23, which is predominantly inhabited by small-scale farmers and artisanal miners. Narrowing the research on this specific demographic, location, and methodology, the research will ensure a detailed and context-specific exploration of the roots of GBV. However, these delimitations also mean that the findings may not be used to other regions without careful consideration of local differences.

1.10 Definition of key terms.

Gender- based violence is any type of harm that is perpetrated against a person or a group of people because of their factual or perceived sex, gender or sexual orientation (Lumidao et al., 2024). Socio-cultural norms are rules and expectations of behavior and thoughts based on shared beliefs within a specific cultural or social group (Maheshkar and Sonwalkar, 2023). According to Hamby (2017), violence is defined as an action that intentionally causes harm or injuries to another person.

1.11 Summary of the Chapter.

This chapter lays a foundation of the study by introducing the topic and provide the context of the study with a detailed background. The chapter shed light on the stamen of the problem, research objective and questions were described. The chapter explores the study's significance, the assumptions and limitations of the study were also discussed. Delimitations and definition of key terms were also explained in the chapter. All these sections provide a fundamental and comprehensive understanding of the research topic about GBV in Ward 23, Shamva District. This pave way for chapter two which is literature review and the rest of the research.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This chapter will lay a comprehensive understanding of the existing literature on gender-based violence (GBV), focusing on its socio-cultural and economic roots. The chapter starts by exploring global perspectives on GBV, showcasing international trends and measures to address this issue. It then narrows its focus to the regional level, examining literature from the SADC to understand how GBV occurs and addressed within its context. The chapter will then delve into country-specific literature, focusing on Zimbabwe, identifying unique socio-cultural and economic factors contributing to GBV. It also discusses key theories underpinning the research, offering a critical analysis of their relevance and application. Furthermore, it identifies gaps in the existing literature, which this research seeks to address and concludes with a presentation of the theoretical framework chosen for the study. A summary of the chapter will be provided at the end.

2.2 Understanding Gender-Based Violence (GBV)

Globally, gender-based violence (GBV) is known as a widespread human right issue and barrier to gender equality. According to Garcia-Moreno et al. (2020), one in three women worldwide experience physical or sexual violence, especially from intimate partners, highlighting the global prevalence of GBV. The World Health Organization (2021) highlights that the COVID-19 pandemic exacerbated GBV, with lockdowns and economic stress contributing to a significant rise in domestic violence cases. Efforts to reduce GBV globally involve innovative legislative, education campaigns and the crafting of the Sustainable Development Goals (SDGs) which fosters gender equality with the SDG number five (Gender Equality). For example, Ellsberg et al. (2018) mentioned the success of Sweden's consent law, which redefines sexual violence by mandating explicit consent, setting a global benchmark. Similarly, the UN's Spotlight Initiative has invested \$500 million in targeted interventions across regions to tackle the root causes of GBV (UN Spotlight Initiative, 2021). However, as Tontoh (2024) note, global progress is hindered by challenges such as underreporting, cultural stigma, and lack of enforcement in low-resource settings. These strategies and challenges underline the importance of integrating legal, economic, and cultural approaches to eradicate GBV globally.

In Southern Africa, GBV is rooted in cultural practices and socio-economic inequalities, with widespread challenges for public health and social development. Jewkes et al. (2021) argue that

practices such as lobola (bride price) make traditional gender hierarchies stronger, leading to violence against women. In Malawi, Chiweza and Kanyongolo (2020) observed how food insecurity and poverty add fuel to household tensions, hence domestic violence cases during agricultural downturns. Regional strategies to address GBV involve policy interventions and community engagement initiatives. For instance, South Africa's National Strategic Plan on Gender-Based Violence and Femicide (2019) integrates victim support services with stricter enforcement of GBV laws (Department of Women, 2020). In Malawi, the microfinance Project as a tool to reduce GBV, focused on economically empowering women through microfinance initiatives (Chilongozi, 2022). Despite these efforts, Banda et al. (2021) highlight that cultural resistance and resource constraints often limit the success of such strategies, mainly in rural areas where patriarchal values remain deeply ingrained.

In Zimbabwe, GBV is a pressing issue influenced by socio-cultural norms and economic challenges. According to the Zimbabwe Demographic and Health Survey (ZDHS, 2019), 35% of women aged 15–49 have experienced physical violence, often perpetrated by intimate partners. Chireshe (2021) argues that cultural practices such as lobola contribute to gender inequalities, which normalize and transpire violence against women. The COVID-19 pandemic worsened the situation, as highlighted by Musarurwa and Mukurazhizha (2022), with lockdowns increasing economic hardships and incidents of GBV. Strategies to reduce GBV in Zimbabwe include policy reforms and NGO-led initiatives. The Zimbabwe National Gender Policy emphasizes prevention through public education, legal reforms and women's empowerment. The Musasa Project provides critical services such as shelters and legal aid while promoting community-based awareness programs (Musasa Project, 2021). Despite these efforts, resource shortages, deeply entrenched cultural beliefs, and limited access to education hinder progress, particularly in rural settings like Ward 23, Shamva District.

2.3 Gaps in the Literature.

Despite extensive research on gender-based violence (GBV), several critical gaps remain in the literature that warrant further exploration. Many studies focus on broad regional or national trends, often overlooking the unique socio-cultural and economic contexts of specific communities, such as those in Ward 23, Shamva District, Zimbabwe, limiting the understanding of the specific factors contributing to GBV. Additionally, while some literature addresses gender as a primary factor,

there is insufficient intersectional analysis that considers how identities such as age, ethnicity, disability, and socio-economic status interact with gender to shape experiences of violence and access to resources. Much existing research is cross-sectional, necessitating longitudinal studies to understand the long-term impacts of GBV and the effectiveness of various intervention strategies. There is also a notable gap in understanding the specific adaptation strategies employed by communities to combat GBV, including the mobilization of local resources and support networks. This study seeks to address these gaps by focusing on the socio-cultural and economic roots of GBV in Ward 23.

2.4 Theoretical Framework

This research will utilize the Ecological Theory as its theoretical framework to explore the socio-cultural and economic roots of gender-based violence (GBV) in Ward 23, Shamva District. This section provides an overview of the framework, discusses studies that have used it, evaluates its strengths and weaknesses, and justifies its application despite its limitations.

Ecological Theory was developed by Heise (1998), it provides a comprehensive, multi-level approach to understanding GBV by exploring how individual, relational, community and societal factors interact to perpetuate violence. According to Murphy et al (2023), the framework recognizes that GBV is not caused by a single factor but emerges from the interplay of diverse influences, including personal experiences, social norms, economic conditions and cultural practices. The ecological model allows for a holistic analysis of the root causes of GBV, which is essential for developing effective and context-specific intervention strategies.

Ecological Theory has been widely employed in GBV research to explore the complex drivers of violence. The one developed it, Heise (1998) utilized the framework in her seminal study to illustrate how factors such as childhood exposure to violence, societal acceptance of male dominance and economic inequalities interact to increase the risk of GBV. This application proved particularly helpful in identifying and categorizing the different levels of influence, allowing policymakers and researchers to design more targeted interventions. Similarly, Adebayo et al. (2014) employed the ecological model to examine the experiences of gender-based violence among Somali refugee women. The use of this framework was useful in demonstrating how societal, community and individual factors contributing to the experience of GBV.

According to Hassan et al. (2023), Ecological Theory lies in its ability to provide a multi-dimensional analysis of GBV, integrating factors across various levels of influence. This holistic approach is valuable for addressing the complex interplay between socio-cultural norms and economic vulnerabilities that sustain GBV. The framework's adaptability allows researchers to tailor it to specific contexts, making it highly relevant for localized studies such as this one (Hassan et al, 2023). On the other hand, the theory also has weaknesses. Its multi-level nature can make it challenging to operationalize, as it requires comprehensive data collection at individual, community and societal levels, which may be resource-intensive (Hassan et al., 2023). Moreover, while the framework identifies contributing factors, it does not inherently provide solutions, requiring researchers to complement it with practical intervention models.

Besides its weaknesses, the Ecological Theory is the best framework for this research due to its ability to address the multifaceted nature of GBV in Ward 23. The framework's holistic approach aligns perfectly with the study's focus on understanding the socio-cultural and economic factors contributing to GBV. Its application ensures that the analysis captures the interplay between individual behaviors, cultural norms and structural inequalities, providing the best framework for developing tailored interventions. Although the comprehensive nature of the theory may demand additional resources, the depth and nature of insights it offers outweighs these challenges, making it the ideal choice for achieving the study's objectives.

2.5 Summary of the Chapter

This chapter reviewed the existing literature on gender-based violence (GBV) by exploring its global, regional and country-specific contexts. Globally, GBV is understood as a pervasive violation of human rights, driven by socio-cultural norms, systemic gender inequalities and economic constraints. Regionally, in Southern Africa, GBV is influenced by patriarchal traditions, poverty. In Zimbabwe, GBV is shaped by cultural practices such as lobola, economic hardships, and societal norms. The chapter further discussed theoretical foundations underpinning the study, with a focus on the Ecological Theory, which offers a multi-level perspective for analyzing the interplay of individual, community and societal factors contributing to GBV. Lastly, it identified key gaps in the literature, such as the lack of localized studies, insufficient intersectional analyses, and limited focus on community-driven strategies. These gaps highlight the need for context-specific research to address GBV effectively. This chapter lays a foundation for chapter three.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

This chapter explains the methodology that was used in this research, detailing the approaches, techniques and procedures used to achieve the research objectives. The main goal is to examine the socio-cultural and economic roots of gender-based violence (GBV) in Ward 23, Shamva District. This chapter was guided by the research questions and provides the best choices made in the sections such as research paradigm, design, sampling, data collection, analysis techniques and ethical considerations. To ensure methodological rigor and alignment with the study's focus, this chapter serves as the framework for obtaining credible and context-specific findings.

3.2 Study Area

This study was conducted in Ward 23, Shamva District, Mashonaland Central, Zimbabwe, a region located 28 km from Bindura Town. The area is primarily dependent on mining and agriculture, which serve as the dominant livelihood strategies for residents. According to ZIMSTATS (2022), the ward consists of 1 227 households and a total population of 5 159 people. The selection of Ward 23 as the study area was informed by its complex socio-cultural dynamics, particularly regarding gender roles, traditional practices, and economic structures that influence GBV prevalence. Given its rural-urban transition, economic inequalities, and entrenched cultural norms, the area provides a critical lens for examining how socio-economic and traditional factors contribute to GBV exposure, mitigation, and intervention strategies.

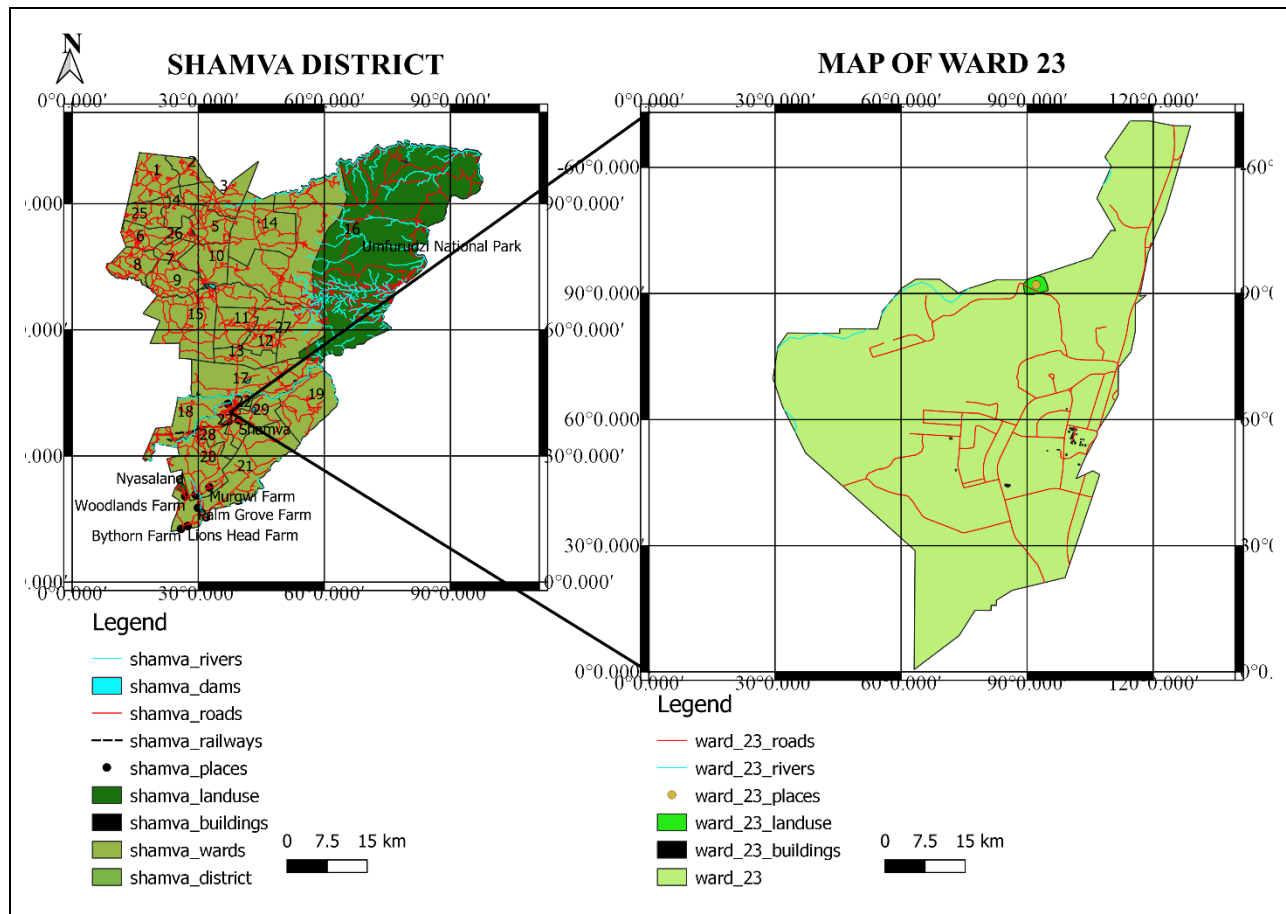


Figure 3.1 Map of Ward 23, Shamva District (Source: Author)

3.3 Research Design

The research utilized a mixed-methods case study design, which integrates both qualitative and quantitative approaches to provide a better understanding of the socio-cultural and economic roots of gender-based violence (GBV) in Ward 23, Shamva District. This design was influenced by the pragmatism approach, this research design allowed for an in-depth exploration of the issue within its specific context, while the mixed-methods approach ensures a balanced analysis of both measurable patterns and lived experiences. Several studies used the case study design in exploring localized social phenomena. For instance, the research by Soicher et al. (2024) utilized the case study research design to examine inclusive and equitable teaching practices in higher education. The research utilized both qualitative and quantitative to provide a comprehensive understanding of how inclusive teaching strategies are implemented across various institutions.

The strength of this case study design lies in its ability to generate detailed, context-rich data that reflects the unique characteristics of the study site (Sharma et al., 2023). Quantitative methods

provide measurable insights into trends, while qualitative methods offer a deeper exploration of participants' perspectives and experiences (Sharma et al., 2023). However, one noted limitation of a case study design is that its findings are often context-specific, making it difficult to generalize results to other settings (Sharma et al., 2023). To add on, combining data from mixed methods can be resource-intensive and requires careful planning.

Besides these limitations, this research design was well-suited to the study's objectives. Focusing on Ward 23, Shamva District, this case study design allowed a thorough exploration of the localized socio-cultural and economic factors contributing to GBV. The mixed-methods approach ensures that both numerical patterns and qualitative insights are captured, providing a better understanding of the problem. This design not only aligned with the study's objectives but also supported the development of tailored, evidence-based interventions for addressing GBV in this specific context.

3.4 Target Population

Casteel and Bridier (2021) defined population refers to the entire group of individuals, objects, or events that share specific characteristics. Researchers often define a target population, which is the specific subset of the population that meets the criteria relevant to the research objectives and is the focus of data collection efforts (Casteel and Bridier, 2021). For this research, the target population included individuals within Ward 23, Shamva District, who are directly or indirectly impacted by gender-based violence (GBV). This encompasses survivors of GBV, community leaders, local health workers, educators and representatives from non-governmental organizations (NGOs) addressing GBV-related issues. Women, as primary survivors, provided crucial insights into their lived experiences and socio-cultural factors sustaining GBV. Men contributed perspectives on societal norms and behaviors, while community leaders offered valuable context regarding traditional practices and their role in addressing GBV. NGOs and other local organizations provided critical knowledge of available resources, interventions and challenges in combating GBV. Targeting this specific group, allowed the study to collect rich, relevant and context-specific data that addressed the research objectives effectively. This focused approach captures diverse perspectives on the socio-cultural and economic factors that add fuel to GBV in Ward 23, Shamva District.

3.5 Sample Size and Sampling Techniques

Sampling refers to the process of selecting a subset of individuals, objects, or events from a larger population to participate in a certain event (Rahman et al., 2022). This subset, called the sample, is chosen to represent the population, enabling researchers to gather data and draw conclusions without studying the entire group. The size of the sample, referred to as the sample size, is the number of participants or units selected for the study (Omair, 2025). It is determined by the research objectives, population characteristics and practical considerations such as time and resources.

3.5.1 Sampling Techniques

This study employed a combination of purposive sampling for qualitative data collection and random sampling for quantitative data collection, ensuring a robust mixed-methods approach to exploring gender-based violence (GBV) in Ward 23, Shamva District. According to Nyimbili and Nyimbili (2024), purposive sampling is a non-probability sampling technique where participants are selected based on their relevance to the research objectives. This technique is particularly suitable for the qualitative component of this study, as it allows the involvement of individuals who have direct or specialized knowledge about GBV, such as survivors, community leaders, healthcare providers and representatives from NGOs. These participants were chosen deliberately to provide rich, contextual insights into the socio-cultural and economic factors influencing GBV. For instance, survivors shared personal experiences, while community leaders discussed the role of cultural norms and practices in shaping attitudes toward GBV. Targeting specific individuals, allowed purposive sampling to ensure that the qualitative data collected is meaningful and aligned with the study's goals.

Wang (2024) posits that, random sampling is a probability sampling technique where participants are selected randomly, giving each member of the target population an equal chance of being chosen. This approach was used for the quantitative component of the study to collect demographic and statistical data related to GBV prevalence and patterns. Random sampling reduced inaccuracy and make sure that the quantitative data represent the broader population in Ward 23. For example, random selection of households was used to collect data on socioeconomic factors and their correlation with GBV occurrences. This technique complements purposive sampling by providing measurable and generalizable insights.

3.5.2 Sample Size

The study's target population includes all individuals identified in Section 3.4 which are survivors of GBV, community leaders, healthcare providers, educators and NGO representatives which is a larger number of participants. Yamene formula was used to calculate the sample size for this study.

Yamene's Formula for Sample Size Calculation

Yamene (1967) provides a statistical formula for calculating sample size based on a given population

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

Where:

- n=Sample size
- N=population size (1 227 households in Ward 23)
- e=margin of error (0.05 for a 95%)

Applying the formula:

$$n = \frac{1\ 227}{1 + 1\ 227(0.05^2)}$$

$$n = \frac{1\ 227}{1 + 1\ 227(0.0025)}$$

$$n = \frac{1\ 227}{4.0675}$$

$$n = 302$$

Thus, Yamene's Formula suggested a sample size of 302 participants for a statistically representative of the study. However, practical challenges such as data saturation, most people were busy with their daily business since the area is a rural-urban setup necessitated the use of a sample size of 30 participants. This sample size strikes a balance between the need for diverse

perspectives and the feasibility of data collection. The qualitative data collection focused on in-depth interviews and focus group discussions with key participants, ensuring the inclusion of rich narratives and experiences. Quantitative data collection involved surveys targeting randomly selected households, allowing the study to gather statistical trends. While the entire population would ideally be studied, this sample size ensures that the research remains manageable and produces reliable, insightful results within practical limitations.

3.6 Data Collection Instruments

As Taherdoost (2021) noted, data collection refers to the process of collecting information from various sources to address a research problem. It involves the use of methods and tools designed to collect relevant data in a structured and reliable manner. In this study, data collection combines qualitative and quantitative approaches to explore the socio-cultural and economic factors contributing to gender-based violence (GBV) in Ward 23, Shamva District. Data collection methods include semi-structured interviews, focus group discussions (qualitative), and surveys (quantitative). These methods are paired with specific instruments to ensure comprehensive data collection.

The semi-structured interview guide serves as the instrument under qualitative method. It is a flexible tool containing open-ended questions designed to explore participants' experiences, perspectives and understanding (Naz et al., 2022). For instance, questions may focus on survivors' personal experiences, community leaders' views on cultural practices, or NGOs' intervention strategies. The guide allows the interviewer to probe deeper into emerging topics as needed. In this study, interviews were conducted individually with 1 survivor, 1 community leader and 1 NGO representatives to obtain rich, detailed narratives that align with the research objectives. The interviews were conducted on 30 April 2025, and the number achieved was influenced by data saturation, where no new themes emerged.

The discussion guide is the instrument for focus group discussions under qualitative method. It has thematic prompts and questions designed to foster group interaction and explore shared views (Geampana and Perrotta, 2025). This method is particularly effective in revealing collective attitudes and community dynamics. In this study, the focus group was conducted with only 7 community members on 2 May 2025. Participants managed to discuss issues like cultural norms, traditions like lobola, and they shared experiences related to GBV. The discussion guide ensured

that participants remain focused on relevant topics while allowing for dynamic and interactive exchanges. According to Susanto et al., (2024), focus group discussions provide insights that complement individual interviews by capturing collective perspectives.

Surveys under quantitative method uses the survey questionnaire which is the instrument for this method. It contains structured questions, including closed-ended items and Likert-scale measures, designed to collect numerical data (Manstein et al., 2023). For example, the questionnaire may ask participants to rate their agreement with statements about cultural norms or identify specific challenges related to economic vulnerabilities. In this study, questionnaires were distributed randomly to 15 participants on 29 April 2025 to obtain representative and measurable insights into the research variables and only 10 questionnaires were returned answered.

3.6.1 Piloting the Instruments

According to Muasya and Mulwa (2023), to ensure effectiveness and reliability, all instruments such as interview guides, discussion guides, and survey questionnaires were tested. They were piloted or tested with a small group of participants. Feedback from the pilot study was used to refine the instruments by rephrasing ambiguous questions, removing redundant items and improving clarity. Piloting helped to verify that the instruments were suitable for capturing the data needed to answer the research questions (Muasya and Mulwa, 2023).

3.6.2 Validity of the Instrument

The validity of the instruments was established through expert reviews and alignment with the study objectives (Barnett et al., 2023). For example, research instruments were reviewed by the research project supervisor, so that capture information that answers the research questions. The interview and discussion guides were designed to capture themes identified in the literature review, such as the influence of cultural norms and economic factors on GBV. The survey questionnaire was evaluated for content validity, ensuring that its items accurately reflect the key variables of the study. Aligning the instruments with established research frameworks and objectives, the study ensured that they measure what they are intended to measure.

3.6.3 Reliability of the Instrument

According to Barnett et al. (2023), reliability is ensured by maintaining consistency in the administration of the instruments. For interviews and focus group discussions, the researcher followed a standardized procedure using the same guides for all participants. For surveys, uniform

instructions and response options provided to reduce variability. To add on, the piloting process helped to refine the instruments, this ensured that consistent and dependable results across different contexts and participants.

3.7 Data Collection Procedure

This section outlines the process for collecting data, highlighting the strategies employed to ensure a systematic, reliable and ethical approach. Guided by the mixed-methods design, these procedures are tailored to combine both qualitative and quantitative methods effectively.

3.7.1 Ethical Approval and Permissions

Ethical considerations are the cornerstone of the study. Before any data collection commenced, ethical approval was sought from relevant institutional review boards such as the Department of Sustainable Development (Bindura University of Science Education), Local Government and Ministry of Women Affairs at district level and the Councilor of Ward 23, Shamva District. This ensured that the research adhered to principles of respect, confidentiality and non-maleficence. To add on, permissions were also obtained from local authorities and community leaders in Ward 23. Engaging these stakeholders early helped to foster trust, cultural sensitivity and cooperation from participants.

3.7.2 Recruitment of Participants

Participants were selected using a combination of purposive sampling for qualitative methods and random sampling for quantitative methods. For qualitative data collection, specific individuals who could provide insightful information such as GBV survivors, community leaders, and NGO representatives were identified and approached. For the quantitative surveys, random selection of households was employed to ensure diverse representation across the community. Recruitment strategies emphasized voluntary participation, clear communication of the research purpose and informed consent.

3.7.3 Pilot Testing of Instruments

After selecting participant, testing of instruments with a small group of participants was done to ensure validity and reliability of the instrument. This involved the testing of semi-structured interview guide, focus group discussion guide and survey questionnaire. Feedback from these participants helped to refine the questions for clarity, relevance and cultural appropriateness. For example, ambiguous questions were rephrased, redundant items were be removed and instructions

were simplified to ensure the instruments were user-friendly. This step enhanced the quality of the instruments and reduces errors during the main data collection process.

3.7.4 Conducting Semi-structured

Semi-structured interviews were conducted individually in private settings, ensuring participants' confidentiality and comfort. Each interview followed the pre-designed guide but allowed for flexibility to explore topics that emerged during the conversation. For example, participants elaborated on cultural norms, economic hardships, and intervention strategies. The researcher took notes and recorded the sessions (with consent) to capture responses accurately for subsequent analysis. This method was particularly useful for obtaining in-depth, personal narratives.

3.7.5 Conducting Focus Group Discussions

Focus group discussions were done to explore collective attitudes and community dynamics related to GBV. These discussions included 8 participants per group and a structured discussion guide was used. The guide ensured that key topics, such as the role of traditions like lobola or shared experiences with local interventions, were covered systematically. The researcher encouraged interaction among participants while maintaining focus on the study's objectives. This method complemented interviews by providing insights into communal perspectives that might not emerge in individual settings.

3.7.6 Administering Surveys

Survey questionnaires were distributed randomly to selected households in Ward 23. Participants were guided through the completion process, with the researcher to clarify any questions. Surveys collected quantitative data on GBV prevalence, socio-economic conditions and awareness of cultural norms. For instance, participants rated their agreement with statements regarding the acceptability of certain behaviors, providing measurable data for trend analysis. The surveys provide a broad overview of patterns complementing the qualitative data.

3.7.7 Ensuring Confidentiality

At every stage of data collection, strict measures were employed to protect participants' anonymity and confidentiality. Consent forms were signed by all participants, outlining their rights, the voluntary nature of participation and the purposes for which their data would be used. Moreover, identifying information was coded or excluded from the final data to ensure privacy.

3.7.8 Data Storage and Organization

All collected data from interview recordings, focus group notes and completed surveys, was securely stored in both physical and digital formats. Digital files were password-protected and physical documents were kept in locked storage to prevent unauthorized access. Data was organized systematically to facilitate smooth analysis, with qualitative and quantitative data stored separately but cross-referenced for integration during analysis.

3.8 Data Analysis Techniques

Data analysis is the systematic process of organizing, examining and interpreting collected data to extract meaningful insights that address the research questions (Popenoe et al., 2021). This section describes the techniques employed to analyze the data gathered through both quantitative and qualitative methods in this research. Each technique is defined and its application to the study explained, ensuring that the findings are reliable and aligned with the objectives of understanding gender-based violence (GBV) in Ward 23, Shamva District.

3.8.1 Quantitative Data

Quantitative data collected through surveys was analyzed using techniques such as descriptive statistics, and correlation analysis. Quantitative data was processed using statistical software like Excel to ensure precision and reliability in the analysis.

3.8.1.1 Descriptive Statistics

Descriptive statistics include summarizing the basic features of the data to provide an overview of the sample and key variables (Ghanad, 2023). Techniques such as frequencies, percentages and mean values were used to represent the prevalence of GBV and the socio-economic conditions of respondents in Ward 23. For example, frequencies shows the percentage of aged group that is experiencing GBV. In this study, descriptive statistics helped to present a clear picture of the socio-economic landscape and patterns of GBV, ensuring that the findings are easily interpretable.

3.8.1.2 Correlation Analysis

Wells et al. (2024) highlights that, correlation analysis assesses the strength and direction of relationships between variables. This technique reveals how changes in one variable are associated with changes in another. For instance, the study used correlation analysis to determine whether there is a fundamental relationship between unemployment status and the frequency of GBV

incidents. Positive or negative correlations provided valuable insights into the socio-economic factors contributing to GBV, offering ideas for tailored interventions.

3.8.2 Qualitative Data

Qualitative data obtained through semi-structured interviews and focus group discussions was analyzed using thematic analysis, content analysis and narrative analysis. Qualitative analysis ensured that the lived experiences and perspectives of participants were captured in their complexity and aligns with the study's mixed-methods design.

3.8.2.1 Thematic Analysis

Thematic analysis was used to identify, analyze and interpret patterns or themes within qualitative data (Christou, 2022). This technique involves transcribing the interviews and focus group discussions verbatim, coding the text and grouping similar ideas into categories. For example, themes such as economic stress, cultural practices and community response to GBV may emerge. Thematic analysis was employed in this study to uncover recurring concepts and understand the socio-cultural and economic factors influencing GBV, ensuring that participant narratives are systematically explored and interpreted.

3.8.2.2 Content Analysis

Content analysis focuses on the frequency and context of specific words, phrases, or ideas within the data (Vears and Gillam, 2022). This technique helps to quantify qualitative data by analyzing recurring terms or concepts. For example, in this research, participants' used of terms like power imbalance or cultural norms which were used to understand their prominence and significance in shaping GBV dynamics. Content analysis complements thematic analysis by adding structure and depth to the exploration of key concepts.

3.8.2.3 Narrative Analysis

According to Josselson and Hammack (2021), narrative analysis explores the structure and meaning of participants' personal stories. It captures how individuals describe their experiences and interpret the socio-cultural and economic factors influencing GBV. For instance, in this study, survivors' narratives highlighted the impact of economic dependency or cultural expectations on their experiences. Narrative analysis was employed to provide rich, context-driven insights, adding depth and emotional nuance to the study's findings.

3.9 Data Presentation

Data presentation refers to the process of organizing and displaying analyzed data in a structured format to facilitate understanding and interpretation of the findings (Dawadi et al., 2021). It bridges the gap between data analysis and meaningful conclusions, enabling the audience to grasp key insights. Effective data presentation ensures clarity, coherence and accessibility, making it easier to link results with the research objectives. In this study, both quantitative and qualitative data were presented to provide a better understanding of the socio-cultural and economic factors influencing gender-based violence (GBV) in Ward 23, Shamva District.

3.9.1 Quantitative Data Presentation

Quantitative data presentation involves showcasing numerical findings derived from the surveys in a visual and organized manner (Li and Zhang, 2022). This presentation focuses on trends, distributions, and relationships among variables, enabling the audience to interpret the measurable aspects of the research. In this study, the findings included the prevalence of GBV, socio-economic profiles of participants, and relationships between variables like income levels and GBV occurrences. The following methods were used for quantitative data presentation:

3.9.1.1 Tables

Tables are a structured way of organizing data into rows and columns, making complex numerical information easier to compare and interpret (Bartram et al., 2021). In this study, tables were used to present frequencies, percentages, and descriptive statistics related to key variables. For instance, a table was used to display the demographic characteristics (for cross-checking see table 4.1) Tables allow for detailed precision and are particularly effective for summarizing multiple variables in one place.

3.9.1.2 Pie Charts

A pie chart is a circular statistical graphic used to represent data proportion within a dataset (Storytelling with data, 2020). Each segment of the pie chart corresponds to a category, with the size of each slice representing its relative contribution to the whole. They are effective for visualizing percentages distribution, and categorical data, making complex numerical insights easier to interpret (Storytelling with data, 2020). In this research, pie charts were utilized in Chapter 4 to visually present quantitative data, especially the distribution of GBV prevalence, cultural influences, and intervention effectiveness. These charts helped to illustrate the percentage

breakdown of participant responses, presenting a clear contrast among variables, aiding in the comparative analysis of GBV trends. Their utilization enhanced the statistical presentation of the findings, making it easier to recognize key patterns and disparities in gender-based violence within Ward 23.

3.9.2 Qualitative Data Presentation

According to Tracy (2024), qualitative data presentation focuses on organizing and displaying rich, descriptive narratives to capture the depth and complexity of participants' lived experiences. This presentation will highlight themes, patterns and individual perspectives obtained from semi-structured interviews and focus group discussions. In this study, qualitative findings will explore themes such as cultural norms, economic challenges and the impact of interventions on GBV. The following methods will be employed for qualitative data presentation:

3.9.2.1 Thematic Summaries

Thematic summaries provide a structured narrative of the recurring themes identified during data analysis (Robinson, 2022). For example, this study might identify themes like economic stress as a driver of GBV or the influence of cultural expectations on victim responses. These summaries will include detailed explanations of each theme, supported by examples and contextual interpretations to convey the essence of participants' responses. This method ensures that qualitative findings are coherent and align with the research questions.

3.9.2.2 Verbatim Quotes

Verbatim quotes from participants serve as direct evidence to illustrate and validate the identified themes (Sheard, 2022). For instance, a survivor of GBV might describe how cultural practices like lobola have influenced their experiences, providing authentic and emotional depth to the findings. These quotes will be integrated into the thematic summaries to ensure that the participants' voices are represented and their experiences are understood in their own words.

3.9.2.3 Thematic Tables

Thematic tables are applied to present a concise summary of recurring themes and their corresponding subthemes or examples (Robinson, 2022). For example, a table may list the overarching theme Cultural Influences alongside subthemes such as Gender Roles and Traditional Practices, with supporting participant quotes or observations. This approach combines narrative

depth with visual organization, enabling readers to grasp the key themes and their connections at a glance.

3.10 Ethical Principles

Ethics refers to the principles and standards that guide behavior and decision-making to ensure fairness, integrity, and respect for individuals. In research, ethics plays a critical role in safeguarding the rights, dignity, and well-being of participants, while maintaining the credibility and reliability of the study. This section outlines the ethical principles adhered to in this study, ensuring that the research on gender-based violence (GBV) in Ward 23, Shamva District is conducted responsibly and respectfully.

3.10.1 Voluntary Participation and Informed Consent

Participation in this study is entirely voluntary. Participants will be provided with detailed information about the research objectives, procedures, potential risks and benefits, enabling them to make an informed decision about their involvement. Informed consent forms will be signed by all participants before data collection begins, ensuring that they understand their rights, including the ability to withdraw from the study at any time without repercussions (Pietrzykowski and Smilowska, 2021).

3.10.2 Confidentiality and Anonymity

Strict measures will be implemented to protect participants' privacy and identities. Personal identifiers will be either removed or coded to ensure anonymity and data is stored securely in password-protected files and locked physical storage. Participants will be assured that their responses will be used solely for research purposes and will not be disclosed to unauthorized parties.

3.10.3 Non-maleficence

The principle of non-maleficence ensures that the study does not cause harm to participants. Sensitive topics, such as experiences of GBV, are approached with care and empathy. The researcher will create a safe and supportive environment for participants during interviews and focus group discussions, ensuring their emotional well-being throughout the process. For example, we doing interviews or group discussions with women, the researcher will make sure that males will be not allowed to attend such discussions.

3.10.4 Cultural Sensitivity

Given the localized focus of this study, cultural sensitivity is paramount. The researcher will respect the cultural norms and practices of Ward 23 while ensuring that these will be critically examined to understand their role in GBV. Permissions will be obtained from community leaders, and the study will be conducted in ways that align with the community's values and expectations.

3.10.5 Ethical Review and Approval

This research will be reviewed and approved by relevant institutional ethics boards to ensure compliance with ethical standards. The approval process involved a thorough examination of the study's objectives, methodology and potential impacts on participants, guaranteeing that the research meets ethical requirements (Morina, 2021). For example, the researcher will seek review and approval from Bindura University, Local authorities, Local Community Leaders and the Community as well.

3.10.6 Integrity and Transparency

The researcher adheres to the principles of honesty and transparency throughout the research project. Data collection and analysis will be conducted rigorously and reported accurately, ensuring that the findings will reflect the reality of GBV in Ward 23 without bias or manipulation.

3.11 Summary

This chapter outlined a comprehensive research methodology that will be used to explore the socio-cultural and economic factors influencing gender-based violence (GBV) in Ward 23, Shamva District. It began by explaining the pragmatic paradigm, which underpins the mixed-methods approach employed in this study. The research design, a case study integrating both qualitative and quantitative methods, was justified as an effective means to explore the complex and context-specific nature of GBV. The target population and sampling techniques were described, with purposive and random sampling methods ensuring the inclusion of diverse and relevant participants. The chapter further elaborated on the data collection instruments, including semi-structured interviews, focus group discussions, and survey questionnaires, and the steps taken to ensure their validity and reliability. A systematic procedure for data collection was detailed, highlighting ethical considerations such as informed consent, confidentiality, and cultural sensitivity. Finally, data analysis techniques and data presentation for both quantitative and qualitative data were explained to provide a comprehensive understanding of the research problem.

The next chapter will present the findings derived from the data collected, offering insights into the socio-cultural and economic dynamics of GBV in Ward 23.

CHAPTER 4: DATA PRESENTATION, INTERPRETATION, AND DISCUSSION

4.1. Introduction

This chapter presents data, interpret, and discuss the research findings on socio-cultural and economic roots of gender-based violence in Ward 23, Shamva District, Mashonaland Central. The chapter will start by providing the participants response rate followed by the demographic characteristics. It will progress to the presentation of the findings related to research objectives and ending with discuss and the summary. The findings are categorized based on the following research's objectives.

1. To assess the prevalence and patterns of gender-based violence (GBV) among women aged 18-49 in Ward 23, Shamva District.
2. To investigate the impact of women's economic and social empowerment on the occurrence and mitigation of GBV in Ward 23.
3. To develop context-specific strategies for integrating GBV prevention into community programs in Ward 23.

4.2 Response Rate

The response rate shows the level of participants achieved in the research. A total of 20 participants achieved, out of 30 target sample size of participants. 15 questionnaires were distributed and only 10 were answered, 3 interviews were conducted due to saturation, where no new themes emerged, and the focus group discussion was conducted with 7 participants. This represents a response rate of 67%, as shown in figure 4.1 below.

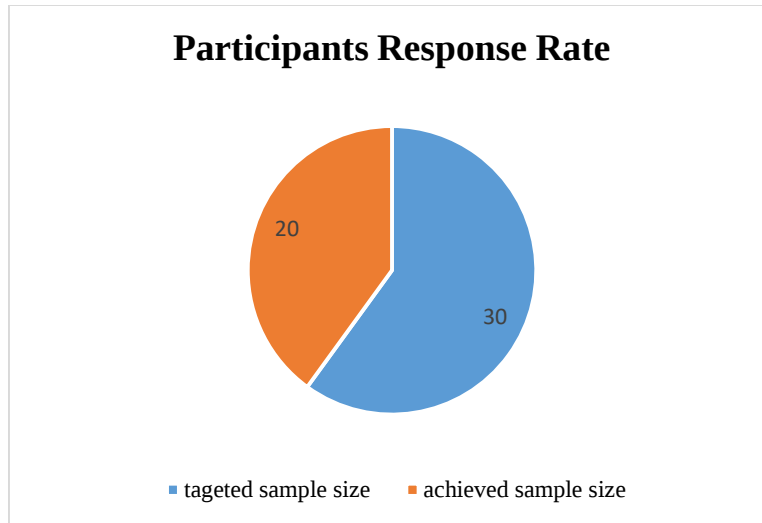


Figure 4.1. Participants Response Rate

The response rate indicated a strong level of participation among the targeted respondents with a 67%. This provided a substantial dataset for both quantitative analysis and qualitative exploration of gender-based violence (GBV) in Ward 23, Shamva District. This level of participation allows for a better statistical assessment and in-depth thematic insights into socio-cultural and economic factors influencing GBV. Although the response rate did not reach 100%, there many factors that contributed to non-participation such as, time constraints among potential respondents, reluctance to disclose personal experience, data saturation, and sensitivity surrounding GBV discussions.

4.3 Demographic Characteristics

This section will present the findings about demographics of participants. It is vital to understand these demographics as they are significant in analyzing the socio-cultural and economic factors influencing GBV in Ward 23, Shamva District. There are variables such as gender, age, marital status, education level, and employment status which are going to be explored. This section provides a framework for interpreting patterns of vulnerability, agency, and social structures within the community. Table 4.1 showcase the diverse composition of respondents, offering insight into how different groups experience and perceive GBV in this context.

Table 4.1. Participants Demographic Characteristics

Demographic factor	Categories	Number of participants	Percentage (%)
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Gender	Male	5	25%
	Female	15	75%
Age Group	18-24	4	20%
	25-34	5	25%
	35-44	7	35%
	45-49	4	20%
Marital Status	Single	4	20%
	Married	6	30%
	Divorced	7	35%
	Widowed	3	15%
Education Level	No Formal education	3	15%
	Primary level	6	30%
	Secondary	6	30%
	Tertiary level	5	25%
Employment Status	Employed	5	25%
	Self-employed	8	40%
	unemployed	7	35%

4.4 Findings of Objective 1

To assess the prevalence and patterns of gender-based violence (GBV) among women aged 18-49 in Ward 23, Shamva District.

This section presents findings related to GBV prevalence, forms, frequency, reporting trends, and socio-economic influences in Ward 23, Shamva District. The analysis combines quantitative results derived from survey responses with qualitative insights from interviews.

4.4.1 Extent of GBV in Ward 23

This section will provide findings of GBV prevalence among women aged 18-49 in Ward 23. These findings will help to understanding GBV prevalence as it provides insight into its scale and urgency within the community.

Table 4.2. GBV Prevalence among Aged 18-49 in ward 23

GBV Experience	Frequency (n=15)	Percentage (%)
Experienced GBV	11	73%
Did not experience GBV	4	27%
Total	15	100%

From the table 4.2 the findings shows that 73% of participants reported that they experienced GBV, highlighting a high prevalence of GBV among women aged 18-49 in Ward 23. There is also a part of women who reported that they did not experience GBV. When discussing about the high rate of GBV during focus group discussions, some of the women air out why women failed to report. One of the respondents said that:

“...in this community, people see violence as a normal thing. Some women do not report it because they feel nothing will change after reporting.”

4.4.2 Types of GBV Experienced

This section will present how GBV manifests in various forms, including physical, emotional, sexual, and economic abuse.

Table 4.3. Types of GBV Experienced

GBV Type	Frequency (n=15)	Percentage (%)
Physical violence	6	40%
Emotional abuse	3	20%
Sexual abuse	2	13%
Economic abuse	4	27

Most women in Ward 23, Shamva District are experiencing physical violence. From the findings it was reported 40%. During the interviews most of the respondents mentioned physical violence as the most experienced form of GBV. One of the respondents said that:

“...my husband used to beat me every day, but I was told to be strong and endure it for the sake of the family.”

4.4.3 Frequency and Context of GBV Occurrence

This section will present how often GBV occurs and it helps to understand its persistence and whether intervention measures are effective.

Table 4.4. Frequency of GBV Occurrences among Participants

Frequency Scale	Respondents (%) (n=15)
Rarely	13%
Occasionally	27%
Frequently	40%
Very Frequently	20%

40% reported experiencing GBV frequently, including systematic abuse patterns. 20% endure GBV very frequently, reinforcing the lack of effective legal protection. During the interviews highlights the cycle of abuse where victims normalize GBV due to societal pressure. One of the participants had to say:

“...we always fight and he apologizes. I stay even after several fights because I do not know what else to do.”

4.4.4 Employment Status and GBV Prevalence

This part will present finding about the relationship between employment status and GBV prevalence, there is also identification of patterns that influence vulnerability to GBV.

Table 4.5. GBV Prevalence among Women by Employment Status

Employment Status	Total Women (n=15)	Experienced GBV (n=11)	Did not Experience GBV (n=4)	GBV Prevalence (%)
Employed	3	1	2	33%
Self-Employed	5	3	2	60%
Unemployed	7	7	0	100%
Total	15	11	4	

From the findings, unemployed women had the highest GBV prevalence with 100%. All seven women experienced abuse. Self-employed women reported GBV cases in 60% of instances, showing some protective effect but not full security. Employed women had the lowest GBV prevalence of 33%. Showcasing the idea that financial independence reduces GBV vulnerability. During the discussions respondents shared experiences on how being unemployed transpires GBV. Participants also mentioned something about the power imbalance caused by economic dependence, forcing women to stay in abusive marriages despite wanting to leave. One of the women said that:

“...I felt trapped in my abusive marriage because I had no money. Leaving was not an option.”

During interviews, respondents highlighted the reduction or few cases of GBV being experienced by employed women as compared to those without stable income. One of respondents mentioned that:

“...when I started working, everything changed, I no longer ask my husband to buy food or pay schools fees. The abuse ended the very day I stopped asking him about his pay and now he values me as his wife because I am bringing something on the table.”

Table 4.6. GBV Prevalence among Women by Marital Status

Marital Status	Total Women (n=15)	Experienced GBV (n=11)	Did not experience GBV (=4)	GBV Prevalence
Single	1	0	1	0%
Widowed	3	1	2	33%
Married	4	3	1	75%
Divorced	7	7	0	100%
Total	15	11	4	

All divorced women experienced GBV with 100%. This highlighted their heightened vulnerability. Married women reported GBV with 75% cases. This showcased intimate partner violence is common. Widowed women had a lower GBV prevalence rate of 33%. This shows that there is

some risk but lower exposed than married and divorced women. Single women did not report any GBV cases, maybe due to limited exposure to domestic abuse within partners. During group discussions, participants highlighted how economic dependence often restricts escape routes for victims. One of the participants said that:

“...marriage made me exposed to abuse because financial dependence made leaving difficult.”

During interviews, respondents explained why GBV intervention programs should focus on economic empowerment. One of the respondents said that:

“...my husband controlled every aspect of my life, because he knew I could not afford to leave. Even if he abused me, I did not leave.”

Employment status fundamentally influences GBV vulnerability, with higher unemployment linked to higher GBV prevalence. Self-employment provides some protection, but not as much as formal employment. Divorced and married women remain more vulnerable. This suggests that while economic freedom reduces GBV exposure, power dynamics within marriages still play a vital role in shaping women’s vulnerability. One of the married women said that:

“...I thought having a job can reduce or end abuse, but I am still abused. It clearly shows that it is not just about money, it’s also about power.”

4.5 findings of Objective 2

To investigate the impact of women’s economic and social empowerment on the occurrence and mitigation of GBV in Ward 23.

The section will provide findings that examined how women’s access to economic resources, employment opportunities, and social support affects both GBV prevalence and mitigation strategies in Ward 23. The findings will highlight whether empowerment reduces GBV risks, strengthens women’s capacity to resist abuse, and enhances community-driven interventions.

4.5.1 Economic Empowerment and GBV Mitigation

This section will present findings about how employment status, access to financial resources, and economic barriers impacts GBV occurrence and mitigation in Ward 23.

Table 4.9. Ratings on Economic Empowerment and GBV

Statement	Agree (%)	Strongly Agree (%)	Total Agreement (%)
Women with economic independence are less vulnerable to GBV	80% (16/20)	20% (4/20)	100%
Economic barriers increase the risk of GBV for women	85% (17/20)	15 (3/20)	100%
Empowerment programs help reduce GBV	75% (15/20)	25% (5/20)	100%

Economic barriers had the highest agreement with 85%, providing that financial constrains increase GBV vulnerability. Empowerment programs received the strongest response which is Strongly Agree with 25%. During discussions respondents shed light on the links between financial dependence and prolonged exposure to GBV. One of the respondents mentioned that:

“...not having a job made me stay in an abusive relationship. If I had a job earlier, I would not have suffered for so long.”

Women’s financial literacy training helps to them to break cycles of economic dependence. During interviews, the findings shows that intervention programs play a mojour role in GBV prevention. One of the participants said that:

“...after I joined mukando (microfinance), it reduced my vulnerability to financial control and violence.”

Limited job opportunities restrict financial independence. During focus group discussion participants raised the issue about economic empowerment alone is not enough, social shifts must accompany financial independence. One of the respondents said that:

“...some of the women have better paying jobs, but they still suffer from abuse. They must give their salaries to their husbands. Some men still control everything.”

4.5.2 Social Empowerment and Resistance against GBV

This section will present findings from examined role of education, advocacy, and social networks in reducing GBV occurrence and promoting resilience among women in Ward 23. Social empowerment strengthens women’s ability to resist GBV by enhancing awareness, access to support networks, legal protection, and community advocacy.

Table 4.10. Ratings on Social Empowerment and GBV

Statement	Agree	Strongly Agree	Total Agreement
Women with access to education are more likely to resist GBV	75% (15/20)	25% (5/20)	100%
Social support networks help mitigate GBV	80% (16/20)	20% (4/200)	100%
Community based advocacy strengthens GBV prevention	70% (14/20)	30% (6/20)	100%

From Table 4.10, social support networks had the highest agreement of 80%, reinforcing their role in GBV prevention through emotional and legal support. Education was rated highly 75%, showing its impact on improving women’s resistance against GBV. Community advocacy had the highest proportion of Strongly Agree responses of 30%, showing its perceived effectiveness in policy influence and awareness-raising efforts. During focus group discussions participants highlighted that social empowerment strengthens women’s ability to challenge GBV norms. One of the participants mention that:

“...most of the women who know their rights and have support, they have the ability to fight back against abuse.”

During interviews, respondents reviewed that education strengthens women’s ability to resist GBV. Women with education are more likely to recognize GBV and seek intervention. One of the respondents said that:

“...an educated women won’t be abused so easily because they know a lot of policies that protect us as women.”

Women’s group and NGOs provide critical intervention support for GBV survivors. During discussion participants mentioned that community-driven empowerment efforts are more protective. One of the participants highlighted that:

“...with these social support, many women are being helped. Social networks give them courage to speak up.”

During interviews participants point out the issue of public campaigns and awareness programs help shift harmful cultural attitudes. Their views reflected the importance of advocacy in challenging GBV acceptance. One of the respondents said that:

“...I think if the community speaks out against GBV, we can have a faster change.”

4.5.3 Barriers to Women’s Empowerment in GBV Prevention

This section presents findings from three examined barriers affecting women’s ability to prevent and resist GBV in Ward 23. While economic and social empowerment help mitigate GBV, many structural, cultural, and institutional barriers still prevent women from fully realizing their independence.

Table 4.11. Ratings on Barriers to Women’s Empowerment

Barrier		Agree (%)	Strongly Agree (%)	Total Agreement (%)
Cultural norms prevent women from challenging GBV		70% (14/20)	30% 6/20)	100%

Economic dependence is a major reason women stay in abusive marriages	75% (15/20)	25% (5/20)	100%
Weak institutional support limits GBV prevention efforts	65% (13/20)	35% (7/20)	100%

From Table 4.11, economic dependence had the highest agreement of 75%, showing that financial limitations hinder women from leaving abusive marriages. Cultural norms had 70% agreement, proving that social expectations discourage women from challenging GBV. Institutional gaps had the highest Strongly Agree response of 35%, showing that policy enforcement remains weak, limiting GBV prevention efforts. During discussions respondents highlighted that there are multiple barriers combine to limit women’s empowerment and GBV resistance. One of the respondents said that:

“...whenever I decided to leave my marriage because of abuse, social traditions and financial struggles keep me trapped in my abusive marriage.”

During interviews, participants air out that cultural norms delay GBV intervention efforts. Social expectations enforce male dominance, discouraging women from speaking out. One of the participants mentioned that:

“...I want to report GBV, elders may advise me to stay and fix my marriage instead of leaving.”

Limited access to credit and financial resources restricts women’s independence. Many women lack financial literacy, making them economically dependent on their husbands. During the interviews participants mentioned that, financial stress forces women to tolerate abuse to ensure survival. One of the participants mentioned that:

“...most women stay in abusive relationships because they fear homelessness and hunger.”

During focus group discussion, respondents raised the issue of urgent need for stronger institutional frameworks to support GBV survivors. Weak enforcement of GBV laws leaves survivors unprotected. Limited access to legal aid prevents women from seeking justice. One of the respondents highlighted that:

“...most of the times, when a women report abuse, the legal action is very slow. Many just give up.”

4.6 Findings of Objective 3

To develop context-specific strategies for integrating GBV prevention into community programs in Ward 23.

This section present findings from examined community-driven approaches for GBV prevention strategies into Ward 23’s social and economic programs. The findings will highlight the effectiveness of education, economic empowerment, legal enforcement, and male engagement in reducing GBV occurrences.

4.6.1 Strengthening Local GBV Awareness and Education Programs

This subsection will provide findings about the effectiveness of community and education as fundamental tools for shifting social attitudes and challenging harmful gender norms.

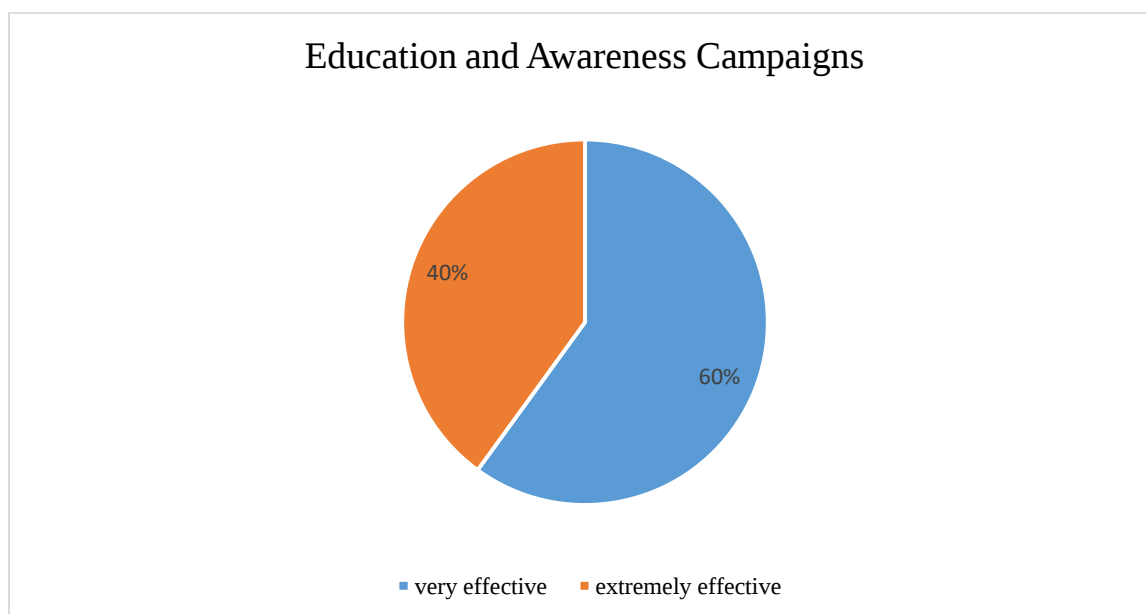


Figure 4.2. Ratings on Education and Awareness Campaigns

Participants rated education campaigns as effective, showing the importance of awareness in GBV prevention. Campaigns from radio, posters and school-based education fosters long-term attitudinal shifts, promoting gender equality training for youths. During discussions, participants confirmed that education is one of the significant tools in preventing GBV. One of the respondents mentioned that:

“...it is important to do educational campaigns because when people understand GBV, they can challenge harmful customs and protect survivors.”

4.6.2 Enhancing Economic Support Systems for GBV Survivors

This subsection will provide findings about the effectiveness of economic empowerment as a GBV reduction tool.

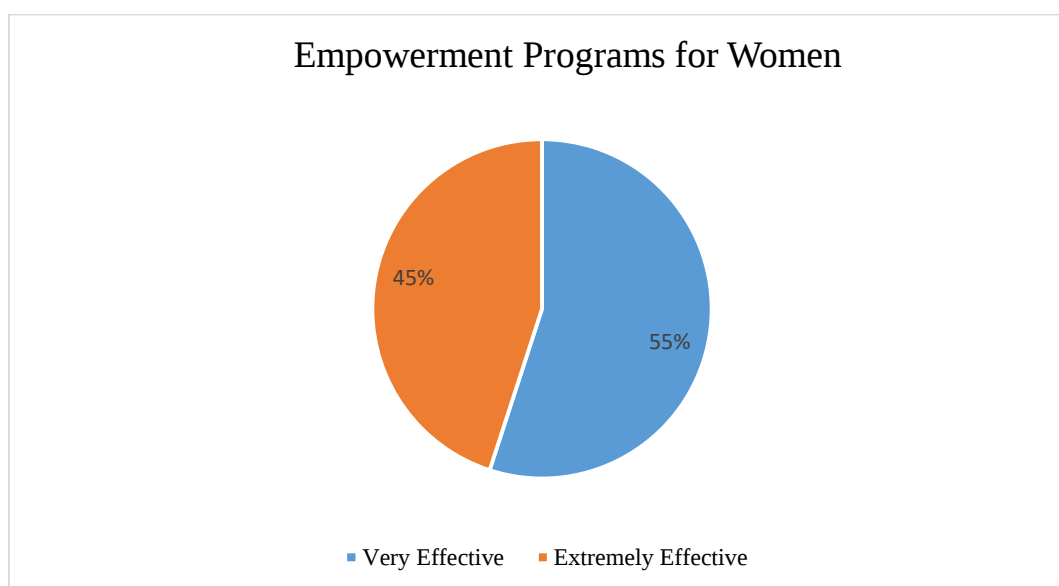


Figure 4.3 Ratings on Economic Empowerment Strategies

Respondents agreed on empowerment programs as essential for GBV prevention. Microfinance programs improve long-term financial stability. From the interviews, participants explained that, financial independence reduces GBV risks. One of the respondents mentioned that:

“...most women who are in microfinance projects such as Mukando, market gardening and vending earns their money. They face little or no abuse.”

4.6.3 Strengthening Social and Legal Protection Mechanisms

This subsection will present findings the effectiveness of policy enforcement in GBV response efforts.

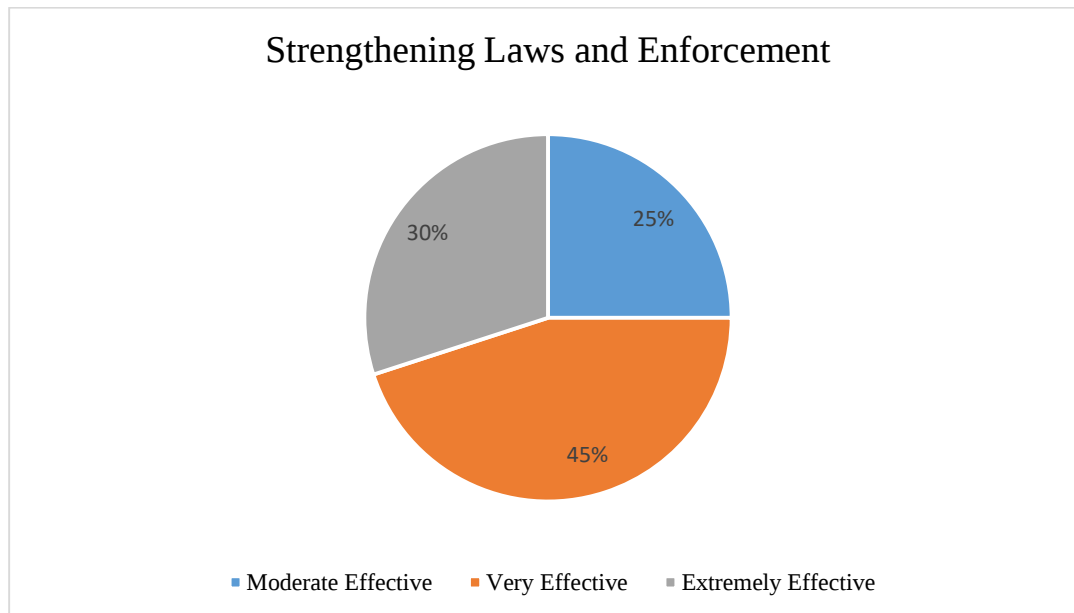


Figure 4.4. Ratings on Legal and Policy Intervention Strategies

From Figure 4.4 above, laws are viewed as important, weak enforcement reduces their impact. Only 30% of 20 participants rated them as Extremely Effective. From the discussion conducted, there is the need for stronger institutional frameworks to support GBV survivors. One of the respondents said that:

“...I am sure that if laws were enforced properly, women would not be afraid to report abuse and suffer the way they are suffering.”

4.6.4 Integrating Men and Community Leaders in GBV Prevention Efforts

This subsection provide findings about the effectiveness of engaging men and community elders or leaders in prevention efforts. GBV prevention requires engaging men, boys, and local leaders in gender equality dialogues.

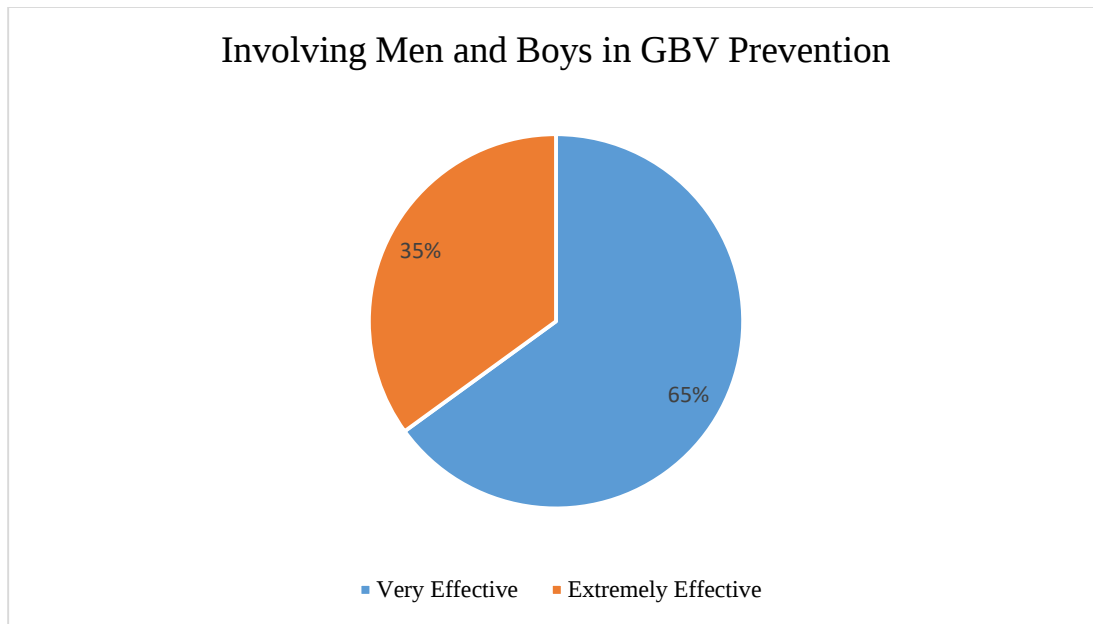


Figure 4.5. Rating on Male Engagement in GBV Prevention

From Figure 4.5, men involvement ranked as one of the best effective GBV prevention strategies with 65% (Very Effective). Mentorship programs targeting boys promote respectful marriages, shifting gender attitudes. During interviews, participants highlighted the importance of inclusivity in GBV prevention strategies. One of the participants said that:

“...including men in anything that has to do with GBV reduction is important. They need to be part of the change, otherwise GBV will continue.”

4.7 Discussion of Findings

This part discusses the study’s finding in relation to reviewed literature on socio-cultural and economic roots of GBV in Ward 23, Shamva District. The section will provide similarities and differences with the existing studies reviewed in chapter 2, and explanation will be given for such differences. This section is structured basing the study’s objectives.

4.7.1 Discussion of Objective 1

The study found that GBV prevalence was high among unemployed women with 100% compared to employed women with 33%, reinforcing economic dependency as a risk factor. Cultural and traditional norms significantly influenced GBV tolerance, with bride price (lobola), child marriages, and gendered role reinforcing male dominance. GBV reporting was limited due to fear of social stigma and weak legal protections. Garcia-Moreno et al. (2020) mentioned that, one in

three women globally experience GBV, aligning with Ward 23 findings showing widespread of GBV occurrence driven by cultural and economic inequalities. Jewkes et al. (2021) emphasized how patriarchal tradition in Southern Africa reinforce GBV, matching local findings that lobola which was rated 25% (4/5) maintains male control in marriages. The Zimbabwe Demographic and Health Survey (2019) reported that 35% of women aged 15-49 experience physical violence, reinforcing Ward 23 findings that GBV is deeply embedded in societal structures. While the broader literature suggests legal frameworks improve GBV prevention (Ellsberg et al., 2018), Ward 23 findings reviewed weak enforcement with only 30% rated effective, limiting GBV intervention success.

4.7.2 Discussion of Objective 2

Research findings shows that financial independence reduces GBV vulnerability, with empowered women facing fewer abuse cases compared to economically dependent women. Economic barriers were rated 75% ranked as the biggest challenge, proving financial constraints hinder women from leaving abusive marriages. Social support networks were highly effective in GBV mitigation with 80%, reinforcing the importance of community interventions. The UN Spotlight Initiative (2021) emphasizes economic empowerment as crucial in GBV prevention, aligning with Ward 23 findings where women's financial independence lowers GBV risks. Chilongozi (2022) found that microfinance projects in Malawi improve women's ability to resist GBV, matching with research findings, self-employment (60%) was more protective than unemployment (100%). The Musasa Project (2021) promotes women's shelters and economic aid, supporting Ward 23 data, social empowerment with the rating of 80% helps to mitigate GBV. While literature highlights legal enforcement as a key (Tontoh, 2024), Ward 23 findings suggest economic dependency is a bigger factor, indicating that localized financial solutions can be more impactful than legal approaches.

4.7.3 Discussion of objective 3

The study findings shows that male engagement programs ranked high in GBV prevention with 65%, confirming the importance inclusive GBV prevention approaches. Education and awareness programs with 60% ranked as the best second in GBV prevention, showing the importance of knowledge-driven intervention strategies. Strengthening laws and enforcement had mixed ratings only 30% rated extremely effective, revealing institutional gaps in policy implementation. The UN Spotlight Initiative (2021) promotes multi-sectorial GBV prevention approaches, aligning with

Ward 23 findings where education and male engagement were key prevention instruments. South Africa's National Strategic Plan (2019) integrates education campaigns with law enforcement, reinforcing research findings, knowledge is essential for GBV prevention. Musarurwa and Mukurazhizha (2022) observed COVID 19's impact on GBV intervention efforts, supporting Ward 23 results, economic hardships affect program success. While literature emphasizes on legal reforms findings indicated that community-based education is equally impactful, highlighting localized intervention needs.

4.8 Chapter Summary

The chapter presented the analysis and discussion of the roots of gender-based violence (GBV) in Ward 23, Shamva District. The findings provided a data-driven understanding of GBV patterns, highlighting key drivers, barriers, and possible solutions for its mitigation. The chapter analysed GBV prevalence, cultural influences, economic empowerment, and prevention strategies. The findings showcased that GBV is deeply rooted in cultural traditional such as child marriages and lobola, which reinforce gender inequalities. This chapter also provided findings about GBV risk factor, economic dependency was identified as the major risk factor, with unemployed women experiencing higher rates of GBV, while financially independent women faced fewer cases of abuse. Social support networks played a pivotal role in reducing GBV. Legal frameworks was found to be weak, limiting access to justice for GBV survivors. Community-driven prevention strategies, such as education and male involvement, were widely recognised as impactful. These finding aligned with the broader literature, reinforcing the necessity of combining financial inclusion, legal reform, and cultural transformation to address GBV in Ward 23.

CHAPTER 5: SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

5.1 Introduction

This chapter provides the summary of findings, conclusions, and recommendations based on GBV in Ward 23, Shamva District. The chapter presents a concise recap of key research outcomes, interprets their broader implications, and outlines actionable recommendations for addressing GBV at community, policy, and intervention levels.

5.2 Summary of the Findings

This section will summarize findings of all research objectives. GBV prevalence, cultural influences, economic empowerment, and prevention strategies.

5.2.1 Summary of Objective 1

The research revealed a high prevalence of GBV, particularly among unemployed and economically depended women, reinforcing financial insecurity as a primary risk factor. Traditional gender norms and male-dominated household structures were found to transpire violence, discouraging women from challenge abusive marriages. Weak legal enforcement and social stigma contributed to low reporting rates, restricting access to justice for GBV survivors.

5.2.2 Summary of Objective 2

The findings found out that employment and financial independence fundamentally reduced GBV vulnerability, with employed women experienced lower abuse rates of 33% compared to unemployed women experienced GBV all of them with a 100% rating. Economic barriers were ranked as the highest challenge with 75%, hindering women from leaving abusive marriages due to financial reliance on their husbands. Social support networks with 80% rating were highly effective, proving the importance of community-driven GBV intervention programs.

5.2.3 Summary of Objective 3

Chapter 4 reviewed that education and awareness campaigns ranked highly, proving knowledge as a crucial GBV prevention instrument. Male engagement with 65% rating were strongly supported, reinforcing gender-inclusive approaches in intervention efforts. Legal frameworks had mixed rating with only 30% of 20 participants rated it extremely effective, showing institutional gaps in policy implementation.

5.3 Conclusions

There is overall interpretation of the findings, on how GBV persists due to economic barriers, cultural norms, and weak enforcement. The research conclusion will be provided basing on the research objectives.

5.3.1 Conclusion of Objective 1

The study concluded that, GBV remains as a fundamental issue in Ward 23, affecting unemployed women disproportionately and reinforced by economic, cultural, and institutional factors. Additionally, strengthening economic independence and legal protection is critical for reducing GBV exposure and enabling survivors to seek justice.

5.3.2 Conclusion of Objective 2

It is concluded that, financial independence and access to social networks play a key role in mitigating GBV, showing that economic security strengthens resilience against abuse. GBV prevention measures must expand job opportunities, financial inclusion, and women empowerment programs to support vulnerable women.

5.3.3 Conclusion of Objective 3

The study concluded that, education, legal protection, and male involvement emerged as core components of effective GBV prevention, showcasing the need for multi-sectoral interventions. Legal frameworks alone are not effective without strong community support systems and gender-inclusive advocacy initiatives.

5.4 Recommendations

Recommendation are derived from the research findings and objectives, it was recommended that:

- ✓ The Government need to strengthen GBV laws and enforcement mechanism, to ensure strict prosecution of perpetrators and accessible legal aid for survivors. Reform lobola and marriage customs to protect women's rights and eliminate practices that enable GBV.
- ✓ GBV education programs need to be expanded in schools, churches, and community centers, promoting gender equality awareness. There is need to establish male-focused GBV prevention initiatives, encouraging men and boys to challenge harmful gender norms.
- ✓ Microfinance and employment opportunities need to be increased, to ensure women gain financial independence to reduce GBV vulnerability. There is also need to develop women-

led entrepreneurship programs, equipping survivors with skills for economic self-sufficiency.

- ✓ GBV survivor support networks need to be strengthened, to improve access to shelters, counseling, and crisis intervention services. There is also need to improve community-based GBV reporting mechanisms that encourage survivors to seek help without fear of stigma or retaliation.

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APPENDICES

Appendix A: Plagiarism Report

ORIGINALITY REPORT			
10%	8%	4%	3%
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS
PRIMARY SOURCES			
1	Dongcheng Li. "Research Design in Chinese Medicine - Linking Social and Health Sciences", CRC Press, 2025 Publication	1 %	
2	re-wiring.eu Internet Source	<1 %	
3	Submitted to northcap Student Paper	<1 %	
4	core.ac.uk Internet Source	<1 %	
5	www.coursehero.com Internet Source	<1 %	
6	ijassjournal.com Internet Source	<1 %	
7	elibrary.buse.ac.zw:8080 Internet Source	<1 %	
8	etd.aau.edu.et Internet Source	<1 %	
9	ir-library.mmust.ac.ke Internet Source	<1 %	
10	www.ur.edu.pl Internet Source	<1 %	
11	Minor, Anedra. "Professional Learning Communities in Rural Schools: A Qualitative Exploratory Case Study", University of Phoenix Publication	<1 %	

Appendix B: QUESTIONNAIRE

Title: Exploring Socio-Cultural and Economic Roots of Gender-Based Violence in Ward 23, Shamva District, Mashonaland Central

Section A: Demographic Information

Instructions: Please provide answers by selecting the most appropriate option.

1. What is your gender?

- ☐ Male
- ☐ Female
- ☐ Prefer not to say

2. What is your age group?

- ☐ 18–24
- ☐ 25–34
- ☐ 35–44
- ☐ 45–49

3. What is your marital status?

- ☐ Single
- ☐ Married
- ☐ Divorced/Separated
- ☐ Widowed

4. What is your highest level of education?

- ☐ No formal education
- ☐ Primary school
- ☐ Secondary school
- ☐ Tertiary education

5. What is your employment status?

- ☐ Employed
- ☐ Self-employed

- ☐ Unemployed

Section B: Prevalence and Patterns of GBV

Instructions: Please answer the following questions based on your personal experiences or observations in your community.

6. Have you experienced any form of GBV in the past year?

- ☐ Yes
- ☐ No

7. If yes, what type(s) of GBV have you experienced? (Select all that apply.)

- ☐ Physical violence
- ☐ Emotional/psychological abuse
- ☐ Sexual violence
- ☐ Economic abuse

8. How frequently do incidents of GBV occur in your community?

- ☐ Rarely
- ☐ Occasionally
- ☐ Frequently
- ☐ Very frequently

9. Who are the most common perpetrators of GBV in your community?

- ☐ Intimate partners/spouses
- ☐ Family members
- ☐ Community members
- Others (please specify):

Section C: Influence of Cultural Norms and Traditional Practices

Instructions: For the following cultural practices, rate how much you think they influence the perpetuation of GBV in your community using the scale below:

- 1 = Not at all influential
- 2 = Slightly influential
- 3 = Moderately influential
- 4 = Very influential
- 5 = Extremely influential

Cultural Practices:

1. ☐ Bride price (lobola)
2. ☐ Child marriages
3. ☐ Polygamy
4. ☐ Gendered division of roles

Section D: Economic and Social Empowerment

Instructions: For the following statements, rate your level of agreement using the scale below:

- 1 = Strongly disagree
- 2 = Disagree
- 3 = Neutral (Neither agree nor disagree)
- 4 = Agree
- 5 = Strongly agree

Questions:

1. ☐ Women with economic independence are less vulnerable to GBV.
2. ☐ Economic barriers increase the risk of GBV for women.
3. ☐ Empowerment programs help reduce GBV.

Section E: Developing GBV Prevention Strategies

Instructions: For the following strategies, rate how effective you think they are in preventing GBV in your community using the scale below:

- 1 = Not effective at all
- 2 = Slightly effective
- 3 = Moderately effective
- 4 = Very effective

- 5 = Extremely effective

Strategies:

1. ☐ Education and awareness campaigns
2. ☐ Empowerment programs for women
3. ☐ Involving men and boys in GBV prevention
4. ☐ Strengthening laws and enforcement

Section F: Gender and Social Dynamics

Instructions: For the following statements, rate your level of agreement using the scale below:

- 1 = Strongly disagree
- 2 = Disagree
- 3 = Neutral (Neither agree nor disagree)
- 4 = Agree
- 5 = Strongly agree

Statements:

1. ☐ Women's roles in the community make them more vulnerable to GBV.
2. ☐ Men's roles contribute to GBV prevention.

Thank you for participating in this study. Your responses are important in helping us understand GBV and develop strategies to address it effectively in Ward 23, Shamva District.

Appendix C: FOCUS GROUP DISCUSSION GUIDE

Title: Exploring Socio-Cultural and Economic Roots of Gender-Based Violence in Ward 23, Shamva District, Mashonaland Central

1. Introduction

I welcome and thank you all for joining this discussion. My name is Lavender Jiya, and I am conducting this focus group discussion as part of my study on exploring the socio-cultural and economic roots of gender-based violence (GBV) in Ward 23, Shamva District, Mashonaland Central. Your participation will help us better understand the prevalence, cultural factors, and socioeconomic impacts of GBV. We will audio record the session to ensure we capture your views accurately. The discussion will last about an hour and a half. Your responses will remain confidential. No personal identifying information will appear in any reports or documents related to this study and participation is voluntary.

2. Discussion Guide

A. Opening Questions

1. Could you briefly introduce yourself and share what you think are the key challenges facing women in this community?
2. How would you describe gender relations in Ward 23?

B. Understanding Gender-Based Violence (GBV)

1. How would you define gender-based violence (GBV) in your own words?
2. How do cultural and social norms influence how GBV is understood or viewed in this community?
3. What kinds of behaviors or actions are commonly seen as forms of GBV here?

C. Prevalence and Patterns of GBV

1. What forms of GBV are most common in this community (e.g., physical, emotional, sexual, economic)?
2. How prevalent would you say GBV is among women aged 18–49 in this community?
3. Are there specific times or circumstances (e.g., alcohol use, disputes over resources) when GBV incidents are more likely to occur?

4. How does the community typically respond to GBV incidents, and what are the common reporting mechanisms?

D. Influence of Cultural Norms and Traditional Practices

1. What cultural norms or traditions in this community do you think influence GBV?
2. Are there specific practices or beliefs that perpetuate GBV?
3. How do community members view or respond to GBV incidents tied to cultural norms?

E. Economic and Social Empowerment

1. In what ways does economic empowerment impact women's experiences with GBV?
2. How do social support systems (e.g., women's groups, NGOs) help in mitigating GBV?
3. Are there obstacles to women achieving economic independence in this community?

F. Developing Community Strategies for GBV Prevention

1. What strategies do you think could work to prevent GBV in Ward 23?
2. How could traditional practices or community norms could be adjusted to support gender equality and GBV prevention?
3. What role should stakeholders (e.g., local government, NGOs, community leaders) play in addressing GBV?

G. Gender and Social Dynamics

1. How do men and women experience GBV differently in this community?
2. Are there specific roles women take on that either increase or mitigate their vulnerability to GBV?

H. Suggestions and Recommendations

1. What policies, programs, or initiatives would you recommend to address GBV in Ward 23?
2. How can community members work together to prevent GBV?

3. Closing the Discussion

Thank you all for participating and sharing your ideas and experience, your insights are valuable.

Appendix D: INTERVIEW GUIDE

Title: Exploring Socio-Cultural and Economic Roots of Gender-Based Violence in Ward 23, Shamva District, Mashonaland Central

1. Introduction

Good day, I'm Lavender Jiya, a student from Bindura University of Science Education, and I am conducting research on the socio-cultural and economic roots of gender-based violence (GBV) in Ward 23, Shamva District. This study aims to provide crucial information to intervention agencies such as non-governmental organizations and government departments to help develop effective community-based strategies for addressing GBV.

Your participation in this study is voluntary, and you are free to withdraw at any time. All information shared will be kept confidential. The interview will take approximately 40 minutes to an hour. Before we start, I need to obtain your informed consent. Please let me know if you are willing to take part in this study, and I will provide you with a consent form to sign.

2. Demographic Information

- Name (optional) or initials:
- Gender:
- Age:
- Marital status
- Level of education:
- Employment status:

3. Understanding Gender-Based Violence (GBV)

- How would you define gender-based violence (GBV) in your own words?
- What forms of GBV are most commonly experienced by women in this community?
- How do cultural and social norms influence how GBV is understood or viewed here?

4. Prevalence and Patterns of GBV

- How widespread do you think GBV is among women aged 18–49 in this community?
- Are there specific circumstances (e.g., disputes over resources, alcohol use) that contribute to GBV incidents?

- What patterns have you observed in how GBV occurs within families or communities?

5. Influence of Cultural Norms and Traditional Practices

- What cultural beliefs or practices do you think perpetuate GBV?
- How do traditional customs (e.g., bride price, marriage norms) impact GBV?
- Are there ways cultural practices could be modified to reduce GBV?

6. Economic and Social Empowerment

- How does economic independence affect women's vulnerability to GBV?
- What role do women's empowerment programs play in addressing GBV?
- What hinderance do women face in achieving economic independence in this community?

7. Lived Experiences and Perceptions

- How has GBV affected you or someone you know on a personal level?
- What emotions or thoughts come to mind when discussing GBV?
- How do survivors of GBV cope or recover from its impacts?

8. Coping Mechanisms and Community Support

- What strategies do families and communities use to address GBV?
- Have you or others in the community received support from NGOs, government, or community organizations?
- In what ways could community-level support be improved to help survivors of GBV?

9. Developing Context-Specific Strategies

- What strategies could work to prevent GBV in Ward 23?
- How can community leaders and stakeholders contribute to reduce GBV?
- Are there specific policies or programs you would recommend for addressing GBV?

10. Gender and Social Dynamics

- How do men and women experience GBV differently in this community?
- What roles or responsibilities do women take on that influence their vulnerability or resilience to GBV?

11. Suggestions and Recommendations

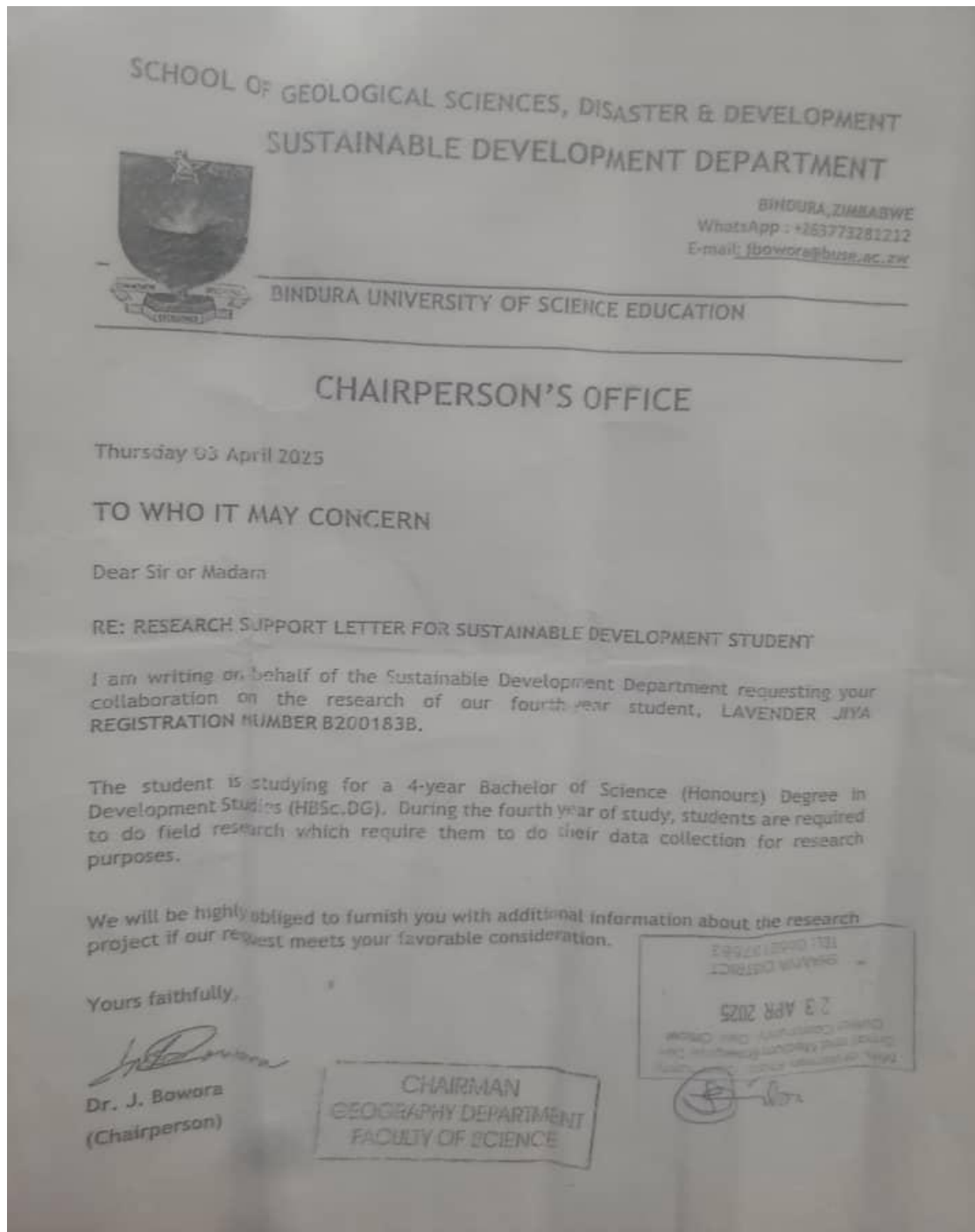
- What do you think can be done to help prevent GBV in your community?

- How can cultural practices be adapted to promote gender equality and prevent GBV?
- Are there any final thoughts you would like to share about addressing GBV?

12. Conclusion

Thank you for participating and use your time to share your experiences and insights with me. Your input is valuable in helping us to understand GBV and develop effective strategies for addressing it.

Appendix E: Approval letter from Bindura University



Appendix F: Approval letter from Shamva District

TEL: (0662137) 282-4
FAX: (0662137) 282-3
*All correspondences should be addressed to
"The District Development Coordinator"*


ZIMBABWE

DISTRICT DEVELOPMENT COORDINATOR
Ministry of Local Government and Public Works
P O Box 61
Shamva

23 April 2025

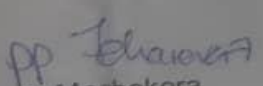
To whom it may concern.

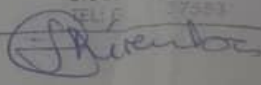
**AUTHORITY TO CARRY ACADEMIC RESEARCH IN SHAMVA
DISTRICT: JIYA LAVENDER**

This letter serves to confirm that the bearer JIYA LAVENDER has been granted permission to carry out an academic research entitled:
"EXPLORING THE SOCIO-CULTURAL AND ECONOMIC ROOTS OF
GENDER BASED VIOLENCE IN WARD 23 SHAMVA DISTRICT
MASHONALAND CENTRAL."

This research is purely academic and confidentiality of information is guaranteed.

Please do not hesitate to offer her any assistance she may require


C. Machechera
District Development Coordinator- Shamva


Min. of Women Affairs, Community
Small and Medium Enterprise Dev.
District Coordinator- Shamva
23 APR 2025
SHAMVA DISTRICT
TEL: 0662137553


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