

**THE PERCEPTIONS OF MEN INVOLVED IN A GENDER-BASED
VIOLENCE PREVENTION PROGRAMME AT SONKE GENDER
JUSTICE**

**A report on a study project presented to
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By

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ABSTRACT

Gender-based violence (GBV) is particularly widespread in South Africa and it is reaching alarming proportions. Violence in South Africa is considered normative. Cognizance needs to be taken of the negative consequences thereof for the lives of men, women and children. Highly publicized acts of violence by men have captured the concern of the country, yet traditional intervention responses continue to focus more on women as victims. This research explored perceptions of non-perpetrating men involved in a GBV gender-based violence prevention programme at Sonke Gender Justice, Johannesburg.

A qualitative research approach was used. Purposive sampling was applied when study participants were selected. Twelve participants were accessed from “One Man Can” – a prevention programme at Sonke Gender Justice. All the participants were male and had been involved in the prevention programme since its inception. Semi-structured interviews were used to conduct in-depth interviews. To enhance trustworthiness and rigour, data was triangulated, and in-depth interviews were also conducted with three key informants. The interviews were audio-recorded with the participants’ consent and transcribed verbatim. Thematic content analysis was used to analyze all data collected, resulting in the identification of themes, sub-themes and categories.

The data was subjected to literature control against the existing body of knowledge. The research report indicated that there was awareness by participants in the GBV prevention programme of the multiple forms of GBV as well as the interrelatedness of the different forms. Substance abuse was found to both cause and exacerbate GBV. Prevention programmes were acknowledged to be beneficial to participants in terms of the knowledge and skills that were gained. The research study will make a valuable contribution to social work’s understanding of GBV and the positive role men can play in prevention interventions. Subsequently the recommendations indicate that men can be positively involved as partners in raising awareness and development of GBV programmes.

Key words: perceptions, men, gender, gender-based violence, prevention programmes

Declaration

I hereby declare that this research report is my own unaided work, and that I have given full acknowledgment to the sources that I used. It is being submitted for the degree of Master of Social Development at the University of the Witwatersrand. It has not been submitted before for any other degree or at any other university.

Signed:

.....

Mary Kaeflein

.....

Date

List of Acronyms:

ADAPT	Agisanang Domestic Abuse Prevention and Training
AIDS	Acquired Immune Deficiency Syndrome
CSVR	Centre for the Study of Violence and Reconciliation
CSSR	Centre for Social Science Research
DEVAW	Declaration on Elimination of all Forms of Discrimination against Women
DSD	Department of Social Development
DVA	Domestic Violence Act
GBV	Gender-Based Violence
HIV	Human Immunodeficiency Virus
HSRC	Human Sciences Research Council
IRR	Institute for Race Relations
IPV	Intimate Partner Violence
MDG	Millennium Development Goals
MRC	Medical Research Council
NICRO	National Institute for Crime and Rehabilitation of Offenders

POWA	People Opposing Women Abuse
SAMRC	South African Medical Research Council
SAPS	South African Police Services
STI	Sexually Transmitted Infection
UNDAW	United Nations Division for the Advancement of Women
UNDP	United Nations Development Program
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNRISD	United Nations Research Institute for Social Development
USA	United States of America
USAID	United States Agency for International Development
USG	United States Government
WHO	World Health Organization

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CHAPTER ONE

INTRODUCTION TO THE STUDY

1.1 INTRODUCTION

Gender-based violence (GBV) is a widespread and alarming occurrence both in South Africa and worldwide. Statistics fail to indicate the enormity of this impediment to social development. It impacts on all sectors of society and is also a barrier to the achievement of gender equality. GBV persists despite increased measures to prevent it. Intervention appears insufficient, especially with regard to men and the role that they can play in GBV. Men can be harnessed and not only relearn new ways of behaviour but can also model this behaviour to other young men. South Africa is both a complex and unique country. GBV is one of the many challenges that the country faces. Many cultures worldwide as well as in this country consider women as inferior and males as superior in terms of decision-making. Therefore, cultural ideologies both support and exacerbate GBV (Wood, 2004).

Furthermore, there is acceptance of this behaviour as a norm as well as poor law enforcement. Consequently it continues and may escalate, despite there being an increasing awareness of the problem and legislation aimed at diminishing incidences (UNICEF, 2011). Ineffective punishment of perpetrators undermines deterrence and there is inadequate protection of victims. Thus, GBV is insidious and often undetected. The use of violence contributes to GBV, as it is generally used as a means of control or acknowledgment. It is seen as socially acceptable to use in intimate relationships, as it is also used to settle disputes and resolve conflict (Contreras, et al., 2012; Thaler, 2011; Ludsin & Vetten, 2010). This encourages multiple forms of GBV to occur simultaneously, some of which are not clearly identifiable or defined. So it is destructive, limiting and violates people's human rights. Furthermore, GBV has immeasurable and detrimental effects on society's mental, emotional and physical wellbeing as well as impacting on the functioning of future generations (Krug, Mercy, Dahlberg & Zwi, 2002).

The aim of this study was to explore the perceptions of men involved in a GBV prevention programme. This study also attempted to highlight the statistics as well as the prevalence of GBV, especially in South Africa. It defines GBV and the different forms of GBV and describes the problem and the rationale for the study. The multiple causes as well as the consequences are discussed. The study also gives an overview of the research methodology, the limitations of the study and the organization of the report. The main findings are discussed, as are recommendations for social policy and further research.

1.2 STATEMENT OF THE PROBLEM AND RATIONALE FOR THE STUDY

GBV is escalating all over the world and in South Africa. According to the Medical Research Council (MRC, 2004, as cited in Sonke Gender Justice, 2006) one woman is killed every six hours by an intimate partner in South Africa. This is the highest recorded rate anywhere in the world (Sonke Gender Justice, 2006). Furthermore, South Africa has been reported to have high levels of domestic violence and rape (Centre for Study of Violence and Reconciliation, (CSVR), 2011). Worldwide and also in South Africa, gender-based violence (GBV) is the most widespread and socially tolerated human rights violation (United Nations Population Fund, (UNFPA), 2005). It is a serious social problem and the statistics are alarming. There is, however, a lack of reliable data in many countries, including South Africa, with regard to violence against women. Bott, Morrison and Ellsberg (2005); Merry (2009); Morna and Walter (2009) and Morrell (2002) state that the extent and severity of such violence is under-reported and difficult to determine because the reported figures will depend on the GBV definition used, the questions asked, characteristics of participants and time frames. According to Abrahams and Jewkes (2005), violence has been used in various contexts to punish, express anger and as a means of control. Holistic GBV interventions are required to counteract the negative consequences it has for victims and communities alike (Ellsberg & Heise, 2005; Merry, 2009; Pickup, Williams & Sweetman, 2001).

In the past, interventions have sought to address GBV at different levels and within different contexts. In South Africa numerous studies have been conducted in the GBV field with a focus on gender roles (Abrahams, Jewkes, Hoffman & Laubsher, 2004;

Jewkes, Levin & Penn-Kekana, 2003a; Strebel et al., 2006), HIV/AIDS (Dunkle et al., 2004a; Dunkle et al., 2004b; Onyejekwe, 2004), school-based interventions and adolescents (Varga, 1997; Dunkle, et al., 2006), health-care professionals (Kim & Motsei, 2002), and micro finance interventions (Kim et al. 2007), transactional sex among women (Jewkes et al., 2003b), risk factors (Jewkes, Levin & Penn-Kekana, 2002) and on research ethics and methodology (Jewkes, Watts, Abrahams, Penn-Kekana & Garcia-Moreno, 2000). Although GBV programmes have been carried out successfully with perpetrators in other countries such as the United States (Russell, 1995), there appears to have been little intervention in terms of behaviour change at grassroots level, and few have included men in their preventive efforts. The literature indicates that there are insufficient prevention strategies to combat GBV which involve men, especially in South Africa (Abrahams et al., 2004; Peacock & Levack, 2004; Wood, 2004).

Recent studies in the GBV field have shown that it is crucial not to separate intervention strategies from other socio-political or socio-cultural and developmental issues, but rather to highlight how both genders are inter-connected and related within the gender system. Thus, it is necessary to recognize and shift the need to engage men as partners in GBV prevention, as young men can act as change agents for other men (United Nations Educational, Scientific and Cultural Organization (UNESCO), 2004). This research study will emphasize prevention strategies involving men rather than focusing on initiatives aimed solely at assisting survivors with recovery. Challenges exist in South Africa with regard to men in identifying with positive male role models. The apartheid system is believed to be largely contributory. However, in other countries such as Brazil it has been shown that primary intervention focused on men can bring about change in behaviour and hence attitudes (Barker, 2005).

Social work prevention includes activities “aimed at stopping a noxious circumstance from happening while also protecting strengths and competencies while promoting desirable goals” (Johnson & Schwartz, 1997, p. 83). The rationale of this proposed social work study was to explore the perceptions of men who were involved in a GBV prevention programme. The study showed that to reduce GBV in South Africa it is

crucial to step up prevention efforts including men. It is hoped that the study will increase understanding and awareness of GBV in social work as well as the role of men in preventing GBV. This study will address the issue of GBV, which has value both for society and men. Cognizance needs to be taken of the seriousness of this problem, as it not only impacts on the present but affects future generations, as well as disempowering both the abused and the abuser.

1.3 PURPOSE OF THE STUDY

The aim of the study was to explore the perceptions of men involved in a gender-based violence prevention programme who were non-perpetrators of GBV. The research objectives established in order to reach the aim of the research were:

- (i) to elicit participants' views on their understanding of GBV;
- (ii) to establish factors that led participants to be part of the "One Man Can" programme at Sonke Gender Justice;
- (iii) to explore the challenges faced by participants when working in the "One Man Can" prevention programme at Sonke Gender Justice;
- (iv) to suggest recommendations for the prevention programme based on the experiences of the participants; and
- (v) to determine the role played by key informants within the "One Man Can" prevention programme.

1.4 RESEARCH DESIGN AND METHODOLOGY

The research approach used was qualitative in nature. This is because the researcher was interested in studying the perceptions of men in detail (Terreblanche, Durrheim & Painter, 2006). Qualitative research transforms data into findings. The purpose is to discover underlying meanings and patterns of relationships (Babbie, 2007). Quantitative research would not have been able to capture the data in the desired manner. Narrative research design was used because both a detailed and authentic portrayal of each participant's experiences was presented (Babbie, 2007). The sample was purposive non-probability sampling. The researcher used semi-structured interview schedules to

interview twelve male participants of a gender-based violence prevention programme. The interviews were all undertaken by the same researcher so that reliability was enhanced. All the participants of the study signed informed consent and also consented to the audio-taping of the interviews. The data analysis used was thematic content analysis.

1.5 KEY CONCEPTS OF THE RESEARCH

Perceptions:

Perceptions refer to a participant's beliefs, views or understanding about something. The *Chambers Encyclopedic English Dictionary* defines perception as a process whereby information about one's environment received by the senses is organized and interpreted so that it becomes meaningful (*Chambers Encyclopedic English Dictionary*, 1994). Pretorius, Terblanche and Tshiwula (2007) state that perceptions may also be referred to as the participants' frame of reference or world-view which is shaped by awareness, insight or understanding gained about something.

Men:

An adult male human being (*Chambers Encyclopedic English Dictionary*, 1994).

Gender-Based Violence:

Violence directed at an individual based on his or her biological sex, gender identity or his or her perceived adherence to socially defined norms of masculinity and femininity. It includes physical, sexual or psychological abuse; threats; coercion; and arbitrary deprivation of liberty and economic deprivation, whether occurring in public or private life (United States Government GBV Assessment Report, 2011). GBV is also defined as any form of violence used to define or keep in place strict gender roles and unequal relationships (Lang, 2003).

Prevention programmes:

Programmes refer to long-term efforts with multiple components including group education, staff training, educational material and community outreach (World Health

Organisation (WHO), 2007). Prevention programmes are interventions directly addressing prevention in a focused and systematic way in order to be effective and sustainable. They include primary prevention (USG Report, 2011) which aims to prevent occurrence (Lazarus, Tonsing, Ratele & Van Niekerk, 2009).

Gender:

The attributes, constraints and opportunities associated with being a man and a woman. It also refers to the range of socially constructed roles and relationships, personality traits, attitudes, behaviors, values, as well as the relative power and influence society attributes to both sexes on a differential basis (USG Report, 2011). It can also refer to a sociocultural construct that refers to power differences between males and females within a culture. These differences manifest themselves in roles, responsibilities, expectations, privileges, rights, limitations, opportunities and access to services (USAID, 2009).

1.6 OVERVIEW OF THE RESEARCH REPORT

Chapter One: It outlines the introduction and rationale for the study. It includes the aim, objectives and definitions of key terms.

Chapter Two: In this chapter, the literature review and theoretical framework for the. Study are discussed

Chapter Three: It describes the research design and the methodology used in the study. It includes the procedures used by the researcher to collect and analyze the data as well as the limitations of the study.

Chapter Four: In this chapter, the findings and results of the study are reported and analyzed.

Chapter Five: This chapter presents the main findings and conclusions as well recommendations for social work practice, social policy and research.

CHAPTER TWO

LITERATURE REVIEW ON GENDER-BASED VIOLENCE

2.1 INTRODUCTION

This chapter will examine various aspects of GBV. It includes an overview of GBV as well as the definition, legislation, statistics, causes, impact as well as interventions. The ecological theory will further be applied in terms of the interrelationships between GBV and the theory.

2.2 OVERVIEW OF GBV

Gender-Based Violence (GBV) is the most widespread and socially tolerated human rights violation (United Nations Population Fund (UNFPA), 2005). It is a global problem which has been reported to limit educational benefits, as well as cause poor health and psychological trauma (Dobbert, 1975 in Wilson, 2011). The term “gender-based violence” is widely used as a synonym for violence against women. This is partly because it stems from women’s subordinate status in society (stopvaw.org., 2003). However, the term can be used to describe any form of violence used to establish, enforce and perpetuate gender inequality and to keep gender hierarchies in place (Lang, 2003). GBV includes physical abuse such as battering or sexual assault as well as psychological abuse such as deprivation of liberty and forced marriage. It may be sexual harassment, or deprivation of the resources necessary for both physical and psychological wellbeing, including health care, means of livelihood, nutrition and education. It can also refer to the treatment of women as commodities, such as the trafficking of women and girls for sexual exploitation (stopvaw.org., 2003). GBV generally can refer to varied behaviors resulting in physical, sexual or psychological damage to women, girls, boys and men alike (Wilson, 2011).

Research indicates that there are two overlapping categories, namely explicit gender (sexual) violence and implicit gender violence (Akiba et al., cited in Wilson, 2011). These categories refer particularly to School-Related GBV. Explicit gender (sexual) violence includes rape, assault, abuse, intimidation as well as sexual harassment. Implicit

gender violence can include punishment, bullying, verbal or psychological abuse, teachers' unofficial use of students for free labor and other forms of aggressive or unauthorized violent behaviour (Akiba et al., cited in Wilson, 2011). Explicit gender violence appears prevalent in South Africa, with 33% of reported rapes of school-going girls having been committed by a teacher. Consequently, many girls have left school because of the hostility they experienced after reporting the violence (Bradley, 2011). Further research shows that as the levels of violence have increased in our society, so have the levels of school-related GBV (Wilson, 2011).

Green (1999) argues that whether gender-based violence is direct physical violence, threats or intimidation, the intention is to perpetuate as well as to promote hierarchical gender relations. This highlights the gender inequality in which much violence is rooted (USAID, cited in Population Council, 2008).

2.3 GBV SCOPE AND STATISTICS

According to global statistics, one in three women face some form of violence during their lifetime and one in five women will become a victim of rape or attempted rape (Morna & Walter, 2009). In South Africa the first comprehensive community-based research study of the prevalence of gender violence was conducted in Gauteng province by the South African Medical Research Council (SAMRC) and Gender Links (2010). Findings indicate that approximately 51% of women had experienced some sort of violence in their lifetime, whether emotional, physical, economic or sexual. Emotional abuse was the most common form of abuse, followed by physical violence, and is most likely to occur over a period of time (Rasool, Vermaak, Pharaoh, Louw & Stavrou, 2002). The same study revealed that one in four women had experienced sexual violence (See Table 2.1). However, sexual abuse is the least likely form of abuse to be reported (Mathews & Abrahams, 2001). Furthermore, the study revealed that only 4% of women report GBV, which indicates that many cases are unreported, resulting in the underestimation of actual figures.

In a study, up to 78% of men interviewed admitted to perpetrating some form of violence against women as indicated in Table 2.1. (Britton, 2006; SAMRC & Gender Links, 2010; Strebel et al., 2006). Underreporting is confirmed to be a major barrier in establishing accurate prevalence and development of appropriate programmes (Jewkes et al., 1999). Thus GBV incidence and prevalence within any given population are challenging to obtain (Dunkle et al., 2003; Dissel & Ngubeni, 2003). This is attributed to fear of intimidation, not being believed, retaliation, self-blame or shame (Bollen, Artz, Vetten & Louw, 1999 cited in Dissel & Ngubeni, 2003; Ellsberg, Heise, Pena, Agurto & Winkvist, 2001). Furthermore, women may suffer denial and fear of social stigma, which prevents them from asking for help, and they may also experience painful recollection (Ellsberg & Heise, 2005; Ellsberg et al., 2001, p. 3). This is further exacerbated by the acceptance of this violence as normative by an individual and the authorities, lack of confidence in the police, economic and emotional dependence on the abuser as well as difficulty in obtaining convictions (Kaminer & Eagle, 2010; Rasool et al., 2002; Strebel et al., 2006; Vibetti, 2009). Women may also feel too afraid to report domestic violence, or even feel that the beatings are part of the relationship (Strebel et al., 2006).

Table 2.1 Womens' Experiences of GBV and men as perpetrators of GBV.

	Women's experiences of	Men as perpetrators of
Violence	51,2%	78,3%
Emotional violence	43,7%	65,2%
Physical violence	33,1%	No stats available
Sexual violence	25,3%	37,4%
Economic violence	22,3%	No stats available

Research carried out in the rural areas of the northern part of South Africa found that women experiencing domestic violence may be discriminated against by the SAPS or other service providers who are supposed to assist them. Abused women interviewed by Makofane (2000) indicated that social workers and nurses refused to assist them because they were unmarried (Curran & Bonthuys, 2004). Other research states that police

officers sometimes seem like the second assailant of women as the victims may encounter disbelief, impatience and frustration from SAPS (Stanko, 1995). Anecdotal evidence indicates that many sections of South African society place more value on maintaining the family instead of the safety of women, children and men (the family members). Cultural norms dictate that victims change behavior to prevent abuse. Religious advisers may also dissuade victims from ending an abusive relationship or marriage (Ludsin & Vetten, 2005). Furthermore, in South Africa the nature and extent of help available to men impacted by living in violent circumstances is affected because of the lack of a wide range of resources.

In a 76-country study by the World Report on Violence and Health (WHO), 1998), it was reported that unusually high rates of violence against women aged between 10 and 29 years had been recorded, with Colombia having the highest rate of 11.9 per 100 000 (Abrahams & Jewkes, 2005). However in 1998 a survey in South Africa conducted in three provinces showed that 1 in 4 women have experienced physical violence during their lives (Jewkes et al., 2002). This indicates figures of 25 000 per 100 00 which is very much higher than Columbia's. Internationally statistics show that, for example, in the United States of America (USA) 40-60% of murders of women are committed by intimate partners (Campbell, 2002). Subsequently a South African Study completed in 1998 showed that 8.8 women per 100 000 aged 14 years or older were murdered by a current or ex-boyfriend or husband. This, contrasts significantly with the USA and Australia: it is in fact six times higher (Abrahams & Jewkes, 2005).

Further research by Abrahams et al. (2009) indicates that the national mortality rate was more than twice that found in the USA resulting from IPV against women aged between 14 and 44 years. Furthermore, South Africa has one of the highest rates of reported rape worldwide, and was labeled the rape capital of the world by Human Rights Watch in 1995 (de Havilland, 2011; Jewkes, Sikweyiya, Morrell & Dunkle, 2009a; Kaminer & Eagle, 2010). The Western Cape has the highest incidence of rape in South Africa (Strebel et al., 2006). Official statistics of 138.5 sexual offences per 100 000 people belie the actual rate, with only 1 in 25 rapes being reported, which indicates significant

underreporting (de Havilland, 2011; SAMRC, 2010). Globally, approximately 25% of girls and young women aged between 10 and 24 years report their first sexual encounter as coerced (WHO, 2002; Garcia-Moreno & Watts, 2000; Heise et al., 1999 in WHO, 2004). Surveys carried out in South Africa indicate that 1 in 3 men admitted to having raped a woman (de Havilland, 2011). This is a high number considering the ratio of women to men in South Africa. However, violence can be perpetrated by both men and women and consequently affects all members of society (Ellsberg & Heise, 2005). The literature also shows that women can be perpetrators of GBV as well as domestic violence (Browne, Williams, & Dutton, 1999; Jordan, 2005). However, according to research reports, men are reportedly the worst perpetrators of GBV as well as being the main victims of violence outside the domestic sphere (Abrahams et al., 2004; Bott, Morrison & Ellsberg, 2005; Dunkle et al., 2006; Flood, 2011; Strebel et al., 2006; United Nations Research Institute for Social Development, (UNRISD, 2004).

This section discussed GBV and the statistics as well as the prevalence of GBV. The following section focuses on legislation which includes policy regarding GBV.

2.4 LEGISLATION AND POLICY RELATED TO GBV

The Declaration on the Elimination of All Forms of Discrimination against Women (DEVAW) (1993) was the first international document which defined violence against women within a broader gender-based framework. In South Africa the post-1994 government has pledged full and equal roles in society for women, something that is reflected in the policy changes since 1994 (Kim & Motsei, 2002). South Africa's Constitution (Act 108 of 1996) recognizes that gender equality is the cornerstone of South Africa's democracy (Hochfield, 2002). Furthermore, South Africa has been acclaimed for its efforts towards the advancement of women. There is a 30% representation of women in parliament, which is seen as an achievement in gender equity, and places this country in the top ten of the world's democracies (Maman, Campbell, Sweat & Gielen, 2000). However, it is pathetic that in spite of this high global standing, many women in South Africa continue to experience violence at the hands of perpetrators.

The Prevention of Family Violence Act of 1993 was the first legislative step to address domestic violence as a public issue in South Africa. This legislation was reviewed because of lack of a legal definition as well as a vague definition of domestic violence (Mathews & Abrahams, 2001). In response to this, the Domestic Violence Act No. 116 of 1998 was promulgated. The Domestic Violence Act (DVA) facilitates the prosecution of crimes committed in the domestic context such as acts of physical, sexual, emotional, verbal, psychological and economic abuse, acts of harassment, stalking, damage to property and entry into a person's home without consent. This new Act defines abuse as well as domestic relations more broadly (United Nations Children's Fund (UNICEF), 2011). It is the first piece of legislation enacted by the post-apartheid government that focuses on gender-based violence. The DVA was introduced to protect all victims of violence, irrespective of gender, age or race. This Act is significant because it recognizes the negative impact violence has on the safety and psychosocial wellbeing of the victims, while increasing their levels of vulnerability in society. The recognition of the prevalence of domestic violence has led to the government offering protection to domestic abuse victims, which further demonstrates the government's commitment to eliminating domestic violence (Vetten, Le, Leisegang & Hahen, 2010).

In South Africa's 2010 country report on the achievement of the Millennium Goals for Development (MDG), it is reported that all programmes aimed at the achievement of the MDGs need to address strategies to deal with violence against women and children. Eliminating violence is stated as essential for achieving gender equality. However, although domestic violence is acknowledged to be both a widespread and legitimate health and social concern, and despite the DVA Act being seen as progressive, reformative and necessary, domestic violence continues to be prevalent country-wide. There are limited observable changes in the patterns of gender dynamics and socio-economic aspects in the South African population, as depicted in studies by Hochfield (2002) and Marumoagae (2011). Law enforcement with regard to punishment of offenders of GBV also appears to be hampered by the attitudes of police officials, who are said to be discriminatory in terms of gender (Barker et al., 2005). Steinberg (as cited

in Thaler, 2011) reiterates that there needs to be an attitudinal shift by the police, as they are commonly unsympathetic as well as unhelpful to victims. Many married women in South Africa fear reporting abuse to the SAPS because of the negative attitudes and ignorance favouring the male perpetrator (Makofane & du Preez, 2000, Van der Hoven, 2001 & Artz 2001 cited in Dawes, Kafaar, de Sas Kropiwnicki, Pather & Richter, 2004). This is seen to perpetuate secondary victimization of victims (Mathews & Abrahams, 2001). There are also attempts to raise awareness of the prevalence of GBV, an example being campaigns such as the annual 16 days of Activism for No Violence against women and children, which is a South African campaign that has been launched to help eradicate the abuse of women and children. The campaign also aims to increase awareness of the negative impact of this violence and endeavors to involve men and boys as crucial role players in the eradication of violence against women and children as well as to empower women (www.info.gov.za).

This discussion would be incomplete without mentioning South Africa's National Policy Framework for Women's Empowerment and Gender Equality (2000). This policy was developed as an intersectoral guide regarding principles that are necessary in achieving gender equity (Hochfield, 2002). However, despite legislation and an attempt at creating awareness of this scourge, it is clear that GBV remains a pressing, crucial issue in South Africa.

2.5 GBV AS A HUMAN RIGHTS VIOLATION

The human dignity of many South Africans continues to be impaired due to lack of progress with regard to the realization of rights – in particular the right to equality (de Havilland, 2011). GBV remains one of the most widespread yet unrecognized human rights violations (Ellsberg & Heise, 2005; Morna & Walter, 2009). It is a legitimate concern and is also a major obstacle in the achievement of other goals on the country's developmental agendas. According to the National Institute for Crime and Rehabilitation of Offenders (NICRO, 2011), one of South Africa's greatest challenges in terms of achieving sustainable social development and a more just, equal society are the increasingly high levels of violence against women. For development to be democratic

women and men need to participate equally politically, economically and socially. Additionally this means that both women and men need to be free from violence, which is a human right (United States Agency for International Development (USAID), 2011). Interestingly, the inferior position of women in certain ethnic or racial minorities has been recognized as a human rights violation, whereas previously there was no acknowledgment of those rights (Gender Matters, 2011). Because men and women are differently situated culturally and economically, there is unequal access to material and cultural resources as well as the provision and consumption of material goods and the political process guiding economic development (Kimmel as cited in Morrell, 2001). Thus, cultural differences have been reported to be grounds for justification for women's human rights abuse. The European world-view of gender stereotypes, which has largely been adopted in Africa, has been largely defined by men in their own interests and mainly recognizes the achievements of men and valuing the work they do. Although positive shifts can be noted, this over-recognition of men's work has led to the unquestioned acceptance of structures of domination and violence, and has marginalized women while privileging men. A more inclusive view of human rights is needed which entails dismantling structures of patriarchal domination, transcending cultural boundaries, and also recognizing that men can be abused (Ife, 2008).

Generally, it has been widely reported that a majority of women are denied their human rights (Gender Matters, 2011). The National Policy Framework for Women's Empowerment and Gender Equality argues that women's rights should be seen as human rights as well (Hochfield, 2002). Continuing gender discrimination undermines the equality and dignity of South African women, especially in the rural areas. According to the United Nations Development Programme (UNDP), South Africa's gender inequality index of 0,635 placed the country 82nd out of 169 countries in 2008 (de Havilland, 2011). This indicates that there needs to be more focus on gender equality in order for the country to progress.

2.6 GBV AND HIV/AIDS

It is estimated that South Africa has the highest rate of HIV/AIDS in the world (Jewkes et al., 2009b). Between 2009 and 2010 the numbers increased from 5.7 million to 5.8 million, with 1,000 new infections daily (de Havilland, 2011). There are links between GBV and HIV/AIDS transmission, with an increased risk of HIV infection (Dunkle et al., 2004a; Strebel et al., 2006). Jewkes, Dunkle, Nduna and Shai (2010) state that intimate partner violence increases the risk of HIV infection in young South African women. There may also be increased risk-taking behavior, which includes transactional sex, having multiple partners and partners outside of marriage. Sexual violence is also contributory to HIV transmission (Peacock & Levack, 2004). Childhood sexual abuse is contributory to early sexual initiation, anal sex, low rates of condom use and sex with non-partners.

A study carried out in Nicaragua found that women who had experienced sexual abuse in childhood made their sexual debut two years earlier and also had a higher number of sexual partners (Fox, 2003). This in turn contributes to increased risk of HIV/AIDS. Women's ability to negotiate condom use is also limited if there is violence, and this may also lead to HIV/AIDS. Dunkle et al. (2004a) postulate that abusive men are more likely to have HIV, which is further exacerbated by the imposition of risky sexual practices on partners. Young women with older partners are 1.5 times more likely to experience physical and sexual violence than women with partners in a similar age group. In South Africa this age difference increases young women's risk of HIV infection by 1.6, because older men have a much higher prevalence of HIV. Violence is also obstructive to the disclosure of HIV status, particularly in developing countries, because HIV-positive women are at increased risk of physical abuse should they disclose their serostatus (Ellsberg & Heise, 2005). Between 3 and 5% of women in a World Health Organization (WHO) (2004) study reported negative reactions such as blame, abandonment as well as anger leading to violence when disclosing their status. Perhaps it is not therefore startling when studies report that between 16 and 51% of women chose not to disclose HIV status to their partners in countries such as Tanzania, South Africa and Kenya (WHO, 2004). Women who are HIV positive are 2.68 times more likely than those who are negative to

have experienced violent episodes perpetrated by a current partner (Vetten & Bhana, 2001). A survey by Thaler (2011) found that men are three-and-a-half times more likely to perpetrate GBV if they engage in concurrent sexual relationships.

In the following section the multiple factors causative of GBV are discussed. These are further subdivided into social and political factors.

2.7 CAUSES OF GBV:

GBV can be caused by a multitude of factors, in combination or singly, such as social and political factors. These will be discussed under social and political factors.

2.7.1 Social factors

Social factors discussed in the following section encompass gender, culture, the family, unemployment and poverty and substance abuse, including alcohol abuse.

2.7.1.1 Gender and GBV

Gender refers to the socially constructed differences between men and women which can change over time and which vary within societies, therefore making it historical and culture-bound (Oyewumi, 1997; stopvaw.org., 2003). Gender “orders daily social processes and is incorporated into the economy, ideology, family life and politics” (Oyewumi, 1997, p. 39). Thus, perceptions and expectations about behaviour as men and women are determined by gender identity. Giving birth is a biological determinant, whereas the performance of household duties, working in lower-paid formal sector positions and being the majority in the informal sector are all examples of social construction. All human societies make social distinctions based on gender, and nearly all give men more power and status (Strebel et al., 2006; UNICEF, 2000). These gender roles are “often reciprocal as well as being mutually agreed upon” (Strebel et al., 2006, p. 517). They have been strictly masculinized or feminized in Western culture, Hinduism, Islam and Christianity alike.

Masculinity has been recognized as a key aspect of gender (Morrell, 2001). It refers to male things and male relationships to their bodies and sexuality as well as the social construction of institutions and women's identities (Ratele cited in Morrell, 2001). In many cultures masculinity is often associated with aggressiveness, competitiveness, dominance, strength, courage and control, whereas femininity is characterized by gentleness, weakness, tolerance, passivity and emotionality (stopvaw.org., 2003). From an ecological perspective, these masculinity cultures may be counter-productive and destructive for men, women and children. However, it is also important to acknowledge that masculinity has different meanings for different men at different times in their lives (Kimmel, 2001). Some men may choose to reject the dominant stereotypes of violent, controlling masculinity, whereas others may oppose or accept them (Morrell, 2001; stopvaw.org., 2003). This multiplicity of masculinities with multiple meanings of manhood within a society implies that not all masculinities are equal. One model of masculinity is constructed by a nation by which each man as well as other men measures him against. Some may be "more valorized but all masculinities are constructed in relation to femininities and express the multiple ways in which gender identity is articulated through a gender order" (Kimmel, 2001, p. 338 cited in Morrell, 2001). However, both men as well as women can contribute to the "traditional harmful versions of manhood as well as to traditional restrictive versions of womanhood" which can further increase the vulnerability of women" (Barker, 2005, p. 150).

Gender responses are forced in a radically changing country such as South Africa. The gender order expresses male domination, which translates into men's power over women, or, alternatively, over other men. This means that gender is not only individual but a "process of institutions and dynamic power relations between groups" (Kimmel, 2001, pp 338 cited in Morrell, 2001). This may result in a "crisis of masculinity" for some men, leading them to commit violence against their partners, or femicide (Thaler, 2011). This has resulted from the changing roles of men and women. Thus the social dominance of men in the culturally sanctioned gender hierarchy is threatened, which has led to this crisis (Connel cited in Patel, 2005). A survey in the Western Cape Province commissioned in 2006 found that this reversal in traditional gender roles was

compounded by high levels of unemployment. Thus the empowerment of women has also been contributory to the loss of men's self-esteem, leading to increased male violence towards women and children (Strebel et al., 2006). Additionally, traditional male-dominated roles have also contributed to men's feelings of entitlement to abuse women (Strebel et al., 2006). A survey by Strebel et al. (2006) in the Western Cape indicated the pervasiveness of traditional gender roles, with clearly differentiated roles of men and women. There is the expectation that women should be submissive to their husbands, while husbands were the decision-makers (Strebel et al., 2006). According to a 2010 study by the Medical Research Council (MRC), 86.7% of men and 57.9% of women endorsed the belief that a woman should obey her husband, although this does not necessarily equate to the husband's right to abuse her (de Havilland, 2011).

2.7.1.2 Culture and GBV

In South Africa there are some harmful cultural values and norms which condone and enforce abuse against women (Kim & Motsei, 2002). The church and other religious or spiritual institutions have also contributed to the reinforcement of dominant gender roles, further condoning the spousal abuse of women (Strebel et al., 2006). The period of early childhood is believed to be the most concentrated period of informal learning and modeling of shared cultural meaning systems. These cultural beliefs and practices in society can also extend to formal schools (Wilson, 2011). Culture can be seen as imprisoning to women, leading to their subordination because of a patriarchal society which has led to the emergence of male domination (Kambarami, 2006; Kelly cited in Mazibuko, 2003). The literature indicates that GBV is grounded in patriarchy, meaning that the system positions men over women, and patriarchy is also linked to the social cultural and legal contexts that also permit GBV (Lang, 2003). These unequal power relations existing between men and women appear to be significant in the perpetration of GBV (USAID, 2011). Patriarchy is thus a power structure working in multiple directions simultaneously (Barker, 2011). The status of women and children is undermined as a result as well as entrenching economic inequality, which further exacerbates patriarchal violence (Mazibuko, 2003; Thaler, 2011). Jewkes (2002) posits that societies with stronger ideologies of male dominance have more intimate partner violence.

Previously, colonization impacted on women both profoundly and negatively, leading to their exclusion from colonial state structures. Women were identified and defined by their anatomy and were consequently reduced and categorized. This meant that they were not only ineligible for leadership roles but were subordinate to men. Patriarchy was also consolidated in Afrikaner social life in South Africa and was entrenched in gender relations on a religious basis. It was justified biblically, and influenced Afrikaans men and women to view patriarchy as both natural and normal. The patriarchal head dominated the family, with the wife and mother being restricted to a domestic role. A clear division of labor along gender lines was adhered to, meaning that men were allowed better access to education and enjoyed exclusive political leadership. Women were barred from the special offices in Afrikaans churches and organizations (Cloete, 1992; Ackerman 1994; Du Pisani, 1996 as cited in Du Pisani, pp.157-175). Men with a tendency towards abusive behavior have been reported to have grown up in traditional models of the family where the father is the breadwinner and the mother is the home maker (Ludsin & Vetten, 2005).

In South Africa the traditional practice of *lobola* is believed to increase violence against women. It is a practice whereby the family of the groom pays a dowry or *lobola* to the bride's family (Ludsin & Vetten, 2005). Consequently women are seen as the property of their husbands, and they may therefore feel controlled by them, and also feel that domestic violence is both justified and inevitable (Kim & Motsei, 2002; Ludsin & Vetten, 2005; WHO, 2009). Kambarami (2006) states that *lobola* is part of the patriarchal nature of society which breeds inequality as well as widening the gap between women and men, further placing women in a subordinate position. One of the key functions of *lobola* is the relationship and bond that is created between the families of the bride and the groom, and this could be the protective mechanism provided for by the tradition. An example of this protection afforded to men is that if a man was found to be guilty of abuse he would be fined, after exhaustive family meetings. The woman would also be encouraged, and pressured, by her family to remain with the husband (Rasool et al., 2002). *Lobola* was always paid in cattle, with the amount varying depending mainly on the status of the father of the bride (Dlamini cited in Posel, Rudwich & Casale, 2011). As

a result men may expect fidelity from their wives, while being flexible about their own fidelity. They are therefore allowed to control and dominate their wives (Lutya, 2001).

2.7.1.3 The family and GBV

The family is acknowledged to be a primary site of gender-based violence (www.winrock.org, 2003). Research on women's reproductive health by the Institute of Social and Economic Research in Jamaica and Barbados (1995) identified the family as being the primary location of violence (Brasileiro, 1997). Hence the family was seen as playing a fundamental part in promoting violent behaviour (Krug, Mercy, Dahlberg & Zwi, 2002). It is in the family that children first learn this behavioral option for conflict management in the context of the use of violence. However, while there may be biological predictors of violence, there is more substantiation for violent behaviour caused by social factors during adolescence and childhood such as being victims of violence in school and at home. This is substantiated by the social learning theory, which postulates that violence is learnt behaviour as a result of socialization ties (Padayachee, 1988). The literature indicates that the most violent perpetrators of violence are abusive men who as children who witnessed parental violence as well as having experienced child abuse which may lead to later relationship conflict and subsequent to GBV (Ludsin & Vetten, 2005; Thaler, 2011). This early socialization to violence also results in it being used as a coping mechanism or as a way of resolving conflict (Finkelhor, Gelles, Hotaling & Straus, 1983; Ludsin & Vetten, 2005; Contreras et al., (2012). Kambarami (2006) argues that in some cultures patriarchal practices are bred in families by socialization, resulting in children accepting sexually differentiated roles. Consequently these traditional gender roles are distorted or used as an excuse to justify abuse (Ludsin & Vetten, 2005, p. 54). Vogelmann (1990) reiterates that it is in the family that controlling and domineering behaviour is learnt. The media also plays a role in society's perpetuation of male dominance and female passivity. Furthermore, there may also be a behavioral predisposition to violence (Thaler, 2011).

2.7.1.4 Unemployment, poverty and GBV

In South Africa since the end of apartheid, poverty has continued to afflict non-white populations (Thaler, 2011). However, evidence shows that it affects women, men, boys and girls in different ways, with women and children often more affected than men (stopvaw.org, 2003). Women continue to experience high levels of poverty and high rates of unemployment in South Africa (Ludsin & Vetten, 2005). They are also over-represented in informal employment (Human Sciences Research Council (HSRC), 2008). The high levels of stress that are associated with poverty may increase the risk of GBV (Jewkes, 2002 cited in Thaler, 2011). Low socio-economic status appears to be associated with GBV for real, lived poverty as opposed to perceived poverty (Thaler, 2011). On the one hand this socio-economic disadvantage contributes to the culture of patriarchal violence (Thaler, 2011), while patriarchy also entrenches economic inequality (Mazibuko, 2003). The majority of South Africa's poor are black women, most of whom live in rural areas with limited access to both social and economic opportunities (Ludsin & Vetten, 2005). Entrapment of these women is exacerbated by South African customary law, which is detrimental to women as a woman can access property and wealth only through her husband (Ludsin & Vetten, 2005). With the Recognition of Customary Marriages Act, women married prior to 2001 are still treated as legal minors, which mean all marital property is owned by the husband except for a woman's personal clothing (Ludsin & Vetten, 2005).

Women's economic rights are further infringed on by traditional leaders who refuse to grant women access to land and register the land in their own name (Davids, Theron, Kealeboga & Maphunye, 2009). However, Jewkes (2002) argues that research in South Africa has shown that extreme poverty does not always result in GBV, because the scope for conflicts regarding household finances is reduced. Nonetheless, men who experience poverty or unemployment may experience frustration and a crisis of male identity because of an inability to meet the social expectations of successful manhood, and this may result in violence against women (Jewkes, 2002; Thaler, 2011). It is interesting to note that research in the United States has also linked domestic violence to economic stress, low self-esteem of both victim and perpetrator and traditional ideas about gender

roles (Tauchen et al., 2001 cited in Barker, 2005, p. 138). Lang (2003) posits that GBV is a major contributor to global poverty both in terms of income and human capital.

2.7.1.5 Substance abuse and GBV

The routine as well as heavy consumption of alcohol increases not only the risk of violence but is contributory to GBV (Jewkes, 2002a; Thaler, 2011). WHO (2009) posits that this association between violence and alcohol consumption results from the cultural and social norms around alcohol use and its effects. Furthermore, a fact that is alarming within the fight against GBV is that, globally, South Africa has one of the highest per capita rates of alcohol consumption (MRC, 2009).

Research has shown that alcohol abuse is a major contributor to GBV. Alcohol is a powerful catalyst for both interpersonal and sexual violence as well as high-risk sexual behavior (USAID, 2011). Alcohol use also impairs judgment, including the ability to interpret social cues and reduces inhibition, which further contributes to incidences of GBV (Jewkes, 2002). This violent behavior, including GBV, is often justified because of alcohol abuse or alternatively may be used by perpetrators giving them the courage to commit violence (WHO, 2009). Perpetrators of GBV sometimes also use alcohol in order to prepare themselves to commit premeditated acts of violence, while victims may use alcohol to self-medicate in order to diminish the reality of the abuse (Jewkes, 2002). In South Africa 65% of women who had experienced spousal abuse within the last year stated the abuse of alcohol by a partner before the assault most of the time (WHO, 2004). A recent example cited in the media regarding GBV and alcohol abuse was of an 82-year-old woman in KwaZulu-Natal who was raped by a young alcohol-induced male. The 24-year-old male was sentenced to life imprisonment for this rape (SAPS Journal, 2012). The vulnerability of victims of GBV also increases should they consume alcohol and use drugs to the extent where their own judgment is impaired (MRC, 2009). Furthermore, because there is less ability to perceive the potential for violence, victims are easier targets for perpetrators of violence (WHO, 2006b as cited in Phetlho-Thekisho, Ryke & Strydom, 2012). Alcohol and substance abuse has also been reported to foster unsafe abusive sexual practices in relation to HIV/AIDS infections (Strebel et al., 2006).

2.7.2 Political factors

GBV is caused by both social factors and political factors. These will be discussed in the next section. Political factors include the legacy of apartheid as well as the culture of violence and the ineffective implementation of laws and policies, which also cause GBV.

2.7.2.1 Legacy of apartheid and the culture of violence

According to CSVr (2011), international research consistently demonstrates that societies with high levels of inequality tend to have high levels of violence. This indicates that inequality is a key driver of violence (Jewkes, 2002). Inequality is also interrelated with other social problems such as poverty, unemployment, culture and traditions, social exclusion and marginalization. South Africa is among the most violent countries in the world (CSVr, 2011; Shaw & Gastrow, 2000). This violence has been described as endemic (Eagle & Vogelmann cited in Simpson, 1992). Political violence as well as violent crime has occurred as a result of the transition of the country to democracy (Wilson, 2011). This has resulted in a 'culture of violence' (Simpson, 1992). Attacks against lower-status individuals such as women in a patriarchal society such as South Africa have been legitimized, leading to the normative use of violence against partners or women in general by men (Thaler, 2011). This has resulted in extraordinarily high levels of violence against women (Kim & Motsei, 2002). Maman et al. (2000) concur that violent societies often result in increased violence shown towards women. In 1999, a survey of GBV was conducted in three South African provinces, namely Eastern Cape, Mpumalanga and Northern Province. The findings indicated that domestic violence is strongly related to women's status in a society as well as the normative use of violence to resolve conflict or as a means of obtaining and defending power (Jewkes et al., 2002; Kim & Motsei, 2002; Morrell, 2001). Consequently, this violence against women has been accepted as a social norm (Jewkes, et al., 2002).

As stated previously in this report, local statistics for GBV are alarming with one woman is murdered every six hours by an intimate partner. This ranks among the highest rate in the world, with other countries such as Colombia, Peru and Zambia also having an

alarming prevalence of GBV (Ellsberg & Heise, 2005). Violence against women continues to be one of the most prominent features of post-apartheid South Africa (Vetten cited in Vibetti, 2009). It needs to be acknowledged and treated as a crime both in the private and public spheres (Vibetti, 2009). Much of the violence against women – for example, rape, incest, battering, and indecent assault – involves repeated attacks, often by men known to the victims (Stanko, 1985). Furthermore, socio-economic violence has resulted from the feminization of poverty because of neo-liberal globalization. This has increased women's vulnerability to other forms of violence as well as contributing to the infliction of violence (Gender Matters, 2011). Groups and communities in South Africa who are burdened by violence are the most socio-economically disempowered (Kaminer & Eagle, 2010). A study by Ellsberg and Heise (2005) carried out in the USA found that the socio-economic status of the neighbourhood had more impact on the risk of violence than individual household income levels. Thus it is clear that interpersonal violence will increase with poverty and social exclusion (Barker, 2005). This accounts for its increased prevalence in low-income, urban communities (HRSC, 2008). Furthermore, lack of opportunities post-apartheid may also result in frustration and anger, which in turn contribute to violence (Barker, 2005). Economic violence may also consist of a refusal by men to contribute towards household costs or women monitoring and controlling men's working hours. This ensures economic dependence as well as decreased ability to resist abusive acts from either party (Jewkes et al., 1999; MRC, 2009). Indeed, the structural nature of violence intertwined with poverty is challenging for South Africa and the fight against GBV.

2.7.2.2 Ineffective implementation of laws and policies

Police statistics have been known to understate the problem or to fail to cover the many forms of gender violence. This is problematic in South Africa, as there are a range of offences that can be labeled as domestic violence (MRC, 2010). The DVA provides police with clear duties in assisting with cases of domestic violence, but women's experiences indicate ineffective responses from the police because of the attitudes as well as perceptions about GBV (Mathews & Abrahams, 2001). One study in Mpumalanga highlighted that police statistics underestimate incidences of domestic violence because

of lack of recording of domestic violence cases as well as documentation in the majority of police stations (Mathews & Abrahams, 2001). A major focus of GBV prevention has been to improve the small proportion of GBV cases reported and to increase documentation. Furthermore, protection orders may be applied for but only 40% are finalized (Vetten et al., 2010).

There are many challenges facing law enforcement, for example the challenges of transformation and restructuring of detective services. This means that an individual survivor of violence is vulnerable when reporting violence, as outside intervention from relevant authorities does not appear to ensure that women are protected. Few perpetrators are punished effectively (Maman et al., 2000; MRC, 2009). In addition, women have been repeatedly known to withdraw GBV-related cases they have laid. This concern has led the South African government to consider withdrawal of cases a punishable offence. It has also been noted that police tend to be less sympathetic to victims where there is little evidence of physical violence, or where there has been a prior consensual sexual relationship between the parties involved (Vogelman, 1990).

2.8 CONSEQUENCES OF GENDER-BASED VIOLENCE

GBV is a profound health, economic and social challenge in South Africa and the consequences and costs are enormous and far-reaching (Krug et al., 2002). Much research has been done on the impact on victims such as women and children (Ellsberg & Heise, 2005; McKendrick & Hoffman, 1990; Russell, 1995). According to Heise (1994, p. 135) the global burden of disease shows that “gender-based victimization is responsible for one out of every 5 healthy days of life lost to women *or men* of reproductive age.” GBV deprives communities of the victims’ full participation, as they are burdened by the physical and psycho-emotional scars of abuse (Carrillo, 1992; Heise, 1994). The prevention of violence, including gender-based violence, was declared a public health priority by the 49th World Health Assembly Resolution, because of its damaging effects on an individual (Kim & Motsei, 2002).

2.8.1 Impact on women

It is now widely recognized internationally that women are disadvantaged when living in a patriarchal society that favours men and oppresses women through its social, political and economic institutions. This disadvantage is reflected particularly in employment, access to justice and income inequality, which subsequently impacts on political, social and economic development (Green, 1999; Stepney & Popple, 2008; UN Women, 2011).

GBV is recognized as an important public health problem both because of associated morbidity and mortality associated with assault as well as the long-term impact on women's health (Dunkle et al., 2004c). There are profound negative effects on physical and mental health, which also impact on social wellbeing by impairing fundamental rights to security and happiness (Brasileiro, 1997; Jordan, 2005). The possible resultant injuries sustained from this abuse could be fatal (Bott et al., 2005). Alternatively, the abuse may cause permanent damage to a woman's physical health (Fox, 2003).

Results of studies show that women with violent or controlling male partners are at increased risk of HIV infection as well as sexually transmitted diseases (Dunkle et al., 2004b cited in Strebel et al., 2006). This results in some women engaging in commercial sex work, which increases their vulnerability to becoming infected with HIV. Dunkle, Jewkes, Nduna, et al. (2007) assert that HIV-prevention interventions are needed to explicitly address transactional sex about ideas of masculinity which emphasize heterosexual success as well as control of women. Transactional sex is motivational in women for financial or material exchange. It is contributory to women's vulnerability to gender-based violence and sexual exploitation (Dunkle et al. 2004a cited in Dunkle 2007). Some women have little say or control over their sexual rights, especially women with violent husbands who use this violence to exercise control. Dependence on men is devaluing to women's worth, as they must often yield to men's authority and gratify their needs even if they are unwilling (Vogelman, 1990). This also increases vulnerability to HIV infection, because in a violent relationship safe sex cannot be negotiated (stopvaw.org, 2003).

The abuse may result in a lasting emotional impact for the victims of GBV (Fox, 2003). There is often an increased risk of suicide, depression and low self-esteem among victims. This is supported by research which has shown that victims of domestic violence are twelve times more likely to attempt suicide than those who do not experience this violence (stopvaw.org, 2003). They may also engage in high-risk behaviors such as substance abuse (Campbell, 2002). This leads to a significant percentage of limited health resources being used in curative/ medical interventions.

2.8.2 Impact on children

GBV can severely affect women's families. They may have difficulty in forming relationships with their own children (Fox, 2003). Children may learn that violence is acceptable as a result of seeing violence in the home. This can contribute to a broader use of violence in society. Research has shown that exposure to violence, especially against one's mother, is contributory to GBV (Thaler, 2011). Witnessing violence, including the threat of violence, also increases the likelihood of violent and delinquent behaviour. This may in turn contribute to heavy drinking patterns as well as alcohol dependence later in life, which further increases the risk of perpetration of violence (WHO, 2007). The Institute for Race Relations (IRR), (2011) shows that a child growing up with domestic violence is likely to have poorer educational outcomes, experience unemployment, practice sexually risky behavior, and commit crime as well as use/abuse alcohol or drugs. Furthermore, there is increased risk of intimate partner violence in sons of women who have been beaten, which may further contribute to an intergenerational cycle of violence (Jewkes, 2002; Romans, Poore & Martin, 2000).

2.8.3 Impact on men

GBV has an enormous impact on all members of society, with men being equally affected. They are alleged to be the main instigators of violence world wide and widespread patterns of masculinity, or definitions of what a man should be, support this violence (Lang, 2003). This means that men are taught and encouraged to use violence. GBV is linked to this use of violence and it is sanctioned both politically and culturally.

This is especially so in a country such as South Africa where the culture encourages versions of manhood which further encourage violence against women (Barker, 2005). Furthermore, traditional stereotypes of men as breadwinners while women are caregivers have negative implications for both men and women (Barker et al., 2010). According to the ecological theory social and cultural norms regarding gender roles create a climate of violence as well as tend to make violence acceptable (Krug et al., 2002). Consequently, gender roles can be compromising to men.

Additionally men's health is compromised by their engagement in risky behaviors such as indiscriminate sexual behavior, violence, alcohol and substance use as well as dominating women to demonstrate their manliness (Peacock & Leak, 2004). This indicates that these masculinist cultures can be counter-productive as well as destructive for men too. This implies that men have gender identities which also expose them to risk. An example is the norm of "male breadwinner", which is a role that is closely interwoven with a man's sense of identity in many cultures (UNRISD, 2004). This has been borne out by the excess mortality of adult males under stressful economic conditions. Connel (cited in Patel, 2005) describes the fundamental changes that men are now experiencing as a result of changing roles between men and women as a 'crisis of masculinity'. He goes on to say that the social dominance of men in the culturally sanctioned gender hierarchy is threatened, which has led to this crisis. Traditionally, men may find it difficult to express vulnerability, sadness and fear, whereas they may find it easy and acceptable to express anger (Ludsin & Vetten, 2005). These gender roles need to be questioned by both men and women. Men as well as women can contribute to these traditionally harmful and restrictive versions of what men and women should be. This is believed to increase the vulnerability of women (Barker, 2005). Fortunately there are also many men who choose to reject the dominant stereotypes of violent, controlling masculinity (www.winrock.org, 2003).

2.8.4 Impact on families

Family breakdown is a key factor in crime and violence (Patel, 2005). There may be material, emotional or social deprivation as a result. There is often lack of a supportive,

structured family life because of poor parental control, resulting in poor family bonding (MacDonald & Terblanche, 2011). If there is social disorganization at family level, young men may adopt poor role models (Thaler, 2011). Youth crime is also attributed to violence within families. In a study comparing young offenders with non-offenders, the IRR found that 27% of offenders, as opposed to 9% of non-offenders, had experienced some form of violence in their families (Holt & Eddy, 2011). More than one-third of South Africa's prison population is less than 25 years old. Rape has also been associated with increased exposure to trauma during childhood (Jewkes et al., 2009b). The IRR (2011) research also indicates that the likelihood of having a dysfunctional family is increased if a person comes from a dysfunctional family. Furthermore, the IRR (2011) states that young people are learning violent behaviour as a result of growing up with domestic violence. This can consequently transmit across generations. A survey conducted by Holt and Eddy (as cited in IRR, 2011) found that 11% of young people had witnessed family members hurting one another, while 7% had family members who hit one another when angry. Young boys witnessing abuse towards their mothers has been found to be the most consistent factor for engaging in intimate partner violence in later years (Abrahams & Jewkes, 2005; Thaler, 2011).

2.8.5 Impact on communities

The impact of GBV on communities is profound as it not only impacts on physical and mental health of individuals within the community but is an important cause of mortality from injuries and suicide. It is incapacitating, inhibiting and restricts development. GBV is greatest in communities where there is the normative use of violence which further increases the risk of violence (Jewkes, 2002a; Jewkes, 2002b). Therefore communities play a large role in perpetuating, condoning and even promoting violence (Pickup et al., 2001).

GBV has a significant impact on the economies of developing countries in terms of costs. These include lower worker productivity, specifically among women, which results in lower incomes, lower rates of human and social capital and violence being generated in other forms presently and in the future (Bott et al., 2005). Research shows that

opportunities for violence in some communities are greater if there is poverty, lack of institutional supports and physical deterioration (WHO, 2002). Social disorganization at community level can also result in lack of role models for young men and women, giving rise to further incidences of GBV (Thaler, 2011).

2.9 GBV INTERVENTIONS

It is clear that the impact of GBV is great and the consequences far-reaching. However, change is possible given effective programme intervention (WHO, 2007). Although secondary and tertiary prevention mechanisms are important, there needs to be extensive work at the level of primary prevention to stop GBV (Krug et al., 2002). Furthermore, various secondary and tertiary preventive measures can be used to stop violence.

2.9.1 Interventions targeting perpetrators

Thaler (2011) suggests that both educational programmes as well as the counseling of offenders can help prevent GBV. However, Wood (2004) asserts that treatment programmes for perpetrators can be deemed successful only if there are changes in community attitudes away from condoning violence. Belief systems change is deemed necessary to alter abusive behaviors commonly displayed by men to respectful interactions with female partners. Furthermore, there needs to be more effort made to understand the perspectives of men who commit intimate gender violence (Lazarus, Tonsing, Ratele & van Niekerk, 2009; Wood, 2004). According to the Department of Social Development (DSD) (1996), culture is highly supportive of relationships of dominance. In working with male perpetrators of GBV, McKendrick and Hoffman (1990) found that violence in many instances seemed to be a response to the activation of feelings of inequality and helplessness. Additionally, it is seen as a way of gaining income, power and respect as well as attracting women (Barker, 2005, p. 64).

2.9.2 Preventive interventions targeting men

The role of men in becoming part of the solution has largely been ignored, yet there is growing awareness that gender-based violence cannot be addressed without increased

understanding of the experiences of men and the meaning of masculinity within the context of gender relations (Heise, 1994; Patel, 2005; Peacock & Levack, 2004).

Men may well benefit from gender inequality, but they can also play a critical role in the elimination of GBV and inequality, which is a powerful strategy (femnet. org). Ways are needed to decrease the pressure experienced by men and also boys who may feel forced to conform to rigid and dangerous forms of masculinity (Barker et al., 2010). Boys and men need to question the versions of manhood which encourage violence against women (Barker, 2005). In some cultures there is the belief that some people have the legitimate right to dominate others. This could suggest that culture can serve as a creative resource for intervention (un.org.doc, 1993). Men and boys can serve as change agents and need to be engaged in order to change what manhood means (Barker, 2005). The 2009 strategy by the DSD was to focus on the prevention of GBV (Vetten et al., 2010). Thus priority should be given to GBV prevention strategies involving men. Men play critical roles and have merits and attitudes that can be utilized to influence gender relations positively. Strebel et al. (2006) further stress the importance of intervention that is linked to an understanding of gender both from men's and women's perspectives. Therefore it is essential that programmes target gender attitudes and norms and laws as well as policies related to domestic violence, including gender equality, should be strengthened (WHO, 2004). Gender roles need to be questioned by both men and women. Both boys and men need to be involved to create a non-violent and gender equal society (United Nations Division for the advancement of Women, (UNDAW), 2004).

In some countries there are programmes which have been started with young men to prevent gender-based violence. An example is Brazil, where young men work as peer health promoters educating other young men about gender-based violence prevention and gender equality. In the USA, organizations engage local male sports figures to speak out about violence against women (Barker, 2005, p. 141). There is a need for policies which can help to prevent or lead to the eradication of violence, particularly domestic violence (SAPS, 1996). The goal of the police in South Africa has been to reduce violent as well as serious crimes, including rape and domestic violence by 4-7% (Vetten et al., 2010).

A programme called “One Man Can” which was piloted by Sonke Gender Justice showed that men can be positive role models for other men and young boys in communities (Sonke Gender Justice, 2006). The “One Man Can” intervention programme was started in conjunction with ADAPT in Alexandra township. It focused on raising awareness of issues such as GBV and involved working with men and boys. The programme incorporated gender in relation to health, violence, HIV and AIDS, relationships and initiating change in communities (One Man Can manual, n.d). The programme was part of a national campaign. This was the first programme initiated in Alexandra township and was run for a period of approximately three months. It was facilitated by two facilitators from ADAPT as well as a trainer from Sonke Gender Justice.

Heise (1994) reiterates that preventative actions could significantly reduce such expenditures. This is further substantiated by Krug et al. (2002), who state that violence prevention programmes and policies can be more cost effective than other alternatives such as the incarceration of perpetrators. In South Africa GBV can be reduced only by changing the practices, beliefs and prejudices that inform it. According to Gould (2011), until the prejudice and discrimination that inform GBV are addressed, we ‘run the risk of remaining in a cycle of hidden violence’.

2.9.3 Interventions targeting women

It is imperative to eliminate GBV in order to have a gender-equal society. GBV is a violation of human rights and therefore should be addressed as a priority in development (Greig & Flood, 2004). Women need to be protected from this violence. However, women cannot be empowered without engaging men (Barker, 2005). Differences between men and women must be acknowledged (WHO, 2007), and biological differences should not be allowed to determine either sex as being inferior. There needs to be awareness of this in policymaking, as this reinforces the traditional stereotypes of men as the breadwinners and women the caregivers, which has negative implications for both sexes (Barker et al., 2010).

It has been found that micro-credit interventions may reduce partner violence. Microfinance is a development strategy that provides credit and savings services to poor women for income-generating projects (Kim et al., 2007). This has been evidenced by a study carried out in Bangladesh (Jewkes, 2002a). Both micro-finance and micro-credit interventions are empowering to women by not only improving their decision-making but also contributing to health benefits such as improved nutrition and contraceptive use. An intervention with Micro-finance for AIDS and Gender Equity (IMAGE) has been carried out and is being evaluated in South Africa to ascertain whether GBV has been reduced. This aimed to target poor women by participatory training to reduce HIV risk (WHO, 2004).

2.9.4 Interventions targeting children

There needs to be early intervention with children as well which may prevent them from becoming perpetrators of violence (Krug et al., 2002, p. 1087). The Girls Education Movement initiated in 2003 in South Africa is trying to include boys in efforts to reduce gender inequality, as they are strategic partners. The aim is to develop child-friendly schools so that negative socialization that results in violence and inequality is eliminated (Wilson, 2011). The SAPS (2011) state that the youth need to be provided with education that will develop self-esteem, discipline, entrepreneurial skills and understanding of crime as well as the associated dangers.

Children who have been exposed to violence need to be helped to reframe the acceptability of violence in different settings as well as to provide them with alternative means of handling conflict, anger and aggression (Abrahams & Jewkes, 2005). Research carried out in South Africa in 2001/2002 on women attending antenatal clinics in Soweto indicated that primary and secondary prevention of GBV is urgently needed among South African adolescents (Dunkle et al., 2004c). Interventions with family which will be explored highlight the importance of family relationships in building healthy and well-functioning individuals.

2.9.5 Interventions targeting the family

According to Patel (2005) the family plays a key role in the survival, protection and development of children under the age of 18 years. They should be supported and their capability strengthened to meet the needs of their members. They can be both a positive protective influence as well as reduce risk-promoting behaviour (Krug et al., 2002). The IRR (2011) study concurs by stating that the family plays a role in socializing children. Resocialization is needed in the family so that this permeates to other social institutions like marriage, religion, education, politics and the economy (Kambarami, 2006). By creating an enabling environment families are able to protect and nurture children (Krug et al., 2002, p. 1086). The South African family is in crisis and the breakdown of the family is at the root of most social problems (Laganparsad, 2011). Research by Abrahams and Jewkes (2005) carried out in Cape Town indicated that violent behaviour as adults could be attributed to witnessing abuse of one's mother as a child as well as engaging in various violent behaviors in adulthood. Findings from the Cape Town study suggested that the violent behavior engaged in by males in adulthood may have been prevented or diminished had they not witnessed abuse of mothers as children. In addition, the White Paper for Social Welfare (1997) provides for the strengthening of families and recognizes the importance of family as a critical point of care, nurturance and socialization.

2.9.6 Interventions targeting the community

According to NICRO, (2011), communities need conflict-resolution skills as well as change attitudes to non-abusive attitudes. NICRO is making efforts to raise awareness in communities regarding the impacts of domestic violence, for example. Pickup et al. (2001) argues that the social and cultural values supporting violence against women need transforming. Communities also need to be involved in prevention strategies that challenge gender norms and gender equality, as they are believed to contribute to sustainable and efficacious behaviour change. In Gambia an evaluation of a Stepping Stones pilot study found that intimate partner violence stopped up to three years after the study (WHO, 2004). Stepping Stones is a participatory training programme focused on HIV prevention as well as gender and aspects of gender (Bott et al., 2005; WHO, 2004).

Because it is participatory, there is involvement of the community members, which increases efficacy and sustained behavior change.

Research has found that interventions aimed at the reduction of societal levels of intimate partner violence may have an impact on other forms of violence (Abrahams & Jewkes, 2005). Society is one of the determinants in shaping attitudes of the youth (Osei-Hwedie & Kgwatalala, 2011). Evidence suggests that GBV can be prevented in developing countries through life skills programmes that address gender issues as well as relationship skills (Jewkes, 2002a). Additionally the media as well as society can be powerful agents of change. Because mass media reaches many of the population, it can play a positive role in the struggle against violence against women. Thus there are international media organizations that are beginning to make efforts to ensure that own efforts contribute towards transforming gender power relations rather than perpetuating inequality (Pickup et al., 2001). Morna and Walter (2009) concur, stating that there needs to be more emphasis on GBV prevention through communication for social change such as the mounting of prevention campaigns. Understanding of the gender system from the perspectives of both men and women within the South African context needs to be developed, and this would be essential to any successful intervention (Strebel et al., 2006).

As Abrahams, Jewkes and Laubsher (1999) remark, no single factor causes GBV. Therefore interventions need to be made at all levels, ranging from personal-level changes in perception and behavior of gender as well as gender roles. Also included would be ways of addressing the social and historical realities of a patriarchal society. Culturally, violence against women in South Africa has been seen as something to be endured. In order to prevent violence steps need to be taken to eliminate the norms and values which legitimize and glorify violence (Gelles, 2000; Pickup et al., 2001). Communities can also play a central role in the prevention of violence, and positive economic development should be promoted in ways that reduce inequities (Krug et al., 2002, p. 1086). People should be made aware of their human rights (Fox, 2003).

2.10 THEORETICAL FRAMEWORK: ECOLOGICAL APPROACH

The ecological framework (Ellsberg & Heise, 2005) will be used to understand the interplay of personal, situational and socio-cultural factors that combine to cause abuse and to understand the consequences of GBV. The framework shows how the environment influences human behaviors and vice versa, and so focuses on the interaction between the two at different levels (Green, 1994). These interrelated systems have an influence on an individual's life from early childhood to adulthood (Bronfenbrenner, 1979). The environment consists of the political, social, cultural, economic and psychological environment. The political environment consists of leaders and political activities; the social environment is family and schools, churches and clubs. The cultural environment is the values, mores and traditions of a society: it is the framework whereby people live. The economic environment is shaped by commerce and industry and the rate of employment; it is also shaped by informal employment. The psychological environment consists of "the attitudes that people display towards life around them" (Swanepoel & de Beer, 2006, p. 13).

Four levels of ecological components, as depicted in Diagram 2.1, are used to understand the influence of hierarchical environmental systems on individuals. These are the microsystem, which refers to an individual's immediate environment; the mesosystem, which refers to the interactional process between the microsystems; the exosystem, which affects an individual indirectly, and the macrosystem, which are the political, cultural, social and economical forces affecting individual functioning (ecological theory.tripod.com). This framework combines biological, socio-cultural and personal factors affecting an individual, which could include childhood experiences of violence at home as well as in the community. There is also a focus on close relationships among family, friends and peers. It explores how these relationships increase the risk of being a victim or perpetrator of violence (WHO, 2002). The community context explores the contexts in which social relationships occur as well as examining risk factors existing within schools, workplaces and neighborhoods (WHO, 2002). This could be the absence of social networks, resulting in the isolation of women and families, delinquent peer groups as well as poverty and high levels of unemployment (Ellsberg & Heise, 2005;

Krug et al., 2002; WHO, 2002). The fourth level of the ecological framework focuses on the societal factors creating or inhibiting a climate of violence. This includes the social and cultural norms – for example, those which entrench male dominance over women and children, gender roles as well as the acceptability of violence (Krug et al., 2002; WHO, 2002). Larger societal factors include health, economic, educational as well as social policies that may help to maintain economic or social inequality between societal groups. Factors at each level are strengthened or modified by factors at another (WHO, 2002).

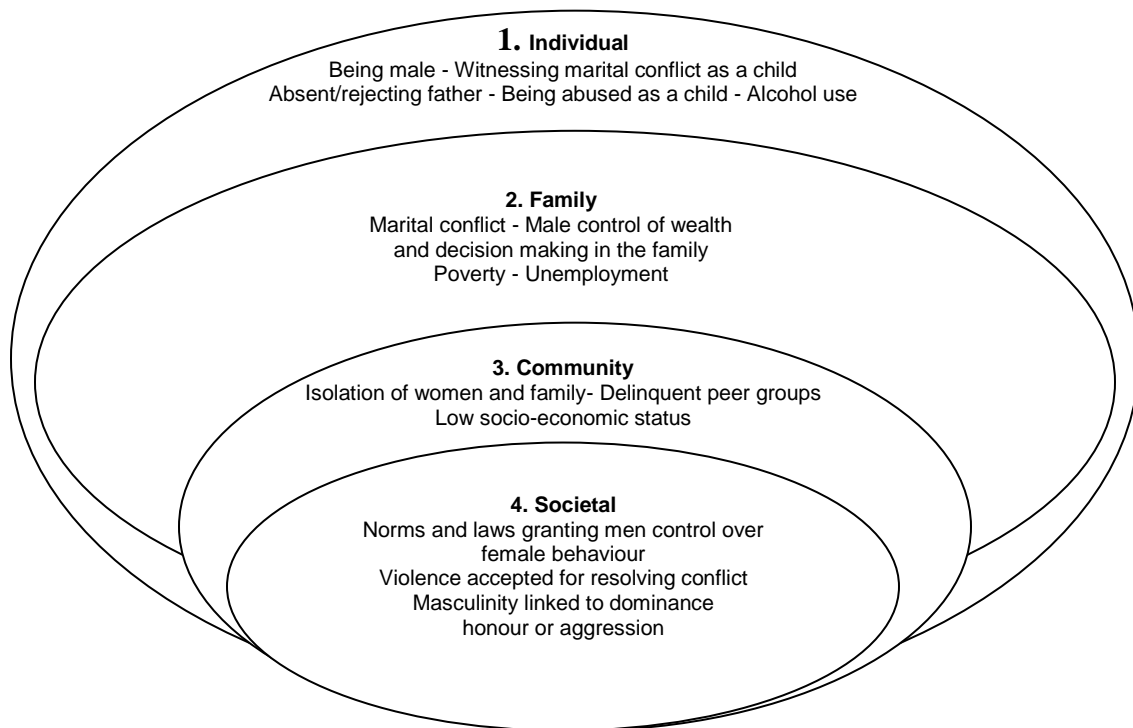


Diagram 2.1 Ecological theory (adapted from Heise, 1998 cited in Ellsberg & Heise, 2005)

Social work practice previously was a linear, causal approach that emphasized specific systems methodologies that proved to be ineffective. A linear approach lacks a unifying conceptual construction and framework for examining the complexity of GBV, especially the focus on the interaction and reciprocity of individual and environment. In applying the ecological approach social work practice also seeks to identify the strengths and weaknesses in the transactional processes between these systems and intervene. The ecological framework supports the notion that apart from the individual's perspective, other factors have a role to play, as behaviour is determined by the individual, her/his

environment and their interaction (Fraser, 1998). The factors that influence GBV experiences and processes are dynamic, mutually reciprocal and bi-directional. Sideris (cited in Lutya, 2001, p. 20) reiterates that the social context must be taken into account in research on violence against women so that the relationship between violence and non-violence in intimate relationships can be understood. Thus, GBV is a complex issue, shaped by many forces which operate at various levels i.e. micro, meso and macro levels in a specific setting. The ecological framework can also be used to understand the prevention programme while focusing on the links between social-community, gender and cultural factors and the problems arising from these linkages.

Social work is committed to social and economic justice, meaning that inequalities are decreased and opportunities are created. This study can document the inequalities in the lives of individuals as well as analyze how social structures and policies enhance and restrict opportunities for individuals and groups (Riessman cited in Shaw & Gould, 2001).

2.11 CONCLUSION

In conclusion, the literature reviewed shows that GBV is increasing and to date shows little prospect of decreasing, especially in South Africa. A high percentage of women remain subjected to GBV, whether it is physical, emotional or sexual. This is despite legislation and the increasing awareness of the enormous impact on development, especially in South Africa. The factors causative in GBV are both social and political. What was significant was the impact of gender as well as culture in causation. Some traditional practices, for example, lobola, seemingly serve to entrench GBV instead of protecting the woman, which was the original intention. Other causative factors include substance abuse, such as alcohol abuse, which leads to behavior change and exacerbates violence. Political factors include the use of violence resulting from the apartheid system. This means that people have learnt violence as a way to resolve conflicts, or as a means of communication. Despite legislation and policies implemented supposedly for the protection of people, lack of law enforcement means that people are not protected, especially vulnerable groups such as women. The implications and consequences are far-

reaching, not only for individuals such as men and women, but for the community and society as a whole. This chapter explored the definition of GBV, the statistics as well as causes and consequences. Possible interventions were described. The ecological theory was also used as it examines the interplay of different levels as causative in GBV. The methodology used in the study will be described in the following chapter.

CHAPTER THREE

METHODOLOGY

3.1 INTRODUCTION

This chapter examines the research approach and design, and the methodology and analysis used in the empirical phase of study. It includes the pretesting of the semi-structured interview and the reflexivity of the researcher, and concludes with ethical considerations in terms of the research study.

3.2 RESEARCH APPROACH: QUALITATIVE

A qualitative approach was followed. Qualitative research was deemed the most appropriate method for this research, as the aim of the study was to explore the perceptions of men who were involved in a gender-based violence prevention programme. Qualitative research was therefore the most appropriate way to answer the research question. Qualitative research therefore not only seeks to interpret the meanings that people have but focuses on the details of human life (Payne & Payne, 2004). In this report the researcher was interested in understanding the perceptions of men involved in a gender-based violence prevention programme. Qualitative research is also flexible, which allows for changes and adaptations when necessary (Babbie and Mouton, 2001). This helped to explore and to foster an in-depth understanding of the research problem under investigation so that there was a much more nuanced understanding (Creswell, 2009; Ellsberg & Heise, 2005). The aim of the research was to explore the perceptions of men involved in a gender-based violence prevention programme, which was a relatively unknown research area. Exploratory design uses an inductive approach which is aimed to gain further insight into the topic being researched.

3.3 RESEARCH DESIGN

A research design is a plan or blueprint of how the researcher intends to conduct the research (Babbie & Mouton, 2001). Narrative research design was used as it was considered the most appropriate design enabling the researcher to explore various aspects relating to GBV, including men's perceptions. A narrative approach aims to interpret the

stories of the individuals whilst focusing on story building (O’Leary, 2004). In narrative analysis what participants stories take for granted can be analysed for social meanings and effects (Riessman as cited in Shaw & Gould, 2001). The researcher was interested in the narratives of the participants and their experiences which is why narrative research design was used in this study.

3.4 POPULATION AND SAMPLING

A population refers to the specific cases that the researcher wanted to study (Neuman, 2000). According to Babbie and Mouton (2001), population can also refer to the collection of all individuals, families, groups that the researcher is interested in finding out about. The population from which the sample was taken was the participants’ of the GBV prevention programme at the Alexandra Community Centre, numbering approximately fifteen to twenty. A sample is a portion of the population selected for the study (Mark, 1996), the GBV prevention programme, which in this case was twelve participants. Sonke Gender Justice had initiated a “One Man Can” national campaign.

A non-probability sampling technique, namely purposive sampling, was used to select participants for the research. Purposive sampling is a deliberate process of selecting participants based on their ability to provide the needed information. These participants were information-rich because of their knowledge and ability to describe the phenomenon under study so that they could best help the researcher understand the problem and the research questions (Creswell, 2009; Donalek & Soldwisch, 2004).

The criteria used by the researcher included participants who had participated in the programme on a regular basis since its inception, participants who were above the age of eighteen years, and participants who were all male. The participants’ were not known perpetrators of GBV. They attended the programme weekly or bi-weekly since the inception of the programme in September 2011. This indicated that they had a thorough knowledge and were familiar with the contents of the programme. Additionally, it was ascertained that none of the participants had previously taken part in this prevention programme or any other GBV prevention programmes. The participants were selected

from the GBV prevention programme “One Man Can” by Sonke Gender Justice, which is run in conjunction with ADAPT-an organization based in Alexandra.

Furthermore, to ensure trustworthiness of the research three key informants were individually interviewed in connection with gender-based violence using semi-structured interview schedules. Each key informant had an individual semi-structured interview schedule (See Appendices H, I & J). This is termed triangulation of data, meaning that information is collected from various persons who hold different points of view. Thus, various and divergent constructions of reality can be elicited (Babbie & Mouton, 2001). Furthermore, credibility of the research was enhanced by data triangulation involving these two sets of informants, namely the main participants and the key informants. The three key informants included a researcher at the Centre for the Study of Violence and Reconciliation (CSVr), a programme manager at People Opposing Women Abuse (POWA) as well as a manager at Sonke Gender Justice. The criteria used to select the key informants were having worked in GBV prevention programmes at least six months prior to the research study and availability during data collection.

3.5 RESEARCH INSTRUMENT

The data collection tool used in the study was semi-structured interview schedules. A semi-structured interview is defined as an interview organized around areas of particular interest while still allowing considerable flexibility in scope and depth (Greeff, 2005). Semi-structured interviews enabled the participants to give their own opinions and perspectives, and they also elicited unanticipated answers, which allowed for increased insights and information (Grinnell & Unrau, 2011). The interviews were carried out using specific questions (Becker & Bryman, 2004). Thus, an open framework was used which allowed for focused yet conversational communication in order to minimize predetermined responses (Patton, 1982). Therefore, there was commitment to openness in following the participants’ lead in the interview situation (Hesse-Biber & Leary, 2012). Furthermore, suggested probes were used with open-ended questions to elicit data and explore the issues around the topic that the participants’ may not have provided spontaneously. This provided structure and enhanced exploration and understanding.

Probes used enabled the participants and the researcher to see the situation in increased detail (Kadushin, 1990).

Open-ended questions were also used that were appropriate for the cultural group being interviewed (Becker & Bryman, 2004). So although the wording of the questions and probes were predetermined, the responses were not, which enabled each participant to respond on his own terms (Patton, 1982; Reid & Smith, 1981). A detailed picture of participants' beliefs, perceptions or accounts of their experiences within the GBV prevention programme was gained (Greeff, 2005). The semi-structured interview schedule is set out in Appendix F. The interview schedule for the key informants differed from that of the participants, although they were also interviewed using indepth interviews.

3.5.1 Pretesting of the research instrument

The pretest helps in refinement of the research tool (de Vos, 2005). The research tool was pre-tested to enhance reliability and validity by ascertaining applicability of the research questions. This meant that the researcher was able to ascertain whether or not questions were relevant and understandable. Pretesting also helped to estimate how long it would take to complete the interview (Mark, 1996). In the pretest interview, the duration of the interview was thirty-five minutes. The pretest was carried out only once ethical clearance from the university had been obtained.

The wording of the questions was sensitive to the vocabulary level of the respondent so that differences such as age, race, class, gender, ethnic were respected (Kadushin, 1990). The participant of the pretest was not part of the study but closely resembled the characteristics of the target group (de Vos, 2005; Mark, 1996). To further enhance dependability, the participant's permission to audio-tape the interview was requested prior to the interview. The apparatus used, a voice recorder, was also pilot tested (Neuman, 2000).

As a result of the pretest interview some questions were simplified so that the participants would have a clearer understanding. For example, “what have been some of the highlights of the programme?” was changed to “what have you enjoyed most about the programme?” There was also a further question added, namely “In your community what are the incidences of GBV?” The word ‘difficulties’ was substituted for the word ‘challenges’ in the question “what were the challenges you faced?” Regarding the programme there was also the addition of a further question, namely “how will it (the programme) affect you in the future?” Consequently as a result of the pretest it was felt that the questions asked were appropriate, understandable and sufficient for the purpose of the study and no major flaws were identified.

3.6 DATA COLLECTION

An unparalleled degree of immersion by the researcher as an instrument of data collection is required in qualitative research. The researcher must be a sensitive instrument of observation in order to categorize meanings from raw data (Padgett, 1998).

The context of the study was Alexandra Township, which is situated 12 kilometres north east of the Johannesburg city centre. Alexandra was established in 1912 and is one of Gauteng’s oldest and most densely populated townships (www.southafrica.info). It is surrounded by the wealthy suburbs of Sandton, Kelvin and Wendywood. Alexandra covers an area of over 800 hectares and suffers from lack of infrastructure, access to basic services, poverty, unemployment and high crime. The infrastructure was originally designed for a population of about 70,000 people. At present the population is estimated to be between 180,000 to 750,000, which has led to overcrowding and overloading of the infrastructure (World Bank, 2001). The 3 Squares Community Centre is situated in Alexandra. The One Man Can programme was run in Alexandra with facilitators from ADAPT. ADAPT wanted to run a prevention programme targeting men because of the prevalence of GBV in Alexandra.

In-depth individual face-to-face interviews were carried out with twelve participants at the 3 Squares Community Centre to elicit their perceptions. Each interview lasted

approximately thirty-five to sixty minutes. Prior to the interviews the participants were given a participant information sheet in order to clarify their understanding of the purpose of the interview. The facilitators of the programme from ADAPT were also informed about the purpose of the interviews. The participants' were told why the researcher was present prior to carrying out the interviews and the reasons for the research were explained. This was also discussed with the participants' by the researcher and the researcher stressed that the interviews would be private and confidential and so participants' would not be identified. The researcher explained the questions to the participants' and the participants' were encouraged to ask any questions should they be unclear. With the participants' consent, the interviews were audio-taped and later transcribed verbatim. The participants each signed a consent form for participation (Appendix D) as well as a consent form for audio-taping the interview (Appendix E). This enabled the researcher to give full attention to each participant as well as a record of what was said during the interview so that accuracy was ensured for the analysis. De Vos et al. (2005) suggest placing the tape recorder inconspicuously so as to prevent withdrawal or reluctance by the participant.

The researcher tried to establish rapport with the participants from the beginning of each interview. This refers to trust and respect, as well as the understanding that develops between the interviewer and participant (Becker & Bryman, 2004). In order to facilitate this rapport participants were listened to attentively, thus conveying interest (Greeff, 2005; Leedy & Ormrod, 2010). The researcher also attempted to make the participants feel comfortable, safe and valued, and created a climate in which participants were able to provide honest and complete information (Grinell & Unrau, 2011; Hesse-Biber & Leavy, 2012).

By carrying out face-to-face interviews, the researcher was able to observe non-verbal behaviour such as non-verbal expressions. These were jotted down. Non-verbal behaviour was also used by the researcher to acknowledge responses – an example being nodding. This indicated attentiveness by the researcher (Kadushin, 1990). Eye contact was maintained by the researcher as well as open body language, meaning sitting or

leaning toward a participant. Building rapport was further enhanced by using appropriate gesturing – for example, nodding (Hesse-Biber & Leavy, 2012). The participant's right to autonomy was also respected and no control or power was exerted by the researcher (Kadushin, 1990). The participants' were allowed to terminate the interview if they wished or not answer questions that they were not comfortable answering.

The interviews took place at the 3 Squares Community Centre in Alexandra, a venue which was convenient for the participants and which was where the prevention programme was held. Interviews were carried out in as private and as quiet an area as possible to minimize interruptions and distractions (Leedy & Ormrod, 2010). A climate was provided that was conducive to participants providing as clear and adequate answers as possible (Grinnell & Unrau, 2011). English language was used during data collection. The participants' second language was English and an interpreter may have been used if the participants were unable to understand or for further clarification. None of the participants requested an interpreter although they were made aware of the right to have one. At the end of each interview, the interview was summarized with the participant to clarify any misinformation. The participants were all asked the same questions, which enhanced reliability. Reliability refers to dependability or consistency which the qualitative researcher uses in order to record observations consistently as well as checking the transcripts for any obvious mistakes made during transcription (Creswell, 2009; Neuman, 2000). Dependability means the degree to which readers believe that findings did occur as researcher said they did (van Der Riet & Durrheim cited in Terre Blanche, Durrheim & Painter, 2006, p. 93). The interviews with both the participants and key informants were conducted by the same researcher so that dependability was increased. The tapes and transcripts will be destroyed two years after publication or six years after completion of the unpublished research. The researcher collected detailed descriptions of data in the context and reported on them sufficiently so that transferability was enhanced. Transferability refers to the extent to which the findings of the report can be applied to other contexts or recipients (Babbie & Mouton, 2001).

3.7 DATA ANALYSIS

Qualitative analysis transforms data into findings and is expressed as words, pictures or objects (Neuman, 2000). Data analysis aims to discover patterns among the data which will point to a theoretical understanding of social life (Rubin & Babbie, 2005). It can also inform decision-making (Patton, 1982). The data was transcribed verbatim and analysed (Creswell, 2009). It was thus prepared and organized, thereby bringing order, structure and meaning to the mass of collected data (Creswell, 2007; de Vos et al., 2005). By reducing the volume of information and separating significant data, patterns were identified, thereby allowing for the construction of a framework which communicated the essence of what the data revealed (de Vos, 2005). In this report this applied to the text data as in the transcribed interviews.

As a result of analysis of the data, an increasingly detailed knowledge of the topic being studied was developed (Creswell, 2007). Thematic content analysis was used for data analysis in order to increase understanding about the participants' knowledge and experiences of GBV as well how the programme was perceived. This method of analysis is a flexible and effective way of analyzing the qualitative data, thereby helping the researcher to organize and describe detailed data by the identification of themes in the data (Padgett, 1998). The data in each theme was described to find out the defining elements and dimensions. Steps in thematic content analysis included familiarization and immersion, inducing of themes which allowed for the use of informants language to label the different categories as well as coding, which entailed marking the sections of data relevant to one or more themes identified. This was followed by elaboration which entailed exploring the themes identified more closely. Interpretation and checking followed. Interpretation involved making sense of the data either based on intuition or social science construct or both (de Vos, 2005). Checking entailed that the interpretation was gone through finely to rectify weak points after putting together the interpretation (Terreblanche, Durrheim & Painter, 2006). The collected data was also analyzed with reference to previous literature reviewed.

3.7.1 Reflexivity

The researcher was able to use a reflexivity diary so that she was able to be more objective. This was an ongoing task which involved increased self-awareness and self-correction (Padgett, 1998). It is recognized as a legitimate form and framework for research in that the self of the researcher is the lens through which the world is seen. Therefore, the lens was both important for data and as an instrument which required vigilance by the researcher throughout the study (Fook, 2001; Padgett, 1998). The researcher also used a research diary, which included what participants did or said during the interviews that may have evoked something in the researcher (Holliday, 2007). An example was when participant E spoke about the rejection of his father and divorce of his parents as a result of GBV. The participant began speaking more rapidly and was unable to maintain eye contact as he became increasingly distressed.

The researcher was aware of the risks involved to the researcher, one being emotional distress possibly because a respondent's comments may have struck an emotional nerve (Padgett, 1998). Bracketing was therefore used by the researcher, which entailed a conscious effort by the researcher to suspend assumptions, beliefs and feelings so that participants' experiences could be better understood. Thus, the researcher's issues, such as having had personal childhood experience of GBV, were identified but not repressed or eliminated, and therefore did not interfere with the research process (Padgett, 1998). Thus the researcher attempted to remain as impartial as possible. The researcher was aware of avoiding the risk of changing the interviewing relationship into a therapeutic one, as the goals of each are different (Seidman cited in de Vos et al., 2005). This was challenging for the researcher at times, because it was normative for her as a social worker to explore emotions and ways of helping participants to cope with challenges. Therefore, the researcher tried to remain detached so as to remain objective. This she was able to do as she was very aware of herself as being the instrument of data collection as well as being aware of the purpose of the research interviews. There was an awareness of ensuring that the researcher did not become too emotionally involved nor try to help the participant to find solutions. This was the case in two interviews where participants experienced distress as a result of personal experience of domestic violence. Participant

D attempted to try to understand why his father beat his mother and also why his mother returned time and time again to the same situation. Participant E suffered the rejection of his father and experienced distress in verbalizing his sadness. This resulted in termination of the interview. This participant was referred to counselling.

These interviews evoked sadness in the researcher and she therefore had to prevent herself from further exploring and reflecting the participants' feelings. Frustration was also experienced by the researcher due to the fact that on some days of the programme there were insufficient participants to interview, or the participants were not within the specified ages between 18 years and 30 years. This may have been because of erratic attendance figures. There had also been the possibility of lack of communication by the facilitators.

3.8 ETHICAL CONSIDERATIONS

Ethical guidelines apply to every step of the research process (Collins et al., 2000). The principle of respect concerns the respect for the autonomy and protection of vulnerable persons. Qualitative research focuses on sensitive topics and also engages more closely with participants; therefore it was important to adhere to ethical considerations and conduct (Hennink, Hurter & Bailey, 2011).

3.8.1 Informed consent

The ethical norms of voluntary participation, as well as no harm to participants, are formalized in the concept of informed consent (Babbie, 2007). The participants based this voluntary participation on a full understanding of the possible risks involved in participation (Babbie, 2007). An individual's consent to participate must therefore not be coerced (Mark, 1996). Information sheets and consent forms were given to each participant. This also ensured that each participant understood the purpose of the research (Ellsberg & Heise, 2005). The information sheets also provided information as to what subjects were covered as well as how they would find out about the results of the study (McLaughlin, 2007). The researcher developed informed consent forms for the participants which they signed prior to the research process. According to Wassenaar

(cited in Terreblanche, Durrheim & Painter, 2006), the standard components of consent are the provision of appropriate information, participants' competence and understanding, voluntariness in participating and freedom to decline or withdraw after the study has started and the formalization of consent (usually in writing). The research report was explained verbally to participants prior to each interview. There was also a consent form which was signed by each participant giving permission for the interview to be tape recorded.

3.8.2 Voluntary participation

Voluntary participation means that no participant should be forced, or coerced, to participate (Neuman, 2000). In this way participants' self-determination is respected (Strydom cited in de Vos et al., 2005). Participants needed to know what they would be asked by participating so that they were able to make an informed decision. Voluntary participation also means that a participant can withdraw at any time during the research process and that there will be no repercussions should they do so (Shenton, 2004). Any risks or benefits of participation should be stated (Padgett, 1998). The researcher strove to see that no harm was done to participants and only information that a participant was willing to share was obtained.

3.8.3 Confidentiality

The researcher will not reveal any information that would cause harm to the participants or endanger their personal lives (Babbie, 2007). This was done by ensuring that the attribution of comments could not be linked to individual participants (McLaughlin, 2007). The principle of respect means that the participants are treated with respect during the research in that their individual information remains confidential (Easter, Davis & Henderson cited in Terre Blanche, Durrheim & Painter, 2006).

3.8.4 Anonymity

The researcher did not disclose any participant's identity, and in this way ensured that identities were protected (Neuman, 2000). The researcher was able to identify the data provided by a respondent by the use of codes or pseudonyms, and the participants were

not required to reveal their real names. Only the researcher had knowledge of the identity of the participants (McLaughlin, 2007). Although the researcher could not guarantee anonymity, she reassured the participants of confidentiality. In addition, the researcher ensured that the tape recordings of the interviews were not given or listened to by any person except the researcher and her research supervisor.

3.8.5 Avoidance of harm or non-maleficence

Research should avoid as well as minimize harms and wrongs (Wassenaar in Terre Blanche, Durrheim & Painter, 2006). This meant that the researcher was ethically obliged not to cause harm (Mark, 1996). What needed to be considered prior to the onset of the research was whether it was likely that through participation harm could be caused to participants. This means that participants should be protected from mental and physical discomfort or distress (de Vos et al., 2005). The research study was a sensitive subject for some of the participants. The researcher needed to identify participants who may have been vulnerable before the research was undertaken. An example may have been a participant who had personally experienced GBV. In this way they can be eliminated prior to the research process (de Vos et al., 2005).

The researcher was sensitive to any discomfort experienced by the participant and checked if the participant was willing to continue the interview (McLaughlin, 2007). However, if a participant experienced discomfort/distress, the interview was discontinued, as was the case for Participant E. The participant was referred to Thapelo Rahlogo for counselling, free of charge at ADAPT in Alexandra. Harm can also be caused to participants in the analysis and reporting of data, so care must be taken in this regard (Babbie, 2007).

3.8.6 No deception

There was no deception of participants either by withholding information or by offering incorrect information to ensure their participation (Neuman, 2000). The researcher was honest about the purpose of the study in that the participants were aware that the study

was undertaken as part of the requirement for a Master's degree. No incentives or coercion was used.

The research code of ethics of the University of the Witwatersrand had to be adhered to. This meant that ethical clearance application (non-medical) was submitted and granted by the University of the Witwatersrand in order to obtain permission. Both the Ethics Committee and the Post Graduate Committee approved the research proposal (Appendix A). Permission to carry out the research at Sonke Gender Justice was approved (Appendix B).

3.9 LIMITATIONS OF THE STUDY

3.9.1 Sample

The sample of the population was small and non-representative, as only twelve men in programme were interviewed. Therefore the study cannot be generalized to the general population.

3.9.2 Data collection

It was challenging for the researcher to locate the best place to interview participants, as the programme was run at the community centre and it was noisy. The researcher experienced challenges on some occasions in terms of accessing the most suitable place to interview participants in that it was quiet and private. There were also interruptions to the programme if the hall was booked out for another function, an example being World AIDS Day, which meant that the researcher could not continue with the interviews and had to wait for the rescheduling of the programme.

3.9.3 Use of tape recorder

There was also the limitation in the use of tape recorder. It was tested prior to the recording of the first interview but did not work. This necessitated the postponement of the interview and the purchase of a digital voice recorder.

3.9.4 Participant bias

There is the possibility that some participants may have been reluctant to share their experiences congruently, which meant that there was the possibility that valuable data was not captured. This is because they may have been afraid of possible repercussions should management become aware of their views on the programme.

3.9.5 Gender bias

Furthermore, the presence of the researcher may have influenced responses because of gender dynamics. This has been corroborated in literature as possibly impacting on research results (McKee & O'Brien cited in Cavanagh & Kree, 1996). However, the researcher was sensitive to the factor of gender and therefore strove to be neutral and objective.

CHAPTER FOUR

PRESENTATION AND DISCUSSION OF FINDINGS

4.1 INTRODUCTION

This chapter will present and discuss the key findings of the research report according to the aim of the study and the objectives set. The key themes which emerged in the data collected are discussed according to the primary aim and secondary objectives of the study. Throughout the discussion the findings were supported by relevant literature. Included in the themes and subthemes identified were verbatim quotes by the participants. The participants were all African males aged between 18 and 24 years living in Alexandra Township.

4.2 PRESENTATION OF THEMES

The themes identified in this study will be presented in Table 4.2, below:

Table 4:2 Diagrammatic presentation of themes

THEME	CATEGORY	SUB-CATEGORY
Knowledge of GBV	Understanding of GBV	<ul style="list-style-type: none"> - physical abuse as manifestation of GBV - emotional abuse as manifestation of GBV - sexual abuse as a manifestation of GBV
Causes of GBV	Social Factors	<ul style="list-style-type: none"> - culture - gender - substance abuse - financial issues
	Political Factors	<ul style="list-style-type: none"> - Ineffective implementation of/adherence to law - culture of violence
Consequences of GBV	Impact on individuals	<ul style="list-style-type: none"> - arrest and conviction - effects of GBV on individual participant

	Impact on families	- continuation of cycle of violence
	Impact on communities	- normalization of violent behavior in communities
Prevention programme	Motivating factors for joining programme	- invitation by facilitator/co-facilitator - personal motivating factors
	Highlights of the GBV programme	- positive influences on behaviour and attitudes - use of role models - activities and topics increased knowledge - groupwork as a vehicle for change
	Challenges of the programme	-personal characteristics and challenges
	Recommendations for the programme	- creation of awareness of GBV - sense of professionalism - inclusion of others

4.3 DISCUSSION OF THEMES

The key themes that arose will be discussed in this section and include: knowledge of GBV and understanding around GBV; causes and consequences of GBV; and the GBV prevention programme. The findings from the data collected are supported by relevant literature previously reviewed. The key themes were adapted to the ecological approach based on the experiences of the participants and included the nature of the relationships between the different settings. The protective and the preventive factors within the ecological approach are acknowledged and included in the discussions. The responses of the participants were indicated by the use of italics which shows that the researcher sought to understand the perspectives of the participants more fully by using personal insights, feelings as well as her perspectives emphasizing the human factor in qualitative research (Neuman, 2000).

4.3.1 Knowledge of GBV

GBV comes in many forms throughout one's life cycle and it can also be understood from diverse perspectives. This first theme will discuss the research participants'

knowledge of GBV, including their understanding of GBV as well as the different types of GBV.

4.3.1.1 Understanding of GBV

According to UNFPA (2005), GBV is widespread, it violates the rights of those affected and it manifests itself in diverse ways. It is against this background that the participants' diverse knowledge and understanding of the term GBV will be discussed. This discussion will focus on three key aspects of GBV which came across quite clearly from the research participants' perspective. These are, understanding GBV as including physical abuse, emotional abuse and sexual abuse. The researcher acknowledges that other forms of GBV exist such as harmful traditional practices, trafficking in persons, forced marriages, economic deprivation and deprivation of liberty (Bott et al., 2005; Spratt & Trang, 2012; stopvaw.org, 2003). However, they will not be discussed as they were not key findings.

(i) Physical abuse as a manifestation of GBV

GBV has been previously reported to include, but is not limited to, acts related to physical violence and abuse such as battering, hitting, choking, kicking, pushing, shoving, punching, throwing objects and slapping, all which can cause physical injury (Rasool et al., 2002; Spratt & Trang, 2012). By using physical harmful tactics, it is clear that the goal of the perpetrator is to control and/or dominate the victim (UNFPA, 2005). In this research, most participants reported that GBV was physical abuse, primarily perpetrated against women and sometimes children by men. Physical abuse was hitting or beating a woman, which included being violent towards one's partner, children or sometimes even colleagues. Interesting findings by Zierler et al. (1995), however, report that more traumatic abuse is experienced when the perpetrator and victim have a closer intimate relationship. This explains why it's mostly women and children who are usually victimized, meaning that it is based on the close relationship that they might have with the perpetrator. Research by Krantz and Garcia-Moreno (2004) corroborates this, stating that perpetrators of violence against women are or have been in a close relationship with the women. The ecological theory highlights the importance of proximal social

relationships in the perpetuation of violence (USAID, 2009). Comments from the participants supporting physical abuse as an aspect of GBV included:

“(GBV) Normally think of men beating up women and children” (Participant A).

“GBV...when a man is hitting a woman” (Participant F).

“Maybe girlfriend cheating, boyfriend becoming angry then he slaps girlfriend and its abuse that one” (Participant J).

It was evident with further probing that participants’ understanding of GBV was linked to perceptions that it is mostly men who are responsible for perpetrating GBV. Men have been reported to violate women’s rights or put into place structures of domination and violence. Violence against women also undermines their equality and dignity. This has been evidenced in literature which states that men are the major perpetrators of GBV, while women and children are victims (Flood, 2011; UNRISD; 2004; Abrahams et al., 2004; Bott et al., 2005; Strebel. et al., 2006; Dunkle et al., 2006). However, findings in this study, in support of findings by Browne et al., (1999) and Jordan (2005) report that women can also be perpetrators. This is further supported by the responses elicited by the participants in this study such as:

“There are men who are being abused by other women...afraid to come up with it” (Participant D).

This finding illustrates that although GBV has mainly been linked with men as the core perpetrators, women can also be perpetrators, and it is essential that interventions address ways to deal with this, as well as encourage more men to come out and report such cases.

(ii) Emotional abuse as a manifestation of GBV

Emotional abuse has been known to be a form of implicit gender violence and may include undermining a person’s worth, bullying or mistreating a person. Psychological

abuse is an aspect of emotional abuse and is defined as intimidation, humiliating and belittling (WHO, 2002). They further state that the physical violence in intimate relationships is often accompanied by psychological abuse.

Research conducted by the MRC (2010) states that emotional abuse is the most common form of abuse. This was evident in this study, as a majority of the research participants acknowledged that GBV could include verbal abuse as well as lack of respect, making belittling comments against a person, threatening and or criticizing a person. This is evidenced by the quotations below:

“Like ill treating somebody, don’t treat you with respect...don’t wanna listen. Just act with violence” (Participant I).

“Like maybe when you have a wife at home always treating them bad and doing bad things, not giving the time to explain, not sharing things with him” (Participant J).

“Violence can happen even if you call someone with a name because you are insulting them” (Participant K).

Emotional abuse could potentially also be linked to physical abuse. Research confirms that there is much overlap between the different forms of GBV. A research study carried out in Cape Town indicated that the most common forms of violence reported by women were both physical and psychological, with a high percentage (81%) of participants experiencing both (Mathews & Abrahams, 2001). Further research shows that should financial and /or emotional abuse occur, it is more likely that physical and sexual assaults are repeated. This indicates that GBV is part of pattern of controlling behavior (Dunkle et al., 2004). Dunkle et al. (2004) further argue that physical and sexual assaults are more likely to be repeated when financial and/or emotional abuse occurs simultaneously.

(iii) Sexual abuse as a manifestation of GBV

Explicit sexual violence includes rape, sexual molestation, sexual harassment or any mistreatment or control of another person sexually. Results of a cross-sectional study in Cape Town (Abrahams et al., 2004) showed that sexual abuse is usually associated with the use of violence and is common in intimate relations. However, according to research by WHO (2002), sexual violence may occur without physical violence. Manifestations of sexual violence, also evident from this research, include demands for sex using coercion and forcing one's partner to have sex. The purpose of coerced sex is to exert power and dominance, but may result also in the sexual gratification of the perpetrator (WHO, 2002). Other manifestations of sexual abuse related to GBV that were not evident in this study were demands for the performance of certain sexual acts, forcing one to have sex with other people and treating a woman in a sexually degrading manner and/or insisting on having unprotected sex (UNFPA, 2005).

Research by WHO (2009) states that sexual activity including rape is a marker of masculinity in South Africa. This is corroborated by Jewkes et al. (2005), who state that rape is used as an instrument of communication with oneself about masculinity and powerfulness. It is associated with male dominance as well as sexual entitlement (Abrahams et al., 2004). According to the literature, GBV includes forced intercourse such as rape as well as other forms of sexual coercion (WHO, 2009). One of the participants said that sexual abuse arose because of a man's lack of control.

“Men can force them (women) to have sex because they cannot control themselves, most of the men...” (Participant E).

The quotation above supports previous ethnographic research regarding perceptions of violence among South African women; which showed that sexual violence by male partners was linked to the overall pattern of male control existing in these relationships (Dunkle et al., 2004).

Research shows that there is much overlap between the different aspects of GBV (Dunkle et al., 2004). There are also various types of abuse that usually coexist in the same relationship (WHO, 2002). Non-consensual sex is the reason most often cited as a trigger for beatings perpetrated by men against women (WHO, 2002).

According to the ecological theory, experiencing, witnessing or engaging in violent behavior on an individual level is causative in GBV. In many countries violence against women is still accepted as part of normal behaviour (Krantz & Garcia-Moreno, 2004). Literature also shows that in terms of relationships with family and friends, friends who engage in or encourage violence can increase a young person's risk of either being a victim or perpetrator of violence (Krug et al., 2002).

As evidenced from the research report, GBV is prevalent in the context of Alexandra. Although it manifests as primarily physical, the participants were aware that GBV comes in many forms. They acknowledged that it can occur with other types of abuse simultaneously. It appears to be part of a pattern of control and dominance. It is difficult to highlight prevalence or the enormity of the problem, as it is common and widespread and people believe that it is normal or acceptable. It appears that it is rooted in violence and is used for various reasons. In conclusion, participants described their understanding of GBV and the different types of GBV. The following section will discuss findings pertaining to the second theme, namely the causes of GBV as perceived by the participants, including the views of the key informants and contributing factors according to the ecological theory.

4.3.2 Causes of GBV

The literature cites multiple causes of GBV. The causes of GBV reported and analyzed in this section will be discussed under the social, financial as well as political factors identified by the researcher and the participants as contributing to GBV. According to the participants, there are multiple factors causative in GBV, some of which manifest more than others.

4.3.2.1 Social factors

The social factors which the participants identified included culture, gender, substance abuse and financial issues. These will be discussed separately in the following section.

(i) Culture

Culture is contributory to unequal power relationships between men and women, which in turn are contributory to GBV (USAID, 2011). Culturally and religiously men are seen as head of the house, which includes the right to correct or discipline behaviour (Ellsberg & Heise, 2005; Rasool et al., 2002; WHO, 2009). This acceptance of male domination has further contributed to the legitimization of GBV by men (Jewkes et al., 2002; Strebel et al., 2006). In a patriarchal society such as South Africa there is evidence that men are raised to believe in their superiority, which also entails the right to inflict physical punishment on their wives (Abrahams & Jewkes, 2005; MRC Policy brief, 2009). Women are therefore expected to be submissive, and men the decision-makers (Strebel et al., 2006). This has led to GBV being socially normalized within domestic relationships (Kim & Motsei, 2002). Further research corroborates this, showing that non-familial relationships have further led to feelings of entitlement with regard to men abusing their wives and girlfriends (Wood, 2004). Culture was verbalized by participants as being causative in GBV. Comments included:

“Most men stereotyped supremacy to women...I knew from religious and cultural beliefs we’ve been raised that women inferior and men superior...when you are a man you are head of the house so whatever decisions you make then you can make them so there is nobody to contest what you say” (Participant B).

“God created man so that to be the king...people think now I am king, king of house, king of woman...why men beating women to become a man so that they can say that one he is a man” (Participant J).

“Sometimes men abusing women and beating them up, it’s the way they feel they must be” (Participant H).

Thus participants' verbalized the imposition of culture as being largely contributory to GBV. It appeared that men had the most authority and so could make decisions without anyone questioning those decisions. Furthermore, men were almost expected to use violence such as beating up women in order to be thought of as men. This is concerning in that it implies acceptance of imposed societal norms of how a man is expected to behave. To be a man, according to participants', implied having supremacy in terms of decision-making as well as using physical violence to be regarded as worthy of being called a man. A man was therefore entitled to use coercive controlling behaviour.

(ii) Gender disparities

According to research, distinctions are made by many societies between men and women which afford men more power and status (Strebel et al., 2006; UNICEF, 2000). Thus there are preconceptions regarding male and female behavior, where men are seen to fulfill certain roles and women others (misa.org, 2003). The literature has also indicated that men may experience difficulty in verbalizing emotions, while finding it easier to express emotions such as anger (Ludsin & Vetten, 2005). This may increase the likelihood of men becoming violent as a means to gain or retain control (Wood, 2004). GBV is thus a manifestation of unequal gender relations (UNDAW, 2004). The MRC policy document (2009) posits that sexual coercion that does not involve physical force, for example, is widely viewed as normal male behaviour. GBV, according to the literature, has as one of its defining features a person possessing a sense of entitlement to control or dominate (Joyne & Mash, 2012). Half of the participants verbalized that the physical strength of men was causative in GBV. This meant that men were able to take advantage of women, who in turn were unable to retaliate. Some comments highlight this fact:

“Men are to blame (for GBV) because most of the time use strength.

Women don't have that much of a strength so I put the blame on men”

(Participant D).

“Most of men are not abused because of their strength, I’d say...so women not able to fight back ‘cos of their strength is too weak, weaker than the man’s strength” (Participant E).

“Men got power, muscular power. They abuses their power ‘cos women can’t fight men so take advantage of that” (Participant L).

At a societal level according to the ecological theory it appears that gender roles are rigidly defined. This means that the male controls wealth and decision-making in the family and marital conflict is a frequent occurrence (Ellsberg & Heise, 2005). Participants further identified substance abuse as being contributory not only to GBV but also to widespread violence in Alexandra.

(iii) Substance abuse

The literature shows a correlation between substance abuse and violence as well as an increased risk of intimate partner violence (Jewkes, 2002; Krug et al., 2002; Strebel et al., 2006; Thaler, 2011; WHO, 2009). However, research by Dissel and Ngubeni (2003) contradicts this, stating that while substance abuse is a factor in abusive behavior, there is seldom real change in abusive behaviour even if alcohol intake is reduced or stopped. Further research also shows that men use alcohol in South Africa in order to gain the courage to give the woman the beatings that they feel are socially expected of them (WHO, 2002). Thus excessive alcohol consumption is said to be considered masculine behavior (Kaminer & Eagle, 2010). Half of the participants verbalized increased violence including GBV as a result of substance abuse, primarily alcohol abuse and also drug abuse, which included drugs such as *dagga* and *nyaope*. According to participants, violence also occurred more frequently at month end because of people having received salaries. This meant that people were more inclined to drink, as they had the means to obtain alcohol. The prevalence of shebeens and taverns also exacerbated substance abuse, according to some participants. A research report by Morris (2006) states that illegal, as well as legal, shebeens and taverns are prevalent in townships, resulting in the selling of liquor even to minors. According to participants, people in Alexandra drink because of

high levels of stress experienced. One participant stated that alcohol caused his father to abuse his mother. He verbalized behavior change in his father as a result of alcohol abuse. Research by Mathews and Abrahams (2001) indicates that substance abuse was linked to abusive behavior of men, with changes in partners' personalities. The same participant said:

"Cos when he is sober they don't fight at all but when he's drunk, that's when violence starts" (Participant D).

"A lot of people here because they got problems of their own so they tend to drink alcohol thinking that their stress levels and problems will decrease" (Participant F).

"Most of time when men are drunk they abuses women. They use them they abuse their power. When drunk [they] think they can take this woman home by force" (Participant L).

It was evidenced from participants' responses that alcohol abuse was perceived as being extremely problematic in the context of Alexandra becoming worse at times such as when people received salaries. This meant that they were able to purchase liquor. Furthermore, the ecological theory posits the increased likelihood of perpetrating violence if there is abuse of substances as well as the existence of local drug trade (Krug et al., 2002). At an individual level substance abuse increases the likelihood of becoming a victim or perpetrator of violence (Heise, 1998; Krug et al., 2002).

(iv) Financial issues

The literature shows that women may remain in violent relationships because of a lack of an alternative means of support (Kaminer & Eagle, 2010; Matthews & Abrahams, 2001; Vibetti, 2009; WHO, 2002). Despite it being a less recognized form of violence, it is limiting to both a woman's power and control over her own life (Ellsberg & Heise, 2005). A quarter of the participants verbalized that financial issues were causative in

GBV. This could mean economic dependence of the woman on the man leading to false expectations by the man. Violence could result if the man was refused sexual intercourse. It could also mean quarrelling about money issues, which then would lead to violence. Thus financial abuse in various ways is also another form of GBV. Comments by participants included:

“They always fighting about maybe the money, the finances etc” (Participant J).

“GBV...sometimes caused by money” (Participant K)

“Money, most of the time that causes GBV” (Participant L).

The woman could also be reluctant to disclose the GBV because of her economic dependence on the man. One participant saw GBV perpetuating because of this. By comparison, another participant verbalized that economic abuse could be financial demands by a woman, which could be experienced as stressful for the man. He added that men could have false expectations of a woman involving money. This participant smelt faintly of alcohol.

“It [GBV] prevails because women still humble and afraid...sometimes because of lack of finances maybe they are depending on his money” (Participant B).

“Woman needing man for money...you eat my money but you don’t give me what I want. So if woman refuses to have sex with the man, the man start to beating the woman” (Participant E).

“They give the man pressure...she is asking financial things...other people use men as an advantage of things...Some guys go to tavern...buy booze for these girls. At the end of the night they expect these girls to go with them without saying anything...people mustn’t make their money talk. Sometimes I give you things and expect you to give me something” (Participant H).

Thus, economic dependence can be seen as related to GBV, as it is interrelated with sexual violence and culture.

4.3.2.2 Political factors

The causes of GBV, according to participants, are ineffective implementation of the law as well as the normalization of a culture of violence. These are considered political factors.

(i) Ineffective implementation of /adherence to law

Toleration of violence and abuse in some communities means that they go unpunished and consequently laws fail to deter people (MRC Policy Brief, 2009; UNICEF, 2000). This was apparently the case in Alexandra, according to participants. Crime was problematic and offenders were not punished, which was believed to be unjust. Participants verbalized that policing was ineffective. The literature corroborates this (Rasool et al., 2002). Research by Mathews and Abrahams (2001) showed that police officials did not respond effectively to incidences of GBV, for example, because of their attitudes and perceptions about GBV. There appeared to be lack of trust in the police in that they failed to protect people in not upholding the law. Research by Jewkes et al. (1999) found that distrust existed between communities and police, with police siding with perpetrators of GBV at times. Further research shows that married women in South Africa fear to report abuse to SAPS because of the negative attitudes shown them by the police. This is indicative of ignorance and gendered bias in favour of the male perpetrator (Makofane & du Preez, 2000; van der Haven, 2001; Artz, 2001 cited in Dawes et al., 2004). South Africa has had a major focus on GBV prevention, meaning that management has been improved regarding reported cases of GBV as well as increased prosecution and conviction of perpetrators. It was anticipated that this would act as a deterrent to GBV, but has proved insufficient (USAID, 2011). One participant added that people were non-compliant with laws, which he attributed to living in a township. Comments from participants included:

“If you ask a young kid in our community what they think of police, they will say abusive” (Participant B).

“GBV always happens...like ghetto mentality. Township like we don’t obey by the rules much most of us” (Participant C).

“Crime level here it’s not good. Even [the] police it’s as if they are promoting it...as if they are ones giving permission...like we don’t have any protection...They are not good for community” (Participant F).

So, according to participants, there was widespread awareness of the ineffectiveness of the police, because the law was not upheld and the community transgressed the law allegedly because that is what they have become accustomed to. According to the ecological theory, male peer groups condone and legitimize male violence at a community level (Ellsberg & Heise, 2005). Thus, laws may be transgressed and negated, which is detrimental to vulnerable groups, one being women. Jewkes et al. (1999) stress the need to reduce violence by changing perceptions about gender relations within the community.

(ii) Acceptance of culture of violence

The literature states that violence is a widely accepted means of dealing with conflict both in communities and relationships. It is also used as a means of control, especially with women (Abrahams & Jewkes, 2005; Contreras et al., 2012; McKendrick & Hoffman, 1990; WHO, 2009). Domestic violence is also strongly related to this normative use of violence (Jewkes et al., 2002). Consequently, there is no recognition that this behaviour is abusive (Rasool et al., 2002). In South Africa violence is largely committed by men (MRC Policy Brief, 2009). Men use violence against women as discipline or when their masculinity feels challenged (WHO, 2004). Research corroborates this, stating that violence is associated with unexpressed emotions (Pretorius et al., 2007). Other literature states that women’s infidelity is seen to merit physical assault (Kim & Motsei, 2002; WHO, 2002). Research shows that this culture of violence

is causative in GBV. Furthermore, this male violence must not be seen as an appropriate or acceptable means of managing family and relationships (Thaler, 2011). Participants also said that the context of Alexandra was violent. People generally did not talk about problems but instead resorted to violence. It appears that violence is used to communicate or to discipline and chastise for alleged infidelity as well as to dominate or control. Comments by participants highlighted this context of violence:

“When we see man beating a woman...that man is giving the woman respect, like you know, discipline...People don’t know how to confront, problems/issues...If you see a man the wife is cheating, maybe the wife is disrespecting the man” (Participant A).

“Here in Alex then people like to do that they like to abuse other people by using guns, knives...Most of us here we don’t wanna talk. We sometimes choose to use our hands instead of talking” (Participant F).

“Most of time use physical rather than talk...people resolve it by beating up, don’t talk” (Participant G).

Thus from participants’ comments it appeared that people resorted to violence instead of communicating constructively about problematic issues. Violence was also used as a sign of respect and acknowledgment of the woman – that is, as a form of discipline or for possible infidelity.

4.3.3 Consequences of GBV

The consequences of GBV are discussed in this section according to the views of the participants. The consequences focus on the impact on individuals. This is further divided into the categories of arrest and conviction, continuation of the cycle of abuse and the normalization of a culture of violence. The impact on individuals, families and communities is highlighted.

4.3.3.1 Impact on individuals

(i) Arrest and conviction

According to WHO (2009), laws and policies that make violent behaviour an offence transmit the view that this behaviour is unacceptable. In South Africa the Constitution (1996) states that one of the four objectives of the police is to uphold and enforce the law such as dealing with perpetrators of GBV appropriately and seeing that justice is carried out. The South African Police Services aims to ensure that perpetrators of crime including crimes against women and children are brought to justice (SAPS, 2010). This means that the police can play a key role in responding to as well as eliminating GBV (Rasool et al., 2002). In this study a quarter of the participants verbalized that one of the consequences of GBV was arrest and imprisonment. Legislation such as the DVA of 1998 has also been amended, thereby ensuring that the police enforce its provisions: GBV and the parameters within which it occurs have been redefined. This consequently may serve as a deterrent (Rasool et al., 2002). The South African Minister of Police, Hon. Mthethwa reported that the Family Violence, Child Protection and sexual offences units throughout the country have been reintroduced to ensure that police can address GBV and crimes against children (SAPS, 2010). Violence against women has also been identified as a national priority crime by the National Crime Prevention Strategy (1996), but because of alleged corruption in the criminal justice system there is the realization that this problem could go unchecked. Participants were aware not only of the injustice of GBV but possible consequences. Statements included:

“Even now when I see someone my age beating up his girlfriend...tell him...say to them you can get arrested stuff like that” (Participant A).

“GBV, I just resort to violence and think violence will fix...makes some other situations worse and it leads people to jail” (Participant I).

“Many men arrested right now ‘cos of GBV” (Participant L).

Key informant A spoke about working in close association with both the police and Department of Justice, both of whom should act as a deterrent in GBV. It was stated by the key informant that there is a need to minimize the causes of secondary trauma by dealing with cases of GBV timeously.

“We work a lot with SAPS and the Department of Justice. They should make sure that whatever they said they will do, they have to do it. Cases of abuse –those people should be charged rightfully so it means the law has to be kept so that should be a deterrent to perpetrators of abuse...cases should be taken seriously.. so you don’t create secondary traumatisation”.

So despite there being shortcomings in legislation and upholding the law, participants were more aware not only of GBV but also its consequences, which in turn served as a deterrent. The following subcategory highlights the effect of GBV experienced by one participant.

(ii) Effects of GBV on an individual participant

The ecological theory examines the impact on the individual of factors such as biological and personal history, which may increase the likelihood of individuals either perpetrating or becoming a victim of various forms of violence, including GBV (Krug et al., 2002). One factor is witnessing violent behavior and marital conflict during childhood as well as substance abuse (Heise, 1998 cited in Ellsberg & Heise, 2005). Additionally, having friends who engage in or encourage violence may increase a person’s risk. In this study, a third of participants verbalized the profound effects of GBV within their family of origin. Participant D spoke about GBV within his family and expressed lack of understanding as to why his mother remained in the relationship. Another participant (E) said that as a result of GBV his parents had divorced while he was a young child, which led to the subsequent absence of his father in his life. Consequently, this participant had become involved in crime and had become demotivated. He had also expressed suicidal ideation previously as well as attempting suicide. As a result of his experiences, he had experienced maladaptive social functioning with consequent feelings of depression and

helplessness and a lack of self-esteem. The interview was discontinued because of his distress and the participant was referred for counselling. He said:

“This thing of not having a father made me grow up in a difficult situation...boy needs father to grow up, to be real man, to trust himself to not do wrong things...changed everything...I didn’t have such things so I’ve done things like crimes, started hijacking cars, having guns in our hands, get arrested”
(Participant E).

Thus GBV had a severe impact on this participant as well as consequences for his family, further disempowering all the members, and not only the participant. This is an example of the far-reaching, long-term effects of GBV.

4.3.3.2 Impact on families

(i) Continuation of cycle of violence

The findings in this study corroborates research by IRR (2011) which states that children learn how to be violent as a result of growing up in families with domestic violence. Thaler (2011) concurs, stating that childhood abuse may predispose men to later relationship conflict which may lead to GBV. USAID (2006) states that men and boys who witness or experience violence as children are at heightened risk of using violence against women as adults. This is further borne out by research by Abrahams and Jewkes (2005) which shows that the sons of women who are beaten are more likely to beat their intimate partners. This teaches men not only about the acceptability of the use of violence but that women tolerate it (Jewkes et al., 2002). In conclusion, the National Centre for Victims of Crime (2008) highlights that children exposed to violence in the home as well as abusive role models learn that violence is a normal way of life and consequently they are at increased risk of becoming the next generation’s abusers. Furthermore, this corroborates the social learning theory, as certain socialization practices are significantly related to GBV. Children may learn to model violent behaviour even by witnessing negative possibly negative violent interactions, which may perpetuate the intergenerational cycle of violence (Barnett, Miller-Perrin & Perrin, 2005).

The participants in this study were aware of the far-reaching effects of violence in their own family. This finding supports previous research conducted by Romans et al. (2000), which states that perpetrators of violence are likely to have witnessed violence as children in their own families. Furthermore, children may also learn about inappropriate masculine and feminine roles and behaviours. Research by Klopper (2010) corroborates this, stating that exposure of young people to violent role models in the home may send the message that violent actions are both acceptable and can legitimately be used to resolve issues. WHO (2009) posits that it is during childhood that there is social tolerance of violence learned. Some participants said:

“The husband abuses his wife and wife abuses children and children go and abuse the other children at school so it’s a cycle of abuse” (Participant B).

“I would have hit a lady ‘cos my father does it too” (Participant D).

“Shouting is a violence to children. They grow up sometimes knowing that daddy’s only shouting. Also at school they’ll shout” (Participant K).

Participants were thus aware of the ramifications of this violence in that it was often ongoing as a result of experiencing violence and thereafter behaving in ways previously learnt as a child. It appears that not only were participants aware of learnt behaviour but research shows that childhood abuse may predispose men to later relationship conflict, which in turn leads to GBV.

The ecological theory stresses the importance of proximal social relationships, especially within families, and that these influence behaviour and attitudes (USAID, 2009). Thus this appears to be highly influential and a key factor in perpetuating the cycle of GBV.

4.3.3.3 Impact on communities

(i) Normalization of violent behaviour in communities

According to Klopper (2010) there has been loss of cultural values and beliefs emphasizing caring and respect for others in South Africa because of increasing Westernization. Furthermore, apartheid brutality, family breakdown, lack of respect between peoples, women's subordinate position as well as violent ways to settle conflict have all caused the widespread use of violence (Shaw & Gastrow, 2000). Violence is community-based, meaning that it occurs outside the home and not only within families (WHO 2002).

What is even more alarming is that research shows that GBV is greatest in communities where the use of violence is normative (Jewkes, 2002; MRC, 2009). This behaviour, particularly with regard to GBV, may not be perceived as wrong (Abrahams & Jewkes, 2005; Jewkes et al. 2002). Furthermore, this culture of violence may also lead to crime (Shaw & Gastrow, 2000). In some countries such as India, cultural norms sanction the use of violence against women, which is perceived by children in the family as respect by the father towards the mother. This could increase adult men's likelihood of resorting to violence to resolve conflict in all relationships, including close relationships (Contreras et al., 2012). Women in many developing countries agree that men have the right to discipline wives even if force is used (WHO, 2002).

In this study, participants verbalized that violence is common in Alexandra and is used for various reasons. Consequently people have become desensitized to the violence and it is tolerated and accepted. Despite there being widespread incidents of GBV, according to participants, it is accepted and largely ignored. Therefore, it is apparent that this behaviour, particularly with regard to violence against women, may not be perceived as wrong, which is what participants verbalized. Participants also acknowledged that crime was widespread in Alexandra. Participants said:

“[GBV is] something that you see every day that we have grown to get used to so its something sorta like a norm to us...people are ignoring it. GBV is something that is really killing the nation slowly but surely ‘cos people always lock up what they feel inside...it’s something that you see every day...people in the community ignoring it and meanwhile it is killing the community” (Participant A).

“We know these things [are] happening in our community but we are unaware so most of the things we end up as adopting as good habits” (Participant B).

“There is too much violence...you see people fighting there’s too much harassing and rape” (Participant C).

It appeared from participants’ views that violence is commonly used and accepted. Furthermore, this violent context encourages more violence, which increasingly contributes to the use of violence. According to the ecological theory, at a societal level factors such as the social and cultural norms as well as policies (Krug et al., 2002; USAID Policy Initiative, 2009) may create an acceptable climate for violence, which in turn will reduce inhibitors against it. This is alarming, as the policies meant to protect and prevent social problems are negated by harmful social and cultural norms which are supposed to acknowledge people but instead perpetuate negative practices. Responsiveness or lack of responsiveness of the criminal justice system as well as social acceptance of violence at societal level is contributory to GBV, according to the ecological theory.

A key finding in this research was the interrelationship between the normalization of violence, including GBV, and the intergenerational cycle of violence. This culture of violence is largely attributed to biological differences as well as the culture of patriarchy. The normative use of violence can also lead to crime, so it appears that there is overlap between various aspects of violence. This is alarming, as violence in its different forms appears to have been learnt and accepted as the norm in multiple respects. According to the ecological theory, violence and the use thereof impacts at different levels of society.

Additionally, these different levels, namely individual, family, community and societal factors, influence each other. It is evidenced in this study that the impact of violence is far-reaching for individuals, families and communities. While it appears that some people may cope with the issues of violence, there are those for whom the experience is profound. Thus, it is clear that the impact of violence can be felt at many different levels which can be equally detrimental. Violence not only impacts on individuals but it perpetuates in families and then it is used by people as a way of communicating.

4.3.4 Prevention programme

Prevention programmes aim to address the root causes of societal issues. Prevention requires understanding the factors influencing violence (Dahlberg & Krug, 2002). Hence the literature states that they must be tailored to their target populations as well as the mechanisms that promote them (Krug et al., 2002). Prevention can be primary, secondary or tertiary. Intervention in this study focused on primary prevention of GBV – thus the prevention of GBV before it occurs. This is the case in developmental social work which aims to prevent social problems so that they do not occur (Potgieter, 1998). Therefore, policy documents such as the White Paper for Social Welfare (1997) and the DSD (2006) state that social work services must first focus on prevention in order to implement development orientated policy for implementation of social work services. Furthermore, well-designed programmes with men and boys have shown strong evidence of leading to change in behaviour and attitudes (Barker, Ricardo & Nascimento, 2007). Men must be engaged and provided spaces so that they are able to freely share and express their feelings including their fears (Lang, 2004).

This following theme discusses the prevention programme according to the views of participants. This was further categorized into motivators for joining, highlights of the programme, challenges of the programme and recommendations for improvement of the programme.

4.3.4.1 Motivating factors for joining the programme

This section examines the motivating factors of participants for joining the programme. Motivating factors was the first subcategory identified for the prevention programme according to the views of the participants. Motivation is defined as the incentive or motivating force and motivate is to cause or stimulate a person to act (Chambers, 1994). The participants had different reasons for joining the programme. These motivating factors for joining the programme are further categorized into invitations from facilitators as well as personal motivations for joining.

(i) External factors: Invitation

The majority of participants had attended the prevention programme as a result of a personal invitation by the facilitators or co-facilitator. Participants A and B knew of the existence of ADAPT, as they were trying to establish an organization for youth. The ADAPT organization seeks to include men as part of the solution to GBV by educating men about gender issues (ADAPT brochure). The facilitator of the programme, who worked at ADAPT, had invited these two participants. A further five participants knew the facilitator or the co-facilitator of the programme, both of whom were based at ADAPT. The majority of participants had thus joined because of invitations from the facilitators, which had an influence on their participation and was encouraging. One participant verbalized that because he knew the facilitator prior to joining the programme, he tended to be more receptive to the information in the programme. He had felt more liberated. Participants said:

“I joined ‘cos like the people from ADAPT I know them” (Participant A).

“[The facilitator] told us about it, like he used to go to schools and talk. He know us from long ago. It is also broadcast on the community station Alex FM” (Participant C).

“The programme I found out because of my other friend [the facilitator] we living in also same location and he knows me how I am” (Participant H).

Literature corroborates that motivation is crucial in joining a programme or group (Yalom, 1970). Motivation is also influential in changing people's attitudes (Swanepoel & de Beer, 2006).

There were however participants who cited different personal reasons/motivators for joining.

(ii) Internal factors: Personal motivating factors

A third of the participants verbalized other personal factors that motivated them to attend the programme. One participant was motivated to attend the programme because he had personally experienced GBV in his home. Because he could not make sense of his father's treatment of his mother and his mother seeming to tolerate the behaviour meted on her, it had proved motivating. He expressed confusion as to this occurring in his environment and it caused him distress. Other participants had differing motivations such as curiosity. A participant had lived in the same street and had seen others entering the community hall and as a result he had asked to attend. Another participant had known a person who had been attending the programme and had seen the impact of the programme on a friend. This had roused his curiosity as his friend had changed in his way of life. This had motivated him to attend. One participant had been told about the programme by his mother who had been working at the 3 Squares Community Centre (Participant I). These participants had all been inspired to join the programme because of differing reasons but all exhibited curiosity. Comments by participants included:

"When I come here I could understand why my father does all the things that he does...I also want to know why my mom stays in an abusive relationship" (Participant D).

"I live right here in this street so I used to see them getting in so I asked them and so I joined" (Participant F).

“I started to think this guy he learns something. He started to change his lifestyle so I tell him one day when you are coming you must invite me ... so he invite me”
(Participant G).

Motivating factors could also include opportunities for personal growth, achievement and progress as well as the benefits of interpersonal relationships (Jordaan & Jordaan, 1998). Although these were not specifically cited by participants as motivators for joining, they were experienced by participants.

The following categories discuss the highlights of the programme according to the participants' experiences and consequently their views as a result of participating in the prevention programme.

4.3.4.2. Highlights of the GBV programme

For participants there were various highlights of the programme, which included new knowledge gained as well as socialization, which was enjoyed by them. There was also the exchange of ideas and information with regard to older participants. Many topics were discussed. The highlights were categorized into influences on behaviour and attitudes, the use of older men as role models; the activities and topics presented and group work as a vehicle for change. These were closely aligned to the aims and objectives of the Sonke Gender Justice GBV prevention programme, the primary aim of which was to build equitable relationships between different groups so as to serve as role models in achieving gender equality. A further objective was to prevent gender based violence and thus reduce the spread of HIV and the impact of AIDS.

(i) Positive influences on behaviour and attitudes

Research has confirmed that men and boys attitudes and behaviours have been changed as a result of programme interventions. This has resulted in positive consequences not only for participants of groups but for their partners, children and families (Barker, Ricardo & Nascimento, 2007). For participants of the GBV prevention programme there were positive changes in attitudes, and therefore behaviour. There was vicarious learning

as a result of the programme, as participants were able to learn from other members (Toseland & Rivas, 2005). Participants learnt new ways of conflict resolution as well as different behaviours. There was also increasing realization by some participants that men and women deserved equal status, which meant a change in their previous mindsets. There was development of social skills as well as imitative behaviour. Participants also said that the programme had been inspirational, and had motivated them to change behaviour. Literature by Zastrow (2010) shows that individual attitudes are more easily changed in a group situation, as group pressure can have an enormous effect in changing beliefs and attitudes. There had also been learning and realization about what violence was. Some participants had become more motivated and as a result more focused. They had realized the value of studying, for example, and had felt empowered. A participant had had a friend who had changed his lifestyle and this had inspired him to join. It was thus empowering. Participants said:

“For me it has changed how I looked saw things before. Now I see things different...personal I didn’t believe...think women could be as equal as men...when I came to workshop I saw that we are same as women...we are as equal as women” (Participant B).

“[The programme] does inspire lot of us ‘cos it take us away from bad things in the street. Don’t think I will wake up in the morning and go think about stealing” (Participant C).

“Every time I had problems with my girlfriend I would resort to beating them up or swearing at them...realized that’s not solution, just creates more problems” (Participant A).

This is evidenced in literature as well as the practice of new behaviours, including alternative ways of communicating (Toseland & Rivas, 2005).

(ii) The use of role models

Research has shown that involving men who have influence as role models has been beneficial in programmes, for example in the use of posters of local celebrities who oppose violence such as in Canada (Lang, 2003). This had proved beneficial for the participants in the GBV prevention programme. According to participants, culturally it was not seen as respectful for them to advise or even approach an older person. Therefore, because there had been older men in the programme, the group experience had been different, which for a quarter of the participants had been beneficial. Group members were also able to learn from the older members of the group as well as the facilitators. This was corroborated by key informant D who reiterated that many participants either lacked role models or did not have positive role models. He said most of the men had as role models people who engaged in criminal activities. Comments by participants included:

“There are old men on the programme, so they can tell us how so it does motivate me a lot...they are role models...I can learn from them a lot” (Participant C).

“Here we have youth and we have fathers. He’s not my father...but in life he’s taught me something...the older people put it there for us that we didn’t know” (Participant K).

“Most of men did not have positive role models so it was a chance for these young boys to have positive role models to be able to work with older men” (Key Informant D).

The older men were thus seen as role models (Toseland & Rivas, 2005). The facilitators were also seen as role models for participants and were able to facilitate the process of learning of the participants, which is further evidenced in literature (stopvaworg, 2003).

Further highlights for the participants included the activities and topics that were discussed which had contributed to an increase in knowledge and were therefore empowering to participants.

(iii) Activities and topics

The programme highlighted the injustice of GBV and focused on men becoming partners to act against GBV. One of the aims was to promote healthy relationships based on a commitment to gender equality. “One Man Can” participants enthused about the various topics that were presented. These included gender and gender roles, migration, circumcision, sexually transmitted infections (STIs) and reproductive health, HIV/AIDS and the differences between HIV and AIDS, GBV and the playing of sport such as soccer. The programme targeted men and their concerns as well as subjects and topics relevant to them, which was more beneficial. Role playing was also conducted, which was an effective method of learning and gaining experience. These topics and activities were described as follows by participants:

“Programme taught me things I didn’t know...like topic of migration has helped me understand why they come...it did change my feelings towards them...most people say that they are here to steal our jobs so now I understand why” (Participant D).

“Activities and exercises ‘cos they sort of like put us in the shoes of the people who have experienced GBV...living with HIV/AIDS” (Participant A).

“Ah it’s a good programme. Its helping us cos a lot of things that we didn’t know properly like HIV/AIDS...circumcision, GBV but they give us information...we tend to know a lot of things because of One Man Can” (Participant F).

Because adults have different learning needs, there were various styles of presentation (stopvaw.org, 2003). Role playing gives participants the opportunity to see situations from different perspectives (stopvaw.org, 2003). Role plays can also be used to examine

men's attitudes toward certain behaviours and to challenge men (Peacock & Levack, 2004).

(iv) Groupwork as a vehicle for change

Groupwork is used to promote individual and social change. For participants there was the instillation of hope as they realized that there were other participants who had had similar experiences. There was also mutual aid in that participants were enabled to help one another (Toseland & Rivas, 2005). Participants were enabled to meet many of their own personal needs within the group context. Almost all the participants had enthused about various aspects of the programme. The facilitators were able to create a safe space where the participants could question issues and not be ridiculed or censored. The climate in the group encouraged cohesion and mutual sharing, which enabled participants to talk about their problems. There was no judgment by other participants, which signalled acceptance and had a ripple effect on the normalization of various issues and openness about sharing and exchanging information within the group sessions. Participants said:

“What I really mean everybody speaks about everything. Nothing is a secret here ‘cos outside people have secrets but here...I enjoy that. Different from outside. It’s a peaceful place...there’s no fighting, no swearing, just talk like people, human beings” (Participant F).

“Most part that I liked was the dialogue time when everybody had a say...put the problem on the table and then we talk about it...’Cos when you are talking about your problems then you can solve them exactly. You can take out solutions” (Participant H).

“Sometimes you think you are the only one in that situation but you’re actually not...at least 10 of us out of the group with the same experience everyone was sharing” (Participant I).

Research shows that facilitators who model gender equitable behaviour as well as creating a climate conducive for participants are a key factor in the success of programmes (WHO, 2007). The facilitators interacted well with the participants. This also contributed to universality, which was further conducive to bonding between group members (Toseland & Rivas, 2005; Yalom, 1970). There was sharing of ideas and interests as well as life experiences, which contributed to the sense of commonality among participants (Becker, 2005). This was an unusual experience for them. Research by Morris (2006) and Epslen (2006) indicates that group work with men enables them to relate better to each other, providing a safe space for them to acknowledge, challenge as well as to respond to the problem of violence, including GBV. Furthermore, this makes it easier for men to drop their guard as well as to express their anxieties and vulnerabilities (Epslen, 2006).

4.3.4.3 Challenges of participants

Although the majority of the participants had experienced the programme as emotionally challenging, they were empowered by the programme and had been partly enabled to resolve their personal issues. Interestingly, there was one participant (Participant H) who reported that he had not experienced the programme as challenging. He verbalized that there had been mutual respect between participants and that they had talked and advised each other. He added that the age differences with the older men had not proved an obstacle. Another participant (E) had not verbalized his personal challenges in the programme because his interview was terminated.

(i) Personal characteristics and challenges

Participants were able to verbalize challenging aspects of the programme. Personal challenges included the loss of a participant's mother; personal experiences of GBV at home; poor English language skills and perpetration of GBV by a participant. Participant C had experienced the death of his mother the previous year. She had been his primary source of support. This had initially been an obstacle to his participation in the group as he had been unable to verbalise and share his views. Another participant F verbalized that his shyness had been challenging initially. This had caused him to feel afraid. However

the context had been supportive and he had felt encouraged to verbalise more. The participants had been able to overcome these challenges that they had experienced. Although Participant D did not disclose his personal experience of GBV with the other participants in the group, in a sense it was normalized for him, as he became aware that it did occur frequently in the community. Participant G had poor English language skills which was challenging to his participation. However he had felt so encouraged by the group atmosphere and the facilitators that he had been enabled to overcome this obstacle. He had even presented to other group members. Although the programme had focused on non-perpetrators, one of the participants was enlightened and came to the realization that he had in fact unknowingly been perpetrating GBV. Participant J had been able to disclose his perpetration of GBV within the group context and verbalized that he had been unaware that he had done wrong. Participants said:

“Was really afraid to talk about it [GBV] like when I talk people laugh at me talk behind my back” (Participant D).

“’Cos my English was poor I was scared to be in front of people” (Participant G).

“Difficult part to say that [I] am beating a woman...most difficult part you must admit you have abused a woman and must stop it...I didn’t know I was wrong” (Participant J).

Additionally, because the participants had been supportive of each other even so far as finding strategies to help each other, this had enabled participants to overcome challenges. Support had been encouraging and there was mutual discussion about various issues. This had also motivated them to remain in the programme. Lang (2004) states that in engaging with other men about masculinities is beneficial to men in terms of alternative constructions of the masculine. Although participants felt that they had benefitted from the various aspects of the programme, they made suggestions for improvements in the programme.

4.3.4.4 Mechanisms to strengthen the prevention programme

Recommendations for improvement of programme were elicited from the majority of the participants. These are further divided into subcategories, namely awareness creation, increased professionalism, inclusion of both genders, and inclusion of older men.

(i) Creation of awareness of GBV and other related topics

There was much enthusiasm generated as a result of the prevention programme. Consequently participants were motivated to come up with various suggestions for creating awareness. According to some participants, the programme was advertised on the community radio Alex FM, but more awareness creation was needed so as to increase people's interest as well as encourage more participants to join. The programme could be advertised more by handing out of pamphlets, the use of posters in strategic areas as well as use of the media, including television and radio. There was also the need to reach more areas in Alexandria, especially the outlying areas. Overall, participants stated that there was a need for more programmes as well as more participants. Key informant E also reiterated the necessity of raising awareness in communities by participants of the programme going out into the communities and informing people about GBV and child abuse. Participants said:

"If they advertise programme through going to people and telling them guys, through pamphlets, posters...posting something in Internet café" (Participant G).

"Maybe get an advert of One Man Can on TV...not just on credits of soapies should be advert too" (Participant I).

"We give trainings to men so we want them to become foot soldiers so that they can go back to their communities and start giving awareness of women and child abuse" (Key Informant E).

Thus there was awareness of the need to reach increased numbers of people not only in Alexandra but further afield in order for people to become aware of the injustice of GBV and its implications. Also by raising awareness of the injustice of GBV perhaps women too would be enabled to verbalize it. Abrahams et al., (2004) state that prevention programmes should focus on gender relations and non-conflict resolution for men and youth. The aims and objectives of Sonke Gender Justice programme included the creation of awareness of GBV so that GBV was acknowledged to be a violation of human rights as well as gender-inequitable behaviour (One Man Can manual, n.d).

(ii) A sense of professionalism

Professionalism is undertaking a task assigned with efficiency, being knowledgeable about the topics presented and thorough in presentation. This would involve being prepared, as in preplanning of the schedule to be covered, accountable, sincere in delivery, punctual and also taking into consideration the method of relaying the information so as to capture interest. Professional also meant being organized. So the term professionalism had different meanings for participants. Participants expressed the view that more professionalism was needed in the delivery of the programme. The researcher observed that the programme did not start at the scheduled time of 10h00 and also that some participants were not punctual. This was not perceived as threatening to participants and it appeared not to be undermining or affect the cohesiveness of the group. Participants added that more in-depth knowledge was needed regarding the topics that were discussed as well as a more structured programme. Time was lost in the repetition of topics or subject material, according to a participant, as well as later starting times, which occurred sometimes. Therefore time management as well as lack of more information had been experienced as problematic for participants. Comments included:

“If they could change level of professionalism...were to do with every topic gave us deeper...Having people who know [the] story” (Participant A).

“Think [the programme] can be more professional” (Participant H).

“Such things need to be planned so people can see this things really happening – not joke....Organizers must be organized so people will attend and be focused”
(Participant I).

Programmes can be run professionally by thorough preparation beforehand and also assessing the level of knowledge of the participants so that there is awareness of the needs of the group beforehand. In addition, the objectives and aims of the programme could also be explained to the programme participants. Participants verbalized that the lack of professionalism did impact on not only the way the programme was delivered but may have resulted in the erratic attendance, because the programme may not have been taken seriously enough by some participants. It seems that the programme could have been conducted more punctually so that it did not run over time and started on time. Professionalism may have been undermined by latecomers to the group, which may also have affected cohesiveness. Some participants added that they would like female participation in the programme. This is discussed in the next subsection.

(iii) Inclusion of others (females and youth)

The programme was run for young males aged between 18 to 30 years. However, a quarter of the participants verbalized that for them the inclusion of females in the programme would have been beneficial. This was anticipated to increase mutual understanding of both genders. Because this could enhance gender relations there could be more awareness of the equal status of women and of facilitating change in terms of relationships. One participant expressed the view that the high rate of teenage pregnancy was also a reason to include female participation. Comments by participants included:

“Should put other gender females and do more other activities not just soccer....netball for females...would help 'cos there is too much teenage pregnancy so ja if they can involve girls maybe it can have an effect on them”
(Participant C).

“I would also like girls to join so we could understand them more” (Participant D).

“Some sessions we need to interact with females...need to get females involved...to know what they think and what we think, what we must change and what they must change too” (Participant I).

Thus participants wished to have more knowledge of females within the safety of a group context. There seemed a lack of knowledge in terms of appropriate interaction with females, and it seemed that there were those who would have benefitted from the inclusion of females in the group. According to Toseland and Rivas (2005) mixed gender groups can be beneficial in helping members of the opposite sex to learn to relate to each other. The opportunity for male and female participants to engage and debate controversial issues enabled the researcher to uncover important differences in their attitudes and beliefs, as was demonstrated in research by Kim and Motsei (2002).

Other participants verbalized that they wished for more youth to join the programme as well as more participants in general. Participant K wanted more youth to join and be included because of their being prospective parents. He thought that it would be helpful in terms of the knowledge gained to teach his children in the future. Participant F verbalised that increased numbers of participants would have been beneficial. The following is a sample of the third of the participants who were in favour of broadening participation. Comment by Key Informant B is included:

“We need more people. We are too small to tell people the stuff we have learnt”
(Participant F).

“More youth, they are ones who are going to be fathers” (Participant K).

“In our intervention strategies [re GBV] we have to involve everyone...GBV is rife and it doesn’t discriminate against anyone...cuts across all ages so in our intervention strategies we have to involve everyone” (Key Informant B).

Thus this abovementioned theme of the prevention programme referred to the views of the participants who had been on the programme since its inception in September and had also attended on a regular basis as well as one of the key informants. From participants’ statements it seemed that they benefitted from participation. They had felt empowered and some verbalized their wish for a further programme the following year. One even said that he would repeat the programme with the same content. Participants became animated when talking about their experiences, including what they had learnt.

4.4 Conclusion

As is evident from the above discussion, participants acknowledged both the multiple causes as well as the types of GBV. The different types often occur simultaneously within the same relationship, which can be even more devastating to the wellbeing of individuals, families and communities. This has far-reaching effects on society as a whole, impacting on people’s development in terms of wellbeing as well as the use of maladaptive ways to cope with stressors. These maladaptive coping mechanisms are in turn used and perpetuated by different generations. The ramifications for South African society are enormous as well as being detrimental to physical and mental health.

The main findings and conclusions, including recommendations of the research study, will be discussed in the next chapter.

CHAPTER 5

MAIN FINDINGS, RECOMMENDATIONS AND CONCLUSIONS OF THE STUDY

5.1 INTRODUCTION

This chapter will present the main findings of the research according to the objectives of the study. It will provide recommendations and conclusions that draw on social work practice and policy-based perspectives. Thereafter, the significance of the present study is highlighted. Finally, the implications of the findings for future research and social work practice are emphasized.

5.2 SUMMARY OF THE MAJOR FINDINGS OF THE STUDY

The aim of this research was to explore the perceptions of men involved in a GBV prevention programme. There has been limited research in South Africa that has explored men's perceptions and their involvement in GBV prevention programmes. Rather, the focus has mainly been on the role of men as perpetrators or victims of GBV. Although men have been widely reported to be the main perpetrators of GBV, this study sought to find out more about non-perpetrating men's understanding of GBV. The objectives of the study were to elicit participants' views about GBV and to establish motivating factors for joining the prevention programme as well as the challenges faced in participation and recommendations made by participants. An additional objective was to determine the role of the key informants within the "One Man Can" programme regarding GBV.

5.2.1 Participants' understanding of GBV

The participants were questioned as to their understanding as well as incidences and causes of GBV. Participants became more aware of what the term GBV meant as a result of the prevention programme, in that GBV included different forms of abuse and not only physical violence. There was the realization for participants that GBV could mean abuse by men or women against the opposite sex but they agreed that GBV in most cases was men abusing women. Some of the participants previously did not know the meaning of the term gender-based violence, although they had often personally witnessed the

violence. Prior to the programme there was no realization that this was wrong, and it was merely accepted as the norm. The programme also had a focus on gender and the meaning thereof. Furthermore, before participating in the programme, the participants had no clear understanding of the term.

(i) Incidences of GBV

According to participants, GBV was widespread and was a daily occurrence within the context of Alexandra. The context of Alexandra Township was experienced as stressful. There was widespread violence, not only GBV but community violence occurring among groups of people. The incidences of GBV were rife and commonplace, with little reaction from community members who witness occurrences. Although the context of Alexandra appears to be violent, substance abuse (alcohol and drug abuse) was seen as being highly contributory to exacerbating violence, including GBV. Therefore the violence increased at times when financial resources were available. It seemed that people largely experienced high stress personally and in relation to their environment and used maladaptive ways to release or to cope with stress. A cited example of this stress, leading to acts of violence, was financial issues. This was either quarrelling over money issues or expectations of men as a result of contributing financially to women's expenses.

According to the ecological theory, violence is encouraged in society by the social and cultural norms. From the study it appeared that violence was both widespread and used in the place of alternative ways of settling disputes. Verbalizing was difficult for people and they resorted to the use of violence. The use of violence by men was almost condoned. Violence, including GBV, also occurred in homes, with increased exposure of children to violence further contributing to the acceptance of this behaviour. Participants became aware of the dangers of children learning to be violent as a result of growing up in violent homes. Violence was also used to control people, as in the case of men against women, in order to instill fear even with other men. This was the norm instead of discussing issues. There was therefore lack of knowledge regarding alternatives to the use of violence as well as coping mechanisms. Because violence was accepted as a norm for communication and conflict resolution, and was used in order to intimidate, it was the

alternative frequently chosen. From interviewing the participants it seemed that men experienced pressure in terms of expectations from society in relation to their role as breadwinners.

(ii) Factors causing GBV

Substance abuse, namely alcohol and drugs (for example, *nyaope*), was seen as being highly contributory to exacerbating violence, including GBV. Alcohol is also readily accessible to minor children. Culture was also contributory to GBV and interlinked with gender. Women's status was perceived as being lower than that of men, which is undermining to women with the imposition of roles. This abuse of power is further exacerbated by alcohol abuse, resulting in increased violence. Because men were perceived to be physically stronger than women, the use of force by men was almost sanctioned to exert their will as well as to express anger. Women were therefore forced to submit to men's decisions or wishes. Culturally, participants said that men were raised to believe that they were superior to women and were the decision-makers. The use of violence also appeared to instill fear, which is associated with control.

It was apparent that there was also a link between biological characteristics and GBV. Much GBV was attributed to men's power and strength in comparison with women. This was also the reason that women did not always retaliate against GBV because they lacked the physical power. Men were able to abuse women because of their physical strength. This seemed to serve as justification for violence against women. A participant spoke about abuse of that power knowing that women could not fight men so men take advantage.

Participants expressed the view that abuse of women by men is common, but acknowledged that sometimes women are also perpetrators of the violence. It is also felt that abuse perpetrated against men by women would be for financial gain. There was stress experienced by a participant who spoke of females exerting pressure on men for financial gain. Men also had expectations of sexual favours from women in return for financial support by the man. Violence between man and woman is common so people do

not interfere. It is almost seen as private matter. It seems that an interrelationship between abuse and power exists.

What was evident from the study was a lack of mutual respect for and acknowledgment of human rights by people towards other people within the community. This increased as a result of the abuse of alcohol, which led to changes in behaviour, and violence increased.

In some respects lack of law implementation was seen to contribute to GBV, but there was the possibility/likelihood of arrest should GBV be perpetrated by a participant. Through the discussion of the consequences of GBV, it became apparent that there was a significant lack of support both in families and in communities.

5.2.2 Factors leading to participation in programme

Participants had differing motivations for joining the programme. Over half the participants were motivated to participate as they knew one of the facilitators. This was encouraging to participants because it facilitated participation. There was also behaviour change in one of the participant's friends which had motivated him to join the programme.

Another participant was encouraged to join the programme because his mother had been aware of the programme. He was interested in finding out more and gaining more knowledge. One participant had seen other participants going to the community centre and this had aroused his curiosity. Personal experience of GBV within the family had motivated another of the participants to attend the programme.

5.2.3 Exploration of challenges faced by participants in programme

Participants were asked what difficulties they had experienced with the programme. They experienced various personal challenges in participation. Language was cited as being challenging in that one participant lacked the ability to speak English. Initially this lack of English language abilities was hampering but the participant had been encouraged by

the facilitators and had become more confident. Other participants experienced shyness, which was also challenging. One participant had personal experience of GBV in his family and was unable to verbalize it within the group. It was, however, more normalized for him. Another participant had committed GBV and expressed that it was difficult to verbalize and acknowledge it, but he had not realized that it was wrong.

(i) Impact of programme

The programme impacted on participants in various ways. As a result of doing the programme, participants' knowledge increased. There was more awareness regarding the term gender as well as gender-based violence. There was also better understanding of what violence was and how the use of violence had been normalized and perpetuated. Participants had been empowered as a result of doing the programme and it had impacted on their lives. All the participants were very enthusiastic about the programme, verbalizing that the programme would be beneficial to others in the community. They were able to tell community members about the programme.

Participants spoke about doing or redoing the same programme and also how much it had affected their lives at present. There was also the desire to help future generations in terms of their own children. Many of the topics that were covered in the programme had been previously unknown to them such as myths surrounding HIV/Aids and circumcision as examples. There was increased knowledge and understanding of terms such as gender and GBV. The topics that they engaged in were interesting to them and some had never known or been exposed to these. The attitudes and consequently the behaviour of the participants changed as a result of the programme. This was not only in terms of GBV but lifestyle. Some participants had previously been motivated to participate in criminal activities such as theft, but had realized the possible consequences. This was largely as a result of speaking to older men who participated in the programme. Prior to participating in the programme, GBV was normalized. There was awareness as a result of the programme that this use of violence, and particularly GBV, was a human rights violation which did affect not only women but all members in the community.

Furthermore, the programme educated participants that the use of violence did not resolve issues. Participants learnt that there were alternatives to the use of violence. As a result of the programme, there was also increased awareness by participants to intervene should they witness incidences of GBV. The empowerment of participants increased, because they could verbalize issues – something that was not normally done in real life. Previously participants saw GBV as the norm and women were seen as unequal to men. As a result of programme, participants' perceptions were changed. This led to them question issues that they may previously have accepted. So, as evidenced from the study, the programme did have an effect. Not only were participants' perceptions changed but the programme provided information to them as well as allowed for the exchange of ideas within the group.

The prevention programme was experienced as empowering for the participants. It was beneficial in terms of the knowledge participants gained regarding the different topics. What seemed equally beneficial for participants was the interaction between participants. This included interaction with older men, which was valuable to some participants, as they had never experienced this before. Culturally, barriers in terms of behaviour (disrespect) had prevented younger men from approaching older men and were therefore an obstacle to any further communication. Invitations from facilitators also impacted on participants. A key finding was also that activities and exercises carried out in the programme were beneficial in terms of facilitating information about GBV. The general consensus from the participants was that the topics were interesting.

5.2.4 Programme recommendations made by participants

Recommendations for the programme by participants were primarily for the programme to be more professionally managed. The term professional meant different things for each participant. Some participants verbalized that there needed to be more preparation by the facilitator beforehand so that the programme content would be perceived as serious. The programme could also have been carried out with more emphasis on punctuality in starting, meaning better time management. Furthermore, participants said that there was a need for more programmes in their community. The programme also provided a

supportive environment in which men could share their issues with other men. Psychosocial support was needed by people in terms of obtaining relevant information and receiving emotional support.

A further recommendation was for both genders to be included in the programme. Despite there being a lack of awareness of more appropriate ways of interacting with females, there was genuine willingness by participants to find out how and what females thought. It would also give them the opportunity to interact with females, as many did not know how or were unaccustomed to relating in a certain way. Participants also acknowledged the positive benefits of having older men in the programme.

From the study it was evident that there is an overlap between the various forms of GBV. Furthermore, it appeared that there was a link between the normalization of violence and the intergenerational cycle of violence. The literature researched shows that violence contributes to crime – something that participants verbalized as being prevalent. Findings from this study also support previous research which indicates that alcohol is highly contributory to violence, which in turn contributes to GBV. Violence has an impact for individuals, families and communities alike, and it impacts at these different levels. The stressful environment experienced by participants was detrimental to their functioning.

5.3 IMPLICATIONS OF FINDINGS FOR:

(i) Social work practice

The study highlighted the need to increase psychosocial support systems in the community so that people are enabled to seek relevant resources as well as cope better with challenges. Development is about people, so that they are developed socially as well as economically. People in communities also need to be more aware of the violence against women so that its social acceptability is decreased. People need to be linked to resources, which in turn will build the capacity of families – for example, reducing risky behaviour in terms of violence, especially with regard to GBV and abuse of alcohol. They need to be made aware of what resources there are and how to access these resources.

There also needs to be a change of norms regarding masculine behaviour in relation to women. Future prevention programmes need to challenge existing perceptions, beliefs, and attitudes of men with regard to the use of violence, especially GBV. There is the likelihood that behaviour can be changed by changing attitudes. Social workers should collaborate with government departments and organizations such as Sonke Gender Justice and ADAPT in the implementation of gender based violence prevention programmes. People in communities must be made aware of the acceptance of multiple uses of violence and the ensuing potentially damaging effects. Preventive programmes can teach people that there are alternative non-violent ways of dealing with conflict. These prevention programmes could be carried out in other communities as well as with different race groups. There needs to be more work with men. Work should be done at the grassroots level so that norms are not entrenched. People should be enabled by being taught appropriate coping skills, especially at a young age. Behaviour is also motivated by the stress in the environment, interpersonal relationships as well as expectations of people.

(ii) Social policy

This study has focused on the topic of GBV and the policies that could be implemented to capacitate people within communities in order to enhance functioning and wellbeing. Social policy needs to target early intervention and prevention of GBV so that GBV is eliminated. In order to do this, there should be programme intervention focused on younger members of society such as primary schools.

As regards present social policy, there is a need to improve present social policy in terms of gender and inequality. Potentially harmful cultural practices should be amended, while those that enhance people should be promoted and emphasized. There should be reporting of GBV, with resources available to victims as well as perpetrators. There needs to be accountability.

(iii) Future research on GBV

Further qualitative research is needed to find out if this programme has led to sustained changes in behaviour of the study participants. There could be an attempt to ascertain if participating in a programme induces positive change. Furthermore, if change is induced, how this change can be sustained could be a topic of future research. Participants could be interviewed subsequently to establish their perceptions and interactions as a result of the programme. Research could be carried out in order to ascertain if prevention programmes with men are able to elicit the desired changes in attitudes, thereby inducing positive behaviour. More research with respect to GBV could be carried out with other race groups. Research is also needed in order to ascertain the experiences of partners of participants after the programme had been carried out. Furthermore, there should be evaluation of the present programme in order to improve future programmes taking into account what was effective and what could be changed.

5.4 CONCLUSION

This study highlights the challenging social problem of GBV, which needs to be addressed further. There is increasing awareness of the interrelatedness of the different types of GBV and the impact thereof. Communities need to be made aware of this apparently normative use of violence and that there are consequences should the law be transgressed. Furthermore, communities need to learn alternative means of conflict resolution. Therefore the use of the media could be utilized more so as to increase awareness of GBV. Communities should be educated on GBV, and there is also a need for programmes to be implemented in other areas of Alexandra in order to reach more people.

From this study it is evident that GBV poses a serious socio-cultural challenge and is an impediment to social development. It has far-reaching repercussions, many of which manifest invisibly but nevertheless have enormous consequences for individuals, families and communities. What is equally evident is that that more inclusive GBV prevention programmes need to be undertaken with young people and possibly younger children as well as men. The study showed that change appears possible with intervention to change

perceptions and that men can be positive role models for each other and in the community as a whole.

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Appendix A :**Ethics Clearance Certificate from University**

Research Office

HUMAN RESEARCH ETHICS COMMITTEE (NON MEDICAL)

H110918 Kaeflein

CLEARANCE CERTIFICATE**PROTOCOL NUMBER H110918****PROJECT TITLE**

The Perceptions of men involved in a gender based violence prevention programme at Sonke Gender Justice

INVESTIGATOR(S)

Ms M Kaeflein

SCHOOL/DEPARTMENT

Department of Social Work

DATE CONSIDERED

16 September 2011

DECISION OF THE COMMITTEE

Approved Unconditionally

EXPIRY DATE

30 September 2011

DATE

07 October 2011

CHAIRPERSON

(Professor R Thornton)

cc; Ms A Warria

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and **ONE COPY** returned to the Secretary at Room 10005, 10th Floor, Senate House, University.

I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee. **I agree to completion of a yearly progress report.**

Signature

7, 10, 2011

Date

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES

Appendix B

Letter of permission Sonke Gender Justice



Reg. No: 2006/023739/08
Vat Reg. No: 4410231288

Johannesburg Office:
Phenyo House, 73 Juta Street, 11th Floor
PO Box 31166, Braamfontein 2017
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Cape Town Office:
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122 Longmarket Street, Cape Town 8001
PO Box 3126, Cape Town, 8000
tel +27 21 423 7088 fax +27 21 424 5645

20 September 2011

To whom it may concern

This is to certify that Sonke Gender Justice Network has given Mary Kaeflein permission to approach the participants of our One Man Can programme, taking place in Alexandra, in order to ask them whether they would be prepared to be interviewed for the purposes of her research.

All the participants will be sensitized to the fact that it is purely through their own choice that they would volunteer to be interviewed and their participation in the interviews would have no bearing on their involvement in the OMC programme or on their relationships with the facilitators or managers of the programme.

All the participants are over the age of 18.

We have reviewed Mary's proposal, interview schedule and consent form and we are satisfied with all of them. We will endeavour to assist her in any way we can to enable the interviews to take place.

Thank you.

Kind regards


Desmond Lesejane
Deputy Director
Sonke Gender Justice Network

Sonke Gender Justice Board Members:
Ms. Shamillah Wilson – Chairperson, Cherith Sanger, Kumaran Naidoo, Jayshree Pather, Neo Muyanga, Teboho Klaas, Rachel Jewkes, Sisonke Msimang, Tom Fry, Dean Peacock (Ex-Officio)

Appendix C

PARTICIPANT INFORMATION SHEET

Good day

My name is Mary Kaeflein and I am a Masters student registered for the Masters programme in Social Development at the University of the Witwatersrand. As part of the requirement for the Masters programme, I am conducting research into the perceptions of men involved in a gender based prevention programme. It is hoped that this information may help to improve social work prevention programmes that will use men to address gender based violence issues.

I therefore wish to invite you to participate in my study. Your participation is entirely voluntary and refusal to participate will not be held against you in any way. If you agree to take part, I shall arrange to interview you at a time and place that is suitable to you. The interview will last approximately one hour. You may withdraw from the study at any time and you may also refuse to answer any questions that you feel uncomfortable with answering.

With your permission, the interview will be tape-recorded. No one other than my supervisor will have access to the tapes. The tapes and interview schedules will be kept for two years following any publications or for six years if no publications emanate from the study. Please be assured that your name and personal details will be kept confidential and no identifying information will be included in the final research report.

As the interview may include sensitive issues, there is the possibility that you may experience some feelings of emotional distress. If you wish to discontinue the interview, you may do so and there will be no repercussions as a result. You may also withdraw from the study if you wish without repercussions. Should you feel the need for supportive counseling following the interview, I have arranged for this service to be provided free of

charge by the Agisanang Domestic Abuse Prevention and Training Organisation (ADAPT) in Alexandra. They may be contacted at (011) 440-5615. Please feel free to ask any questions regarding the study. I shall answer them to the best of my ability. I may be contacted on telephone number 0824692467. A brief summary of the results will be given to the key informants.

Thank you for taking the time to consider participating in the study.

Yours sincerely

Mary Kaeflein

Appendix D**CONSENT FORM FOR PARTICIPATION IN STUDY PARTICIPANT**

I hereby consent to participate in the research project. The purpose and procedures of the study have been explained to me. I understand that my participation is voluntary and that I may refuse to answer any particular items or withdraw from the study at any time without any negative consequences. I understand that my responses will be kept confidential.

Name of participant: _____

Date: _____

Signature: _____

Appendix E**CONSENT FORM FOR AUDIO-TAPING OF THE INTERVIEW PARTICIPANT**

I hereby consent to tape-recording of the interview. I understand that my confidentiality will be maintained at all times and that the tapes will be destroyed two years after any publication arising from the study or six years after completion of the study if there are no publications.

Name: _____

Date: _____

Signature: _____

Appendix F**LIST OF PARTICIPANTS OF GENDER BASED PROGRAMME**

	Gender	Age	Race
Participant A	Male	22 years	African
Participant B	Male	23 years	African
Participant C	Male	20 years	African
Participant D	Male	21 years	African
Participant E	Male	18 years	African
Participant F	Male	19 years	African
Participant G	Male	23 years	African
Participant H	Male	20 years	African
Participant I	Male	23 years	African
Participant J	Male	19 years	African
Participant K	Male	20 years	African
Participant L	Male	24 years	African

Appendix G

SEMI-STRUCTURED INTERVIEW SCHEDULE: PARTICIPANTS

Thank you for agreeing to take part in this study and for allowing me to tape-record our interview.

I am going to ask you some questions. I would like you to answer the questions in as much detail as possible that you feel comfortable with. Your views and experiences are very important in improving gender based violence programmes involving men. At the end of the interview you will also have the opportunity to clarify anything that you may be concerned about. Should you wish to stop the interview at any time, you are free to do so.

Questions to participants:

- (i) Can you share with me what gender based violence means to you? Explore.
- (ii) Please tell me about the “One Man Can” programme at Sonke Gender Justice
- (iii) How long have you been working in this programme for? Explore.
- (iv) What have been some of the highlights of the programme? Explore
- (v) What motivated you to join the programme? Explore.
- (vi) What are some of the challenges you face when working in this programme? Explore.
- (vii) According to you, how can these challenges you have mentioned be overcome? Explore.
- (viii) Have you noticed any impact that the programme has had on individuals, families or communities? If yes, kindly share with me.
- (ix) Generally, how do you think the programme can be improved?
- (x) Is there any other information about your experience which you think would be useful for me to know?

Appendix H

LETTER REQUESTING PERMISSION TO INTERVIEW MANAGER AT PEOPLE OPPOSING WOMAN ABUSE (POWA)

Date:

To whom it may concern

PERMISSION TO CONDUCT RESEARCH

My name is Mary Kaeflein. I am currently registered for a Masters degree in Social Work at the University of the Witwatersrand, Johannesburg. I am very interested in gender based violence prevention programmes and I am conducting my research at Sonke Gender Justice. I will be interviewing ten male participants of a gender based violence prevention programme as well as the programme manager at Sonke Gender Justice. I would also like to interview stake holders involved in gender based violence namely from the Centre for the Study of Violence and Reconciliation (CSVR), the South African Police Services (SAPS) as well as your organization in this regard.

The research design will be qualitative in nature and will involve the use of semi-structured interview schedules. The interviews will be tape-recorded and transcribed and will last approximately sixty minutes. No one except my supervisor will have access to the information. All raw data will be strictly confidential and will be destroyed after six years if unpublished or two years if published.

The research is being supervised by Ms. Ajwang Warria, a lecturer at Witwatersrand University. She can be contacted on (011) 717-4482 (Tel.) or Ajwang.Warria@wits.ac.za (e-mail).

It is anticipated that this research project will contribute to the existing knowledge concerning gender based violence as well as eliciting ways of engaging men further in gender based violence prevention. A brief summary will be given to all the key

informants. Please contact me should you require any further information. My contact details are as follows 0824692467 (Tel.) or emsee@afropak.co.za (e-mail).

Questionnaire to manager at POWA:

- (i) What is the role of POWA in GBV prevention?
- (ii) Tell me about POWA prevention programmes, if any.
- (iii) How does POWA engage men in GBV prevention programmes?
- (iv) Are there cases where intervention is carried out should a man request rehabilitation?
- (v) What prevents men in becoming involved in GBV prevention?
- (vi) How can men be encouraged to be involved in GBV prevention?
- (vii) How does the involvement of men lead to prevention of GBV?
- (viii) What are the recommendations of POWA in terms of GBV prevention?

Thank you for participating in this research project. I am very appreciative of your time.

Appendix I**LETTER REQUESTING PERMISSION TO INTERVIEW RESEARCHER FROM
CENTRE FOR STUDY OF VIOLENCE AND RECONCILIATION (CSV):**

Date:

To whom it may concern:

PERMISSION TO CONDUCT RESEARCH

My name is Mary Kaeflein. I am currently registered for a Masters degree in Social Work at the University of the Witwatersrand, Johannesburg. I am very interested in gender based violence prevention programmes and I am conducting my research at Sonke Gender Justice. I will be interviewing ten male participants of a gender based violence prevention programme as well as the programme manager at Sonke Gender Justice. I would also like to interview stake holders involved in gender based violence namely from People Opposing Woman Abuse (POWA), South African Police Services (SAPS) as well as a researcher from your organization. I am therefore requesting permission to conduct an interview with a researcher in this regard

The research design will be qualitative in nature and will involve the use of semi-structured interview schedules. The interviews will be tape-recorded and transcribed and will last approximately sixty minutes. No one except my supervisor will have access to the information. All raw data will be strictly confidential and will be destroyed after six years if unpublished or two years if published.

The research is being supervised by Ms. Ajwang Warria, a lecturer at Witwatersrand University. She can be contacted on (011) 717-4482 (Tel.) or Ajwang.

Warria@wits.ac.za (e-mail).

It is anticipated that this research project will contribute to the existing knowledge concerning gender based violence as well as eliciting ways of engaging men further in gender based violence prevention. A brief summary will be given to all the key informants. Please contact me should you require any further information. My contact details are as follows 0824692467 (Tel.) or emsee@afropak.co.za (e-mail).

Questionnaire to researcher at CSVr:

- (i) What is the role of CSVr in terms of gender based violence (GBV) prevention?
- (ii) What GBV prevention strategies have been done?
- (iii) What future research will be carried out, if any, in terms of GBV intervention?
- (iv) What are the recommendations of CSVr in terms of GBV?

Thank you for participating in this research project. I am very appreciative of your time.

Appendix J**SEMI-STRUCTURED INTERVIEW SCHEDULE FOR PROGRAMME MANAGER
AT SONKE GENDER JUSTICE****Questions to be explored:**

- i) Tell me about the One Man Can programme. Explore
- ii) What have been some of the highlights of the programme?
- iii) What are some specific challenges faced with regards to the One Man Can programme?
- iv) How have you managed to overcome some of these challenges?
- v) Has an impact assessment been done on the programme? Explore.
- vi) If you were to change an aspect of the programme what would it be? Explore.
- vii) If you had an unlimited budget for the programme, what would you do?

Thank you for answering my questions. Is there other information which you think would be useful for me to know about?

Thank you for your time.

Appendix K

TRANSCRIPTION OF INTERVIEW WITH KEY INFORMANT :

Researcher: Thank you for allowing me to interview you and signing the consent. I just want to ask you a few questions regarding GBV. I want you to answer in as much detail as you can.

Participant: As is possible

Researcher: What you think and your views and experience about Gender based violence are very important as the aim of this research is to possibly improve Gender based violence prevention programmes involving men. At the end of the interview you can also have an opportunity to make clear anything that you are not sure about and if you want to stop at any time please tell me. You are welcome to do so. And if there are any questions, you can answer in any way in as much detail as you can. OK, can you tell me what is the role of ..in gender violence?

Participant: OK, ... was started in 1979 by a group of volunteers, so we have been in operation for over 30 years and I think those women, those volunteeresses saw that there was possibly none services to help the women who were experiencing domestic violence in their homes, but I am sure also that they saw the need of doing more than just providing services to those women but also lobbying other people, or interested people or even pushing the Government to do something in terms of protecting women against gender based violence. And I am sure they were also thinking not only thinking gender based violence in the home but also thinking violence in general whether it be against women, whether it be at church whether it be at work, so they decided to come and start this organisation and I am sure their hope or their dream was for .. for this kind of organisation to actually help women. Yes we provide services directly to women but we also involved in other things like training, training other organisations trying to do similar work like we do. I mean we have recently started working with women especially in the rural areas who want to do the kind of work we do, we offer our experiences to them what we have experienced over the years - so basically ... does that, we offer services - in fact we are in fact one of the few organisations that struggles providing direct services to women but also doing advocacy. We know pushing the Government to change to look at their policies protecting women against gender based violence, I mean we do know that our Government has signed policies and treaties with the UN and we know this African protocol and they were actually saying that we as the Government we are we will work hard look at how we can best protect women in South Africa. They have signed you know and they made promises so as ... we see our role as partly taking them to order and actually saying "You did promise to look after women in the country, so what are you doing about it." Hence we go every year to the Commission, to the to to to (I will think about it) but ja every year we together with other organisations we write a shadow report because what the Government should do is those who have signed those treaties

they have to come up with a report to say this is the progress so far in terms of what we have decided on how we are going to protect our women, so we have to write sort of a shadow report to say

Researcher: OK

Participant: Are they telling the truth, this is where they have improved this year - we are doing the right thing but they also lack here - I mean we meet with Governmental departments you know, the Department of Justice, the SAPS, seeking ways of making sure that the policies that we have are implemented because you know they say we have the nicest policies on paper but our challenge is implementation.

Researcher: Yes

Participant:

So in a way you can say it - we try to be a watchdog in terms of protecting the rights of women you know.

Researcher: Yes, so you do - it sounds like you do many things. I don't know if you do drop in counselling or...

Participant: Let me tell you about the services - we provide counselling to women so it is direct services - say the women can make a phone call, come to one of our offices, including this office Berea or if women are far away and they don't have money for transport, they can phone us, so we offer telephone counselling, so that those services are done from half past eight until half past four and then we have what we call our emergency or after hour service where we have got a cell phone number and we have got volunteers who man that cell phone number that service where people can from half past six to half past 10 in evenings during weekdays where people can phone us and over the weekend it is 24 hours when they can get to talk to somebody and the volunteer or the counsellor will take it further with someone that that person needs referral or they need to come to the office or whatever

Researcher: For counselling, specifically for gender based violence?

Participant: Ja for counselling yes, especially for women who are experiencing GBV - yeah and then we have two shelters places of safety for abused women and their children - it is a temporary place of safety for women who feel that their situation has come to an extent where they cannot stay and they need to get out maybe because of fear for lives - emotionally they cannot take it. We also take rape cases for example if a person has been raped and they need a place to stay while they are dealing with what has happened, we can take them. We work a lot with the police, you know they would refer women who need a place of safety to us.

Researcher: And the children, do they go with the mothers?

Participant: Yes,

Researcher: Are they up until a certain age?

Participant: Yes, that's a big gap I must say. We take women with children up to the age of 12 but with ... we sometimes push it a little bit further like if a boy is 15 like with girls it does not matter, the girl can be 18 we can take but with boys it is up until the age of 12 because with a lot of the shelters, but with us if the boy is 15 we would take them. I think the reason is that boys up until the age of 12 there was a story that one older boy wanted to molest a younger girl, so also because of people coming to the shelter if there is limited space where there are a lot of families it is also an issue of supervision and stuff like that, so the shelters feel that it is easier for them if we take children up the boys - up to the age of 12 but it is a problem in itself like let us say if you get a woman who really wants to get out and she has a boy of 16 who also has experienced or seen abuse in the home, then what do you say to her and also what are we saying to boys in terms of No - you are not allowed, we are already saying you are a potential abuser you know so and I think it is partly limited resources, if we had enough resources because I am dreaming of a shelter where there is a lot of space and where you can actually get family units or whatever so that you can also accommodate older boys because the other thing also is that with our shelters you have a house with let us say 7 rooms and then we have got bigger rooms where a woman with many children can come and stay there and you can imagine you have a 16/17 year old boy staying there - although it is temporary but it is difficult so you dream of a shelter, where maybe, you know you can have what do you call them ?

Researcher: Yes?

Participant: Flatlets where families can come and they have their own kitchen and they have their own so in that way - also more social workers - our country we are struggling with social workers. It's even worse with organisations like us

Researcher: Non government?

Participant: The nongovernmental organisation because of the salaries we offer to them. We getting 75% of the salary from the government meaning that is usually at entry level, our social workers when they come to work for us they don't have, they know that they are not going to get medical aid they are not going to get pension funds unless if the organisation has managed to get money - so it is also about human resources, where you know you are going to get at the shelters - there will be people who will be - as soon as a family comes in even there is a programme for training for social workers to specialise in terms of working with teenagers, programmes for teenagers and I mean it is a wonderful opportunity if you can have that 16 year old because isn't it the problem that we are struggling with? The attitude the way we the way that our boy children grow up - you know they see it in the family - they see it outside - they see everywhere the only way with dealing with issues especially when it comes to your partner, so if you have that boy

in the shelter you are able to reach him and actually educate him about the consequences of abusing your partner.

Researcher: So you would like there to be more shelters. Where there are - where are the 2 shelters?

Participant: One is in the West Rand and the other one is in the East Rand. I am not - the reason I am saying West Rand is because we want to keep it safe and confidential so we don't usually say if we can help it. Ja

Researcher: Yes, in case there is a threat or something

Participant: Yes, because we have had cases where men will come and will follow the woman and you know it might be dangerous for our client

Researcher: Sorry - so you work a lot in terms of gender based violence you work a lot with the police - you liaise?

Participant: Yes, with the police

Researcher: You also work with the government?

Participant: Yes we get funding from the Department of Social Development - a lot of our clients want legal services for example a protection order, so we would have to work with the Justices dept and we have to make sure that the Courts do the right thing - I mean if a woman wants or needs a protection order - it will remain a piece of paper until if like the perpetrator does what he is not supposed to be doing - we are hoping that the police and the court will be able to arrest him because in terms of the protection order they warn you and tell you not to do whatever and if you do it we expect the police and the court to do

Researcher: To carry out

Participant: Yes to carry out whatever, so we have to work a lot with them we realise that at ... on our own we cannot we have to have a partnership with different governmental departments -the schools - I mean at the shelter children have to move usually the children and the mother they have to change schools for safety and whatever so we work a lot with the schools around the shelter

Researcher: OK

Participant: OK and they understand our situations and most of the time they will help us and in terms of accepting the child even in the middle of the year, so ja, you have to do that, you have to have partnerships with other organisations ja partners

Researcher: So you can work together

Participant: Yes, together - Unfortunately with the shelters is that it is temporary..

Researcher: I was going to say that it must be very difficult if the child goes to school and if it is a temporary thing then the child has to move

Participant: Ja, but then you see with ... and help with a lot of people we have helped in the days that we are very sensitive when it comes to the children where if we have put the child in the school near the shelter and if it is their time to move sometimes we keep them until - if the woman does not have resources to move

Researcher: Yes, to move away

Participant: Yes we keep them until but we try to help them to be prepared for living out of the shelter to prepare for next year but it is not easy because 98% of the women that we take in our shelter are unemployed so you can imagine and I mean that we have a high rate of unemployment in our country we are dealing with a lot of people who are unskilled - can you imagine let us say if you have got six months it is very difficult to have prepared a person to be able to have a job, to have a place to stay and to put bread on the table -

Researcher: It is very difficult

Participant: So it is hard to

Researcher: Do you have any Skills Development, I mean programmes for women

Participant: No not that much, we have we are being helped by Price Waterhouse and Coopers where every year they will give out some money for women to go for training. Last year our women - two women went for computer course, and the others went for hair care, so they would ask them what they want to do with the hope that they would get training and from there they would be able to make some money. With hair care because there are a lot of people putting wigs... and whatever, that is where we see that women can make money but also it depends on the person - will they be able to push themselves - are they motivated enough, so its not much but ideally what should be happening, I hear the Government they keep on talking about development centres, they are talking about (what are they called) they keep on talking about this programme where they say you can go in there and you can get money (Co-ops or something like that) but where are they - you know. Ideally what needs to happen is that as an organisation we do counseling. From there we need to be having centres where you know the schedule for the year you know the government programmes that are running where you have women in the centre as part of their programme you incorporate skills training in the programme and you can refer. I mean we can be sure when we write our business plan we put in money for transport etc., but you know that women when they are in the shelter when they are unemployed as part of their programme you refer them to those development centres where they - and it is different - because women when they come into the shelters are different you know -

different interests, different passions , so also for us it becomes difficult to say I have got a computer course, I have got a beauty course - they come at different levels, so we should have a central place where

Researcher: Yes

Participant: Rather than us concentrating at the shelter, also we dont only help women in the shelter. We help women who are unemployed who come to our offices - also those women they need to access those development centres, so it becomes a bit challenging for us to actually have

Researcher: Where to put them

Participant: Ja but we do try but also last year we got one women who was our client who got trained doing mosaic, so for last year for the two shelters she has been going to our shelters and training women to do mosaic, you know we got some funding somewhere. Ja and it also helps in terms of therapy because of these things you are not only doing it for money but also for therapy - it is part of the programme in the shelter because you dont want women to be sitting in the shelter and not doing anything

Researcher: So would you say - I was going to ask you about the Prevention Programmes - would you say that do you have any Prevention Programmes as such at ?

Participant: We do a lot of awareness outreach out there

Researcher: At Schools

Participant: Yes we used to go to schools but right now - let me say for the last year we work a lot with caregivers. You know Community Home based Care - we there is a link between HIV aids and Gender based violence and part of the discussion is that women who are in abusive relationships who cannot , are not in a position to negotiate for safe sex so hence they are vulnerable for infection to HIV and if you look at statistics over 50% who are infected with HIV are women and we also know that women generally bear the brunt of looking after people who are sick at home, even young girls because of the role that we have been given by society that of being caregivers who know - it is the woman who stopped working and its that woman who looked after a man, even when she is sick herself

Researcher: Yes

Participant: So we realise that the reasoning between domestic violence and our gender based violence and HIV and Aids so we decided to start working with the Caregivers and within the area where our offices are I am responsible for our Katlehong and Vosloorus office so what we did we and we know that those caregivers they have even more reach than us

Researcher: Yes

Participant: Because they do home visits so we realise that while they are going house to house looking after the sickly they can also look at issues of gender based, some of them will even tell you that "I come into this house and I think I am going to clean this house ore look after this person who is taking TB treatment but if I am there this person will say my partner will say did this and this and you don't know so we thought that as ... we cannot do it we dont have many resources so why not workshop them a little bit in terms of information on gender based violence so we do that we do training with them. Next week I will be training with one of the Home Based Care group on basic counselling. We have already done Gender Based violence workshop with them the 5 day Workshop, so we are doing, so we develop that partnership and it is one of the ways

Researcher: Reaching out

Participant: Reaching out and we get invited to companies everywhere to give the presentation on Gender Based violence. Sixteen days we are very involved, we get invitations to Womans month and that's another way of - we do Radio slots, stalls and you know that is another way of reaching out

Researcher: Creating awareness

Participant: Creating awareness ja, and reaching out to communities.

Researcher: Yes

Participant: We have support groups - I mean right now on the East Rand we are working with these young lesbian women who have been experiencing hate crime and all kinds of hate crime

Researcher: Sexual hatred?

Participant: Yes sexuality- you know on the East Rand it is very rife you get a lot of

Researcher: East Rand meaning Tembisa?

Participant: No Kwatema, Katlehong, Vosloorus, Tembisa Yes, even in Tembisa but because we have our offices in Volsloorus, we have a group of young women and you know the sad part is that it is partly because of their - some of them because of their problems at home because of who they are - we find that they dont go to school and you know - and we feel that we give them support you know we give them a safe environment where they can discuss their issues and give each other support. Partly we also look at what they need more - you find like training for them because in the end whether you are heterosexual or you are homosexual, life goes on and they need to get education and get work and live their lives you know so things like that is where

development centres come through because they are also our clients where you can refer them - you are interested in doing this - you are interested in doing that because also when they are sitting in the township and idling that is where their lives are in danger so we also do things like that. We have recently spoken to a company - I forget their name - they are training in standards (???)..... so tomorrow we have invited women to start may be that towards their Matric. They are coming to our organisation tomorrow to do assessments on those women and to see what standards - and they are going to see what standards and they are going to start doing avid training with them, . So we try all sorts of things for in the end you need to break the cycle of - you need to to to empower the women so that they can be independent and self sufficient so that they dont depend on their partner - you see -

Researcher: So it is little steps and yes a lot of resources

Participant: A lot of resources yes which we dont have

Researcher: Where are your offices, you said you have this office here?

Participant: Yes Berea is our main office and we have a office at Chris Hani Baragwanath hospital thats what the Government has come up with to centre it is the one stop centre where victims of gender based violence especially the rape cases, you have got a doctor, so we also are part of the ..., we are offering counselling and service for abused women and rape survivors

Researcher: Yes

Participant: We also have an office in Everton in the Vaal

Researcher: OK

Participant: We had an office in Tembisa but we closed it because we were struggling with getting a place, a venue to run our service. Ja we used to be in the Court and it used to work wonderfully because we were next door to - right inside the - family court where women who come and get a protection order - and it does - and it makes sense because if a woman comes and gets a protection order why - why do they have to get a protection order - to use a protection order - what is happening - so it would be nice if they come and apply for a protection order, they come to us and then you say why is it what is happening there and you know ... but because they needed space we were evicted. We have got a place its an NGO there but they needed the space there also so after some time we had to vacate, so we are still looking for a place in Tembisa.

Researcher: OK so you will go back to Tembisa;

Participant: Yes because there is also a need there and we also have offices in Katlehong and we have another one in Vosloorus in the Maternity Clinic in Vosloorus

Researcher: OK

Participant: Ja and the two shelters. We also have one which we call a Second Stage house and how is it different to the two shelters. Our shelters are for free. Women I have said 98% of the women are unemployed. We have what you call a second stage house because we realise that women coming to the shelter, some of them get work but some maybe are working but they dont have enough money to get a home deposit, so we asked First for Women to buy us 5 flats - two bedroomed flats - they bought us these flats and then also a company, (couldn't distinguish) came on board because they have adopted us

Researcher – Sorry, who was that?

Participant: Avon -

Researcher: Oh, the Cosmetics

Participant: Yes, they are doing wonderful work with us and they bought - they gave us money to buy furniture to renovate and furnish the place, so the aim of the second stage house is that we want to deliver the message that not only the women who are unemployed who live in the squatter camp are abused, anybody can be abused. You can be a professional person wanting to get out quickly but you are working but because of things suddenly happening you dont have money for divorce - you dont have enough money for deposit, children have to change schools, so we have these flats where somebody can pay towards rent.

Researcher: OK

Participant: And the way we charge rent, we look at what you need, your net salary your - what you need monthly like food lunch for the children, transport money and whatever, and then we charge rent from there. Unfortunately it is 5 flats and what is nice also about that flat is that you can bring children - boys over the age of - I mean I had one client who has a 24 year old boy - who came to the shelter

Researcher: So you dont separate

Participant: Ja, Ja - it still has rules - No men are allowed in the shelter - it is still a shelter but at least you have that privacy because it is your own flat 2 bedroomed flat and fully furnished

Researcher: OK and where are they?

Participant: They are in Bellevue

Researcher: So it is near by here

Participant: Yes it is near by here and they can stay there for 12 months and then there are no extensions. We try to say if you got - if you need counselling - they come and get counselling here and then we encourage them to save - we tell them from the beginning that it is only 12 months - it is almost like we are giving you something to work on you know - it is just a stepping stone - because they were telling us that the rent there you can pay up to fully furnished R354.00 , R450.00 for those two bedroom flats. But there is a woman paying R500 and I also like when I have just taken one woman now and she was - because what we have seen her paying now is that we are charging so little rent, that we cannot pay the caretaker and we have to do maintenance and whatever, so what I am starting to do with this other woman is - because she is staying with a daughter who is 20, and working, so I brought her in and I said Look, I don't know of your mother's situation why she has left the shelter, why she has been looking from one shelter to the other so this is your opportunity to understand so you are going to help your mother so the rent is going to be a bit up because I believe you can also pay

Researcher: Yes

Participant: Yes, you can also contribute towards rent.

Researcher: Yes

Participant: So that is how I so that we can also maintain the place you see

Researcher: And then you have got social workers here, for example?

Participant: Yes we have social workers in our offices even here. We work with social workers and social auxiliary workers. Social auxiliary workers they do a lot of outreach and then social workers they do counselling.

Researcher: OK

Participant: They also do outreach but lets say 80% of their work is doing counselling.

Researcher: And do the people have to pay for the counselling?

Participant: No our services are free

Researcher: So it is free of charge

Participant: OK so we get funding from the Department of Social Development - they only pay salaries like that 75% and so for the running costs of each social worker and auxiliary social worker they give R23 000 for the whole year for transport for water, electricity for the - because if you really look at it if you have got to administrate salaries has to be paid, things have to be - we need to have an administrator - from that R23 000 you have to pay something towards the receptionist

Researcher: Of course

Participant: The Administrator - we have a Director you know and I mean that if the organisation has to work you need to have the structure so that is why ... has been - so we also have to look at other organisations for funding. We were lucky that Avon has come on board - they really - and it seems as if we are going to have an ongoing relationship with them. They have got this programme "Speak Out" - it is about Gender based Violence - so at least we are one of the other organisations that they chose, yes, we for 16 days we had a drive this year - it is sort of a funding drive for us where we sell tickets for Candlelight - people come in and we it is also awareness in terms of Gender based violence but also it is generating money for ... for that evening - its nice

Researcher: The fundraising

Participant: Ja, Ja, and when they were celebrating 125 years the one CEO came through and gave us also money so monies like that they help and we are also getting funding from Lotto, hence we are able to

Researcher: Renovate

Participant: to renovate yes, because they give us money to they understood that we are having problems for sometimes we didnt have money for social workers so where do you get counselling because of the salary that we are offering our social workers. They wouldnt want to come and work for us so partly Lotto said that we will augment this what the Department of Social Development is paying but you understand it is year by year. After April we also have to re apply again where we are getting the money OK Department of Social Services sometimes it comes in late but we get there but it is possible that after April we will told that you get a salary dip so it depends also that you are willing to wait so but it has been good last year so we were able to employ social workers even in the shelters, because we did not even have social workers in the shelters so it was me I have got experience of working with ... so as a result I would be at the office but it is not enough at the shelter because social workers have to be dedicated there everyday because it is a programme you know so you have to get money from other organisations, you have to look somewhere else

Researcher: Yes, so that is basically - it is a lot what you do

Participant: Ja we are working in Joburg but we have clients from all over phone that it why it is important also to have a data base where for example a woman from Cape Town phones the centre or maybe PE or or other organizations you need to know

Researcher: Because you are not national

Participant: Ja we are not national and rather - we have debated on the issue of being national but we realise that because of resources, it is a lot of work - why not strengthen

other women or organisations somewhere, so we have worked with a few women in other provinces

Researcher: Yes

Participant: Who wants to do similar work? We do a lot of things, right now we have a womens writing project, where women write their stories and we produce anthologies

Reserarcher: I think I have seen one

Participant: Yes since the 6th year we have been doing that. Also it is one of our projects so we come up with projects and partly it is healing women

Researcher: Yes.

Participant: Healing women - and lots of Gender based violence. The issue of men

Researcher: Yes I was going to say how do you engage men in violence prevention?

Participant: It is through our awareness, it does not - it will be the whole community of men in terms of our direct services it is women and I did tell you that if mens knocks on the door we will help contain but we would refer to special people like Sonke Gender Justice

Researcher: If a man comes

Participant: Yes, we dont chase anybody away, like I was giving you an example of our recent case where we work with women - we work with men also in partnerships like Sonke Gender Justice where we will have dialogues with them, dialogues in the community where you know we will discuss issues. Personally as a Social worker I remember when I after I had just graduated my worst experience when I had actually a woman came in and she was abused and I decided to call the partner in and it didnt work for me because I remember what they were doing they were blaming each other

Researcher: Yes

Participant: Blaming each other and that's where you see power imbalance. That is what we are talking about power imbalance, patriarchy particularly again in the relationship. What I discovered is maybe what could actually happen - because we are dealing with issues. For me as ... I can take that woman, deal with issues with her, empower her a little bit - the man also has to deal with his issues in terms of abuse - whatever is happening and I saw most of the time is that that man especially when you are younger, when you are older maybe it is better, they will be asking you "you are a woman also, what can you tell me " as they feel that because I am a woman we are out there to get them, so it does help I think if it is a couple - you sit with that woman and she deals with

her issues and the man goes for counselling, - I dont know preferably a man - I dont know maybe two men talk

Researcher: OK

Participant: Like Sonke Gender maybe two men talk because I know Sonke they deal with issues like attitudes of men where abuse comes from so that maybe they can conscientise him because of then there is no excuse for it does not matter if you are then pissed off with your partner why as a man do you feel that you can

Researcher: Why

Participant: Yes Why is it not happening a lot with - what is it about our roles or what do you see our roles as me being a man and you know I would see it working that way and then when they have dealt with it maybe they have given them some information in terms of what is happening, you bring them together. Our counselling obviously we empower them but there is room in counselling for constructive criticism - what I am trying to say is that you look at the women holistically and then if there are any issues to challenge because I dont know - people think that because we are (name of key informant) we stand for womens rights, we agree with everything they are saying without - you know to challenge – for you to empower a person you need to challenge them challenge them if maybe for an example, I will give you an example, a woman comes here, my partner does not want to maintain - yes he needs to maintain the children, but are you working, are you sick, what skills do you have why are you also not working because you - part of why abuse happens because you are independent on your partner - you need to also look at yourself, because your happiness comes from you, you cannot expect you know yes and also to challenge them because some of these women they believe in the stereotypes that society has given us that the man is the breadwinner

Researcher: Yes

Participant: And you need to also challenge things like that so ja

Researcher: Yes so you don't mediate - so you dont do mediation?

Participant: In terms of partners, no ...no - if a woman wants that we refer

Researcher: Yes

Participant: We refer refer to organisations like FAMSA - we would say you wanted, then we refer to an organisation that does that ja

Researcher: OK - One of the questions I wanted to ask you is that are the cases where intervencion is carried out should a man request rehabilitation but I think you have partly answered that ...

Participant: Ja, if they come in we contact but we refer and I feel that and partly it is personal where man to man I think it works better because he will not be sitting there thinking we are out there to get me a woman because they just shut up - you are a woman - what can you tell me

Researcher: Is that because of ... do you think or because you are a woman?

Participant: Both, both and also what they think ... stands for - it is a womens organisation that - I mean some of them are saying that because of ... and this Government and these laws that they make, make sure that women dont respect us anymore and so better if maybe - and sometimes it is even nicer because organisations like Sonke and Men for Change, they work with counsellors who were abused, who were abusive and and a man will also say.... (African word) I was also abused by a woman look what has happened to me I have lost my family or you know

Researcher: OK

Participant: You know man to man you know, so maybe they will listen then you know

Researcher: More

Participant: Yes more to another man you know

Researcher: Yes, but you say if somebody does come, you will help them?

Participant: Ja like I said

Researcher: Contain them and refer them elsewhere like to Sonke.

Participant: Yes to Sonke and also like I said Eish it is also about resources - we have got limited resources and we would rather focus our resources on our mission and its helping women who are experiencing Gender based violence.

Researcher: So

Participant: We also do not work with children like in terms of counselling - we dont - we see women from 19 or 18 years and upwards, we only eh eh eh work with children at the shelter because they are with their mothers but if the child was on here own we dont have the statutory power to work with them so it is either Department of Social Development if the child is what 13 to 18 and it is Child Welfare if the child is 12 - 0. So we also dont work with children in that way. We dont do counselling

Researcher: OK

Participant: If a 16 year old comes - a rape case - I would refer. I dont work with them

Researcher: What prevents men from getting involved in Gender Based violence prevention programmes - I think partly what you are saying with regard to ... they would not easily come because it is seen as a Womens organisation.

Participant: Yes

Researcher: What other reason do you think why dont men?

Participant: Because we are dealing with entrenched stereotypes and attitudes and men grow up thinking what is supposed to happen that is how a man is supposed to so - you like you having to deal with their attitudes what they think you know dealing, challenging other men use culture - but say this is my culture, this is how I am supposed this is mainly - this is how - and I mean we come from a violent society where during times of apartheid the only thing that people used to deal with issues is through violence. We've learned, we have learned that we are a society that has learnt eh eh eh that violence is the only thing that can solve so

Researcher: Like for conflict

Participant: Yes, conflict and things like that so we are a violent society so men a lot of men dont think it is - you know it is typical to get a man who will say "But what if my wife does not want to listen to me or my girlfriend - I have to klap her a little bit so that she can listen to me " So you see for them it is like I have a right to do this, there is nothing wrong so you its like awareness really dealing with talking, discussing and - a lot of men are - dont want to get involved because of maybe also it serves them well

Researcher: It epitomises them

Participant: Yes, yes, advantages to them for to think to stay that way - you know they dont have a problem with abuse, so why why would they want to get involved - you know

Researcher: To change

Participant: Yes there are a lot of men who would be talking, prominent men, but they dont because it is not a problem to them so what is it in for them

Researcher: Yes

Participant: Ja, what is it in for them, so it is a few, few women who talks about this but we also need men - you see it starts - you see it is little things - you might say where do you start you think you have a big programme but it is little things for example where men they need to learn - for if a man says something demeaning about women that might in the end you might say it is a little thing and it is not important but that might lead to abuse - Another man will say No it is not in my name, I dont do that so men have got

this tendency that if a person is sitting out there - a man say something and they just laugh at it but they know that they are not doing it in their home but they dont do it - so men we also need to challenge them like that to challenge them and say No, I dont talk like that - I dont. But they dont because also being macho and talking like that it is mainly macho so they will just keep quiet knowing very well that they dont do it and dont agree with it - so you know changing attitudes, it starts with - simple - you dont have to think of ...

Researcher: Big things?

Participant: Yes Awareness campaigns but little things you know

Researcher: Yes, so how do you think they could?

Participant: And you know I also was saying - what was I reading in the newspapers and I was telling somebody that you know as long as we have got leaders who you see them in the papers doing demeaning things and I gave a simple example of you are a Minister or whatever, you are married and then you we read in the paper that you slept with somebody and a girl that you met and you come to the papers and you apologise you know - as long as we have things like that - abuse - demeaning women - this thing will carry on because we still have leaders who do things like that you know as long as acts like this are still happening - I mean the fact that you are married to this person and you go out there and you have a one night stand and it comes in the paper, you apologise - its another way. Oh, you remember the story of that 16 year old who was wearing a mini skirt?

Researcher: At the Taxi rank?

Participant: Yes, at the Taxi rank and then we were reminded of 4 years ago when that girl was groped, also in the taxi rank and I was saying to them that this thing is going to happen - it is going to carry on happening as long as we have our Leaders, Leaders - a lot of men you know men - you see gender stereotypes men who have money and for them it is money controls and they are breadwinners whatever, so you have all these men and they see our leaders - maybe they work in the Government you know they are in control - they talk - they address big crowds because

Researcher: That's powerful

Participant: Yes that is power and then you read tomorrow you read a story they slept, but for me it is act of demeaning women - you dont respect them - you have a wife but you sleep with somebody and it comes into the papers. You have these men who have got money who - the way they have got their money - they eat Sushi's on bodies of women

Researcher: Yes

Participant: That is another way of demeaning, so I would say to them "What that man who eats sushi - it is the same as what that man at the Taxi rank did. It is not that it is different. This one has got money to do it in style Sushi. These ones they dont have money but they do it by groping women because they say they are wearing - so you see as long as we have got attitudes like that especially from prominent people, abuse is going to happen it is going to happen. It will carry on happening because of leaders, as long as we have got leaders who take 10 women and marry 10 women you know it will never stop so, you see

Researcher: Because they set the example

Participant: Ja,

Researcher: If they do it, why can't everybody else do it?

Participant: Yes, if they do it why cant everybody else?

Researcher: So a way of encouraging men to get involved perhaps is

Participant: I am not saying they are saints those men but if you also are a leader you should take it seriously - it is a big position you know - you should try to set an example

Researcher: Yes because people will follow.

Participant: Yes people will follow you know - it wont change today but it has to be constant you know our leaders should be encouraging that you know

Researcher: Is there any other way you think men could be encouraged?

Participant: I - we have to get a commitment from the government especially in terms of protecting the rights of women and young girls and political commitment also and I mean the Government is also made up of different departments. We work a lot with SAPS and the Department of Justice and they should make sure that whatever they said they will do, they have to do it. Cases of abuse should be - those people should be charged rightfully, so it means the law has to to be kept so that it should be a deterrent to perpetrators of abuse. There has to - if it doesnt happen this man will say "Ag, giving me a piece of paper - a protection order - they should know that if they abuse - the Police come to your house and say This is a protection order, a warning - you are not supposed to do 1, 2, 3, 4. If you do it we are going to arrest you. It should happen.

Researcher: So you think that that would be a way of

Participant: Eh that - they should know that you are not going to do this and get away with murder

Researcher: Yes

Participant : Yes, you are going to be punished you know - you are going to pay for it - that is also one way of and the Government working hard on really protecting women you know

Researcher: Yes

Participant: Yes

Researcher: And you say that men having the right role models or more appropriate role model people, and also small things - I suppose that would be encouraging for - I mean I don't know what would encourage men to get involved in gender based violence?

Participant: Ja - it is not attractive eh. It is not like we are talking about Sports and

Researcher: No (laughing)

Participant (Laughs) No it is not - we are talking about because you know what I feel is - more men should be - like I said it is difficult what is there in there for them. They wouldn't because maybe if it does not affect them they don't care you know

Researcher: So you don't really think it is somehow possible to encourage men to become involved. Because there is nothing

Participant: You know you are asking me this and I am asking myself - I wonder for organisations like Sonke - what kind of audience do they have" It would be interesting to find out what kind of men do they talk to when they have their dialogues and what kind of men is it men middleclass - Upper class,

Researcher: Yes yes

Participant: Because also the change can really actually happen - I mean money is power where men can - middle class men you know there is money and everything - ja, changing attitudes do they get that kind of audience you know.

Researcher: Yes, because the programme that we did in Alex now was the first one that they have done in Alex, the one

Participant: Ja and what kind of men were there?

Researcher: They were young men under the age of 30

Participant: Educated?

Researcher: No, not necessarily

Participant: You see

Researcher: But very open to change

Participant: But you hear what I am trying to say - young men working have power living in a townhouse or whatever, because thats where people live that have got money because them also in the end it is about attitude it does not matter if you have got money if you have got this attitude - or this thinking that you - the only way you can deal with your partner is being abusive, thats what you know

Researcher: Ja, but there must be some – to get these young men and to see what their attitudes are - and so that they were so open to change - it was hopeful

Participant: Ja, Ja, it is important to work with everybody you know everybody

Researcher: Because one of the questions is: How does the involvement of men lead to prevention of Gender Based Violence? Because the more men...?

Participant: The more men become aware of the consequences of what gender based violence does hopefully if you are doing it the more you will be aware of your actions and also be aware and maybe more interested in making other men aware - stop doing certain things that you were used to doing like I said for example - challenge that behaviour that encourages - you know

Researcher: Yes, yes

Participant: You know awareness - partly awareness to all these men you know - and you see issues and awareness about Gender Based violence shouldnt be 16 days but 365 days you know

Researcher: So there is more ongoing awareness - not just the focus

Participant: So go to companies and whatever - also companies maybe then giving commitment to also come up because they can sponsor those programmes where they can bring organisations like ... Gender to come and address their staff in terms of issues of gender based violence you know - so that we can reach out you know - things like that

Researcher: Yes

Participant: You see companies. Government on its own wont do it - organisations - it should be everybody, I am thinking corporate also.

Researcher: Yes the private sector

Participant: Yes the private sector also they are getting involved sponsoring you know programmes like that as part of employer assistance programmes in the workplace.

Researcher: Yes because it seems mostly - it sounds very small but it seems a lot to be about attitudes -

Participant : Yes, attitudes and culture and the way you patriarchy is about some of those things in culture and religion you know dialogues because it can be dangerous to say you know I found it like this you know - you dont even think about it it is always like this you dont even think about. Whereas awareness is important and engaging a lot of men in discussions you know

Researcher: So you say you network with other organisations like ... and what do you do - you dont run anything with ... or anything like that.

Participant: Like I said last year we had a dialogue with priests - because this thing came up - also we are dealing with things like this pastor on the East Rand he came out in the paper that he was doing all those sorts of things and we actually responded that if he is doing things like that it is wrong and we were challenging religious organisations to say what are you saying about it so we decided that as part of 16 days we would have a dialogues. We invited pastors from different, even - whats this organisation - an old organisation - they came and - Council of Churches - where it was a partnership between Brothers for Life and I think it is under the auspices of Soncke, so together we are running the dialogue - so we do things like that. We have had dialogues in Matoloe formal settlement in Roodepoort where we were working with Home Based Care but we ended up working with the community there where we had dialogues so they would run dialogues with me like Lekotla like round with men talking about their issues, we would sit with women talking and then from there facilitate:

Researcher: Yes OK

Participant: Yes we do things like that -

Researcher: That must be valuable:

Participant: Yes, you know

Researcher: And to bring them together

Participant: Yes to bring them together and say this is what the women are saying and this is what the men are saying you know

Researcher: What was the result?

Participant: I was not doing it you know we have a training department that is responsible for doing that

Researcher: OK

Participant: I would have to find out how - because what is important is how - how did they take it - the men and the women - when they are together women given an opportunity to say what they feel - how they see and vice versa and to see what is the attitude are they differently perceived are - does it work - does it open them up

Researcher: Yes, very interesting. OK do you have any or does ... have any recommendations in terms of Gender based violence prevention - that you havent - because we have just talked about a lot of things

Participant: Yes we have talked about a lot of things - Eish - I am more interested in the I can still say the SAPS, the police can do more I think and they need to also know that if they do not do their work, something - some form of punishments from their employers - if you are a police person then we send women come to them to open up their cases. Women are survivors of violence, gender based violence, to speak out and so they need to know that if they go to the Police station then they are going to be - so something has to be done, hence I am talking about political will from our Government to say that if my official is not doing - when it comes to issues of women, they are going to be punished. They should know that they have to do something they have to be competent or else they will be punished for that. The Justice system also same thing but also cases should be taken seriously, speak to the prosecutors so that you dont create secondary traumatisation to your victims because can you imagine you are a rape victim or a child has been raped, the case 3 years later is still going on. I mean we had a case of a young woman from Tembisa who was raped and I dont know whether the case was postponed 25 times for different reasons so you can imagine what it does - it was only after ... with those purple T shirts, we were sitting there, you remember those purple T shirts. If you know ... purples Tshirts. It is a campaign

Researcher: Yes a campaign

Participant: Ja one in 9, through that campaign one in nine were to say that together with other organisations only one in nine women get to speak out about the rape or whatever. So it was only after we helped to campaign for that case that those boys were prosecuted you know. It was after four years or what, so we are saying shouldnt any woman over the country if they go to Court because of rape it shouldnt be helped by ... for your case to be prosecuted so that will also help. Victims should have respect and believe that the justice system will prevail for them when something - and also the Justice system and the Police they should act as a deterrent to

Researcher: Yes

Participant: And the sentences should be appropriate

Researcher: Meaning?

Participant : Appropriate in terms of if you have done something wrong you are going to pay and it is going to be harsh, so this sentence should make sure that you - it should be appropriate, I mean the person shouldn't rape and then after three years that they are out there roaming whether they get parole or you don't know - people I mean a lot of our clients especially the rape cases will say the person ok has been arrested but they are out like it is never explained to them why and you find that the victim will complain that this person is harassing them - they are walking in the street, the police have never explained to them whether they are out on bail. We are aware that people have a right to get bail but like the victim has not been told what is happening - the perpetrator is in the street walking and threatening them - the family coming and so you know things they also have to look into that

Researcher: Yes

Participant: While trying to balance the rights, also the perpetrator like I said but also is it going to be dangerous for the survivor also. Can you imagine children being raped and then the perpetrator is walking in the street and you know. I still remember that case you know a long time ago of that man who raped this child, got bail and then came out to kill the child because they were trying to hide the truth, so you know things like that so the Justice System, the Police- ok organisations like Sonke it is good they are doing something with men but it is not enough. Funding for NGO's we struggle a lot with funding and most of the time because of that we are unable to do what we want to do especially in terms of our awareness you know or reaching out

Researcher: It holds you back

Participant: Yes, yes, and even direct - like I said, funding affects like our social workers, so it means in terms of direct services our services suffer.

Researcher: Yes - so when you said working with ... - what ... is doing for example working with men is good. Do you think they should do more work with men

Participant: Yes I guess so - I guess so - more men should be reached because I like I said we are dealing with different types of men at different levels, all men you know should be reached and awareness should be made on issues of gender to all men - you know more awareness

Researcher: Because they are the major perpetrators of this

Participant: Ja, because they have got the money, they have the power but eish you know there is also this criticism that you- you women you complain about gender based violence but you are the ones that look after the children - those young boys they turn out to be abusers, we are not there and they would want to blame us for making the boys you know because women you know are there and they say some women they are even perpetuate what leads to abuse - a man feeling that it is OK because we look after the children you know but I always say to them they must remember that women are not an

island they live within the society it is not only within the home - it is everywhere at work at school, outside

Researcher: Outside - it is what they learn

Participant: It is what they learn from TV, Media you know but it is also important because now I really believe that especially with our clients that information is power, we need to it is important for them to also aware of what is happening to educate them about their rights you know because we can say the Government says these are your rights but if they dont know how to use them also. Also education, especially the women they are the very ones very well that you want to tell them or they also need to be educated themselves what their rights are

Researcher: Yes and what to do

Participant: Yes and what to do, you know I always say for example - we are 50% of the population women. You know we somehow we have a voting power you know. I always say to them your vote is important you know are you - the the the what do you call it - if you are going to vote for an organisation that is going to

Researcher: Yes

Participant: What are they saying in terms of your safety as a woman? Vote for a person who is saying - hold them accountable - dont just go and vote you know. This day as woman you know is 2011 we should be voting for - what do you call it - eh ag man an organisation that speaks towards your rights

Researcher: Promotes your womens rights

Participant: Yes, so if you are just going to vote but what I say but also not only what they say but hold them accountable - we need to be doing that you know. And we have the numbers as women but I think the challenge is that how do you bring all the women to see what is happening and how can you improve our lives in a way, because some of these women grew up in this patriarchy in this abuse and I mean I still remember the case of our President - the rape case - you remember

Researcher: Yes

Participant: You know we were angry but now we are saying there is no smoke without fire, but we have had women who are sitting there and singing for him you know things like that - so you know it's like we have all sorts of people with all sorts of information

Researcher: Different

Participant: Yes different so how do you make them?

Researcher: So how do you make them all agree

Participant: Yes agree and be aware and be able to use their rights and what the government has agreed to do for them to hold them accountable - So it is not as easy as

Researcher: No and it is a huge problem

Participant: Yes and ... is a small organisation about 34

Researcher: Is that your staff

Participant: Yes it is not a lot. It's a small organisation

Researcher: But it sounds as if you do a lot of

Participant: Too much - we have taken too much. And I think we are only learning now that we need to limit

Researcher: And focus on quality

Participant: Quality yes and especially with our offices quality work, like counselling like I always tell my staff that my social workers that look if you can see 5 clients in a month but when I look in the file I want to see the beginning and the end you know - quality work - like you worked with that person, you phoned to follow up when you referred, there is a referral letter, that when you phoned the people you are referring to say - are you still there - I am bringing - dont traumatise a client again you know rather than try to push for 100 clients per month but when you really look at what you have done you

Researcher: It is not effective

Participant: Ja, Ja, it is not effective so we are actually also trying to do that with our services to say we want quality work - even with Outreach when you go out there you be prepared you make sure that you reach people and you give them valuable information that they will use

Researcher: Yes. Thank you. Is there any other information that you think would be valuable or helpful

Participant: Eish - I dont know I - No, I think I have said my piece

Researcher: Nothing you would like to add

Participant: No.

Researcher: Thank you .

Appendix L

TRANSCRIPTION OF INTERVIEW PARTICIPANT D:

Researcher: Thank you for taking part in this interview and allowing me to interview you. I am going to ask you some questions and I want you to answer in as much detail What you think and experiences are very important in terms of GBV. At the end of the interview you can also make clear something that you are concerned about. You can also stop the interview, you are free to do so

Participant: Ok.

Researcher: I would like to start by asking you about what is your understanding of GBV?

Participant: GBV? According to my understanding?

Researcher: Yes

Participant: I can say when man abuses woman yes.

Researcher: Ok and do you think it's only when men abuse woman. Always?

Participant: Ja in most cases I would say so but sometimes it can also be woman abusing men

Researcher: So what you are saying is that it is based on gender. Can be either men abusing women or women abusing men. But it sounds as if you think men are responsible for more GBV than women. (Participant encouraged to speak louder – very soft).

Participant: Ja I can say that men are to blame because most of the time men most of time use strength. Women don't have that much of a strength so I can put the blame on men.

Researcher: I think what you are saying is because that men are more powerful and physically stronger than women they can be more violent towards women and therefore you think more cases GBV are caused by men

Participant: Yes

Researcher: You also say that GBV can also be women against men.

Participant: Ja.

Researcher: Do you see many cases in Alex? You live in Alex?

Participant: Yes, I have at my house.

Researcher: Ok in your family

Participant: Like most of the time on weekends my dad used to come home drunk sometimes he will fight with my mum over something stupid yes

Researcher: And what did fighting mean? He came home and he was drunk and you said he started fighting.

Participant: Like they would fight over something stupid like my mum would ask my dad where does he comes from and then my dad starts shouting you see and then he would beat her up.

Researcher: So this is something that you have grown used to you have seen it a lot in your own home

Participant: Yes

Researcher: In your neighbourhood?

Participant: Ja I have seen it a few times but mostly I have seen it at my home.

Researcher: Why do you think your father might do that?

Participant: Ay I'm not quite sure.

Researcher: But you say mostly at weekends when he has had something to drink

Participant: Yes

Researcher: Do you think drinking making it worse

Participant: Yes I can say so 'cos when he is sober they don't fight at all. But when he's drunk that's when violence starts

Researcher: You are saying that the drinking makes him violent, changes him.

Participant: Changes him completely

Researcher: Because they don't fight at all normally

Participant: No not at all

Researcher: you more experience d in your own home its not you very aware of it and seen a lot. Anything else that makes violence worse. Seems that alcohol is a big problem

Participant: Ja I've seen a lot of it.

Researcher: Why do you think there is a need for your father to drink?

Participant: Ay I don't know (pause 2-3 seconds) I can say that alcohol helps him to release stress. That's why he needs drink

Researcher: So maybe during week at work lot of stress no other way. Do you think stress can lead to people using alcohol is it common in Alex?

Participant: Ja its very common in Alex. Most people use alcohol and when you ask them then they tell you they have stress so theres no other way to relieve stress

Researcher: What do you think that?

Participant: I don't think it is one way to relieve stress because when you are drunk yes your problems do go away but tomorrow when you are sober, there are still problems about stress when drunk or when sober so I think it's a complete waste of time

Researcher: So you see problems short term but it doesn't make you forget. Just makes them go away for a short while.

Participant: Ja ja

Researcher: What can you tell me about the programme here – the One Man can programme?

Participant: Yeah I can. I can say for my side it has helped me in such a way that now I do have like a clue about gender based violence cos (pause) I don't know how to put it

Researcher: In your own words. Take your time if I don't understand I can ask you to Would you prefer someone to interpret for you?

Participant: No it's ok. Can we skip it and come back later?

Researcher: Yes. Is there anything else you can tell me about the programme?

Participant: We usually meet on Wednesdays and Thursdays. And then on Saturdays we form teams and we play soccer.

Researcher: You've been coming every Wednesday and Thursday since it started in September What made you come to join the programme?

Participant: It's what I've experienced at home. So I thought when I come here to I could understand why my father does all the things that he does

Researcher: So that motivated you to come?

Participant: Yes

Researcher: Helped you to understand why father why he acts the way he does. How did you hear about the programme?

Participant: The facilitator told me. He just invited me to come to 3 square. There's a workshop thing going there. Maybe I will be interested so I thought ja

Researcher: So you've been motivated every week to come 2 days a week and soccer.

Participant: Yeah but there were times that I couldn't come 'cos I was writing my exam. I was busy doing my exams.

Researcher: Ok.

Participant: On Saturdays I'm always here

Researcher: To play soccer?

Participant: Ja

Researcher: What have you enjoyed most about the programme, what did you like the best?

Participant: Playing soccer and the topics

Researcher: What topics did you like?

Participant: The one on Migration

Researcher: Do you want to tell me a bit more?

Participant: Ja, they told us that there are people ne who are coming from other countries like crossing the border. They come into the country illegally without proper documents.

Researcher: Ja

Participant: So some of those people they say some of them are influenced cos some of them they come for bad reasons like selling drugs. Yes. So that's what I learned but some came for good reasons like they came here to make money so they can make better livings to support their families at home.

Researcher: So did it help you to understand these immigrants that are coming in. Understand more?

Participant: It has helped me understand why they come. At first I didn't know that when they come in this country they need proper docs I just thought they just come in and out as they choose. But now I know they should have proper documents. There are reasons why they are here permits.

Researcher: Did that help you to understand them more what your learnt.or change your feelings towards them?

Participant: Ja it did change my feelings towards them. Cos at first like where I live most people say that they are here to steal our jobs so now I understand why

Researcher: So maybe you don't feel the same anymore

Participant: Now I understand

Researcher: That was it sounds as if it was a big thing almost a highlight

Participant: Yeah I can say it was

Researcher: Any other topic apart from that that you enjoyed?

Participant: Ja one about HIV.

Researcher: Yes? Can you tell me more?

Participant: Ja I can tell you more. Cos at first I didn't know that was the difference between HIV/AIDs. They told me HIV was a virus and AIDs a disease. Now I know that HIV is a virus and AIDS is a disease. I don't think AIDS curable.

Researcher: You know the difference between them

Participant: Ja now I know the difference between them. Now I know that AIDs much dangerous than HIV cos you can healthy lifestyle if you take proper medicine take healthy food exercise ja.

Researcher: It made it much clearer for you to be able to differentiate

Participant: Ja

Researcher: So that changed for you.as well because you had more knowledge

Participant: Ja because at first I just thought HIV/AIDs same thing. There's no difference.

Researcher: Would you treat them (people) the same?

Participant: Ja I would.

Researcher: I don't know if you are understanding what I mean?

Participant: I do understand what you mean. I would treat them the same as other people
At first I thought before I joined this programme scared to talk with a person HIV AIDS
HIV positive but now ...

Researcher: So its changed the way you talk to people Sounds as if you have more understanding. You know what it means and what it is and then it makes you not so afraid

Participant: Ja

Researcher: What has been difficult in the programme?

Participant: Nothing that

Researcher: Nothing that you can think of? (Long pause).

Participant: Ay except for part where they talk about gbv

Researcher: So that was hard?

Participant: Ja that was hard

Researcher: Because it is personal, it made you feel pain?

Participant: Ja it did.

Researcher: How did you cope with that? How did you manage it when they were talking about it to hear what they were saying?

Participant: I did manage it when they were talking but it was difficult for me like they knew what was happening at my house soit was quite difficult but I had to hear what they were saying.

Researcher: How did it feel afterwards to hear what they were saying?

Participant: I felt better 'cos now I had much understanding about GBV. So ja

Researcher: Maybe you were afraid. It was too familiar. Something you have lived with for a long time. You didn't like to hear them talking about it as if they knew?

Participant: Ja

Researcher: By hearing them talk it was good - maybe you realize many cases people experience the same

Participant: Yeah

Researcher: Quite a relief. A release....many people experience

Participant: Ja I thought I was the only one and I was afraid to tell the guys but now I am no longer afraid to talk about it.

Researcher: Have you been able to talk about it?

Participant: Yes, with some people

Researcher: With your friends?

Participant: Not in group but with my friends

Researcher: Different for you as afraid to talk about it

Participant: I was really afraid to talk about it like when I talk about it people laugh at me talk behind my back. But now I know it's something happening all round

Researcher: It makes you normal. You are not the only one. Friends

Participant:

Researcher: So maybe highlight for you that you are not the only one who has experienced, yours not the only family, your father is not the only man who does this.

Participant: Yes

Researcher: So do you think this programme has made a difference in your life

Participant: Yes it has

Researcher: Can you tell me in your own words what difference it has made?

Participant: I can say now like I told you like I now I treat people with HIV same as people

Researcher: Anything else sounds as if change in way you look at refugees immigrants

Participant: Yes, yes. I've learnt a lot of things. Learnt how to treat a lady

Researcher: Ok?

Participant: And about STD's helps to be faithfully to partner, abstain, condomise

Researcher: About?

Participant: At first I didn't know how you get it or is it curable or all those sort of things.

Researcher: You didn't know as much before. So there were a lot of questions and maybe also not knowing where to find the answers to those questions

Participant: Ja

Researcher: Now there are a lot of things you know about and you have more information

Participant: One topic I enjoyed about circumcision. Cos they told us that when you are circumcised chances are less for you to get HIV/AIDS. When you are not circumcised the chances very high

Researcher: Something that was new for you. You didn't know before?

Participant: I didn't know before yes

Researcher: So you learnt more about HIV/AIDS?

Participant: If you don't condomize ja

Researcher: Sorry bit of noise. Do you think that this programme can help other people because it has helped you?

Participant: Yes it can because it has helped me and I have invited some friends to join me

Researcher: Have they come yet or are they still going to come

Participant: Some of them came some of them werent interested

Researcher: But you think it can help people.

Participant: Ja I think it can cos people can learn lots of things

Researcher: Could you tell your neighbours about it, your parents?

Participant: Ja my parents know about it. As for my neighbours they dont

Researcher: They don't know about it. Would you be able to tell them about it

Participant: Ja I don't think they will be able to come cos some of them are working so I don't think they have time.

Researcher: It could help other people

Participant: Ja I think so it could

Researcher: How will it affect you in the future because of doing the programme (short silence)

Participant: In the future? Cos like I will learn how to not use my strength like treat my wife in a good way not like my dad does to my mum. Yes try to be a good father. To be a good role model

Researcher: Yes so its something that you will take from the programme. I think that you said earlier something about treating your girlfriend differently I can't remember your words. You said treating my girlfriend um

Participant: I said I learn how to treat a lady yes

Researcher: For you to treat a lady different from how I would before

Participant: Ja before I treated them like they were boys

Researcher: What does that mean?

Participant: You see I can say that what made me treat them that way is there was much anger in me so I think that's why.

Researcher: And your anger now?

Participant: I've learnt how to manage it

Researcher: So before when you felt very angry you would have felt?

Participant: To hit a lady cos my father does it too.

Researcher: It must be hard to change the way you are cos that's what you think is normal

Participant: Yes

Researcher: Not right way

Participant: No it's not the right way. Cos me also I think alcohol does relieve stress but not anymore ay

Researcher: You've learnt to treat a lady not using physical force and also alcohol doesn't relieve stress because you said earlier problems same when you are sober

Participant: Yes, ja

Researcher: So you don't think it's a good way to solve your problems?

Participant: No, I don't think so.

Researcher: How do you think programme could be better? Is there any way if you could help to improve what would you like to see more of better

Participant: I would like to see more people attending

Researcher: Ok.

Participant: Yeah like a workshop doesn't have that much of a space so I wanted it to have more space so those also join us. Make flyers and posters to give away to tell people about the workshop

Researcher: So you would like to encourage more people to come, you would like more young men to participate because you think it can be useful to learn all these things

Participant: Ja it can be, sure

Researcher: Nothing in programme but maybe more people?

Participant: I would also like girls to join so we could understand them more 'cos now its only men and boys. We could also understand their situation.

Researcher: How do you think understand - by talking, sharing?

Participant: Ja I could say so

Researcher: It seems as if you would like to understand them more but you don't know how to understand them more?

Participant: Ja (laughs)

Researcher: I guess it's hard in your life to be able to speak to girl as a person

Participant: Ja I want to understand girls. I also want to know why my mum stays in an abusive relationship.

Researcher: That's difficult for you to understand?

Participant: Cos even if my dad beats her up, even if my dad chases her away she still gonna come back.

Researcher: So you would like to see from a female point of view why women stay in abusive relationships?

Participant: Ja, ja

Researcher: More understanding of that. Any other info you think would be useful for me to know. Something you not clear about from the interview?

Participant: No, I'm fine.

Researcher: I thank you for taking part in the interview and the research. I hear that it must have been hard for you to talk about GBV. Because it is something you have experienced closely. I am wondering how you are feeling right now? Would you like to speak to some counsellor?

Participant: Ay, I am ok.

Researcher: Because you can go to Adapt and get counseling if you need to or Lifeline Alexandra that offers counseling.

Participant: I guess I'll think about it.

Researcher: Thank you very much I really appreciate your time.

Appendix M

TRANSCRIPTION OF INTERVIEW PARTICIPANT A

Researcher: So we spoke the other day about taking part in this study and I thank you for that. I told you where I come from and my name and designation. I am doing research about what men think about gender based violence and the programmes. You don't have to take part as I told you the other day. If you are feeling uncomfortable during the interview you can ask me to stop it. If you feel distressed afterwards as well you can come for counseling at ADAPT. If there are issues that it brings up because sometimes when person talks about things it can bring up emotions

Participant: Ja ja.

Researcher: This recording will be kept up to six years after.

Participant: Ok.

Researcher: The findings will be used to help gbv prevention programmes. If you want to ask me any question during the interview, please feel free to ask. Whatever you want to know more about

Participant: Ja ja

Researcher: You know what I am intending to do. I am trying to see how people particularly men feel about gbv. Thanks for your patience the other day. Anything that you would like to ask me before we start?

Participant: (Laughs) No, I think everything is covered. I have signed the consent form. I *am a for away!*

Researcher: Ok. I will start by asking you what do you understand by gender based violence?

Participant: Firstly when that word comes up I normally think of men beating up women and children. But then since I attended the workshop I've realized that its not only intended to protect and secure women and children. It's also for men There are men who are being abused by other women but then they are afraid to come up with it. So I think gender based violence is something that is really killing the nation slowly but surely 'cos people always lock up what they feel inside. Ja, I think.

Researcher: Ja. So you say because of doing the programme it has changed what you think about gender based violence?

Participant: Ja, its changed my perspective

Researcher: You thought that before it was men against women but you realize it can also be women against men.

Participant: Ja, ja

Researcher: Ok also as a result of doing the programme

Researcher: How long have you been doing the programme?

Participant: The "One Man Can" I think from the first week. I'm not sure when it was from. I think since early September or late September one of those days

Researcher: Did you come at the beginning?

Participant: Ja I was here from the first week so practically every activity and time. I tried to every activity almost everything I was involved. Besides if there were other commitments I had to go to but then almost everything I was involved

Researcher: mm

Participant: At first we had it from Monday to Thursday. But then we sorta suggested to the facilitators it takes too much for our time why don't we go like twice a week or 3 times a week so we decided to do it on Wednesday and Thursday.

Researcher: Ok. ok.

Participant: So Monday to Thursday eish it was strenuous! Sometimes if it comes Monday during the week sometimes you have other things to do. Sometimes you don't come the whole week. But if two times a week I always plan it in your schedule I musnt forget! I always plan it in my schedule so that I musnt forget. It changes my life and the people around me.

Researcher: So you prioritise it. You make sure it is a priority. (aeroplane overhead)

Participant: So far it is a priority

Researcher: Ja ok. You live in Alexandra?

Participant: Ja born and bred

Researcher: Lived here all your life and went to school here.

Participant: Ja I went to school around Alex ja.

Researcher: Have you seen incidences of gbv in your community?

Participant: Yes I've seen it. Even I have been involved in one. I've seen my friends do it. My parents. Ja, its something that I normally see and so its something that we have grown to get used to so then its something sorta like a norm to us. Cos when you see when we see a man beats a woman we say that that man is giving the woman respect, like you know, discipline.

So at first we think that it is something normal that that man is giving that woman discipline. When we see men beating up the wife or children we say ja that's discipline. Meanwhile they were abusing their wives and children ja

Researcher: You are saying that when most of the people in the community see it they feel the man is doing it to women you think its discipline. Maybe that she needs that to be done to her?

Participant: Yes she needs to be back on line. Ja sometimes even when we don't know what they fight about but then you know people always come up with assumptions. Like you know if you see a man the wife is cheating, maybe the wife is disrespecting the man stuff like that. So we always come to the conclusion that it is discipline to the wife, that it is discipline to the children ja.

Researcher: So it's acceptable in a way cos you are saying its necessary

Participant: Ja in a way its necessary

Researcher: So you are saying that your perceptions have changed

Participant: Yes even now when I see someone my age beating up his girlfriend I always walk up to him and tell him what they doing and say to him you can get arrested stuff like that. I am making people aware.

Researcher: Ja

Participant: Ja and spreading the message. Because the first week when I attended the workshop they told us that whatever they told us woteva we gonna gain here was not for our own good but for people who don't know always promote wrong stuff

Researcher: But it could also be seen as for your own good.

Participant: Ja ja.

Researcher: Because you've learnt from it. You've changed the way you think.

Participant: What I think ja

Researcher: What have you enjoyed most about the programme?

Participant: I think it's the activities and the exercises. Cos they sort of like put us in the shoes of the people that have experienced GBV, those who have been abused, those living with HIV/AIDS. Cos there was one exercise where they said like we had to come up with a storyline. They gave us like four story lines gave us one story line. Like Jack everyone in his family died of AIDS. Jack comes to the problem where he has a girlfriend and his friends are plagiarising him that he must sleep with the girlfriend him. He ended up sleeping with girlfriend. So Jack sleeps with the girlfriend just to please his friends meanwhile he knows that in his family there is this problem of HIV/AIDS. So I think the activities and the exercises they are really enjoyable because they put you under the peoples skin. You come out of the comfort zone and then you see things from other people's angle. Ja

Researcher: Ja so you liked that. It felt like you learnt something. it enriched you. It benefited you

Participant: Ja Ja

Researcher: Made you think about things you had never thought about.

Participant: Ja thinks I never knew 'cos you know people in the township always think about HIV/AIDS you must never be around them 'cos HIV is contagious (Laughs).

Researcher: Ja

Participant: Ja which not true. Because I've realized that there are like 3 types of - whats this word like transmission

Researcher: Ja

Participant: By sexual intercourse, blood and needles .Not by kissing or sharing the same tap toilet seat same cup At first like if we knew that someone in neighbourhood positive you would sorta like pull away from that person. So it also showed me that people who are sick like really need our support. Ja I realized that people who are sick need our support

Researcher: So it has changed for you since 2 months ago. Its been learning for you because you said when you started 2 or 3 months ago you didn't realize how it was transmitted so it's been a learning curve

Participant: Ja its been a learning curve.

Researcher: And also how to treat people in community

Participant: Ja those who are infected in the community. Ja cos when someone told me my neighbourhood or my friend was HIV/AIDS I always talk and create rumours around that person so that like people would move away from that person

Researcher: Ja-a-a

Participant: And I realized that that is not a good thing. Like when a person is down like its when a person needs everyone's support the most

Researcher: So it's made it easier for you as well as you realize that they need support so you'll give it so...

Participant: Yes I didn't understand other people. 'Cos at first personally I was a very selfish person. Everything that I thought about and did was always about me, me, me. I never realized that ay man ok. It was me but through me there was my mother, my sister, my friend, my neighbour. Those are the people that help you to create your character

Researcher: And those are the people that you live with – your family

Participant: Yes, my mother, my sister, my friend, my neighbour. Ja those are the people that help you to correct your character. .

Researcher: Why did you join?

Participant: Well at first I joined 'cos like the people from Adapt I know them. 'Cos me and my friend run NGO for youth where we teach and help youth about social issues. So when they invited us they were trying to be how can I put this they were trying to be generous and they helped us a lot so we are trying to show that we are grateful and appreciative for their help Then now I realize that I joined this thing cos I was lacking information in terms of GBV, HIV/AIDs, abuse - all these horrible factors in the community

Researcher: So you did it because of ADAPT. Because you had a relationship, working relationship but...

Participant: Ja ja. At later stage I put it upon myself to come

Researcher: You come twice a week Wednesdays and Thursdays so you are really trying to invest in the programme. Really take part.

Participant: Ja cos they invest in us also.

Researcher: What do you think for you have been some of the challenges or difficulties of being in programme?

Participant: Of being in the programme? I think the first thing that sorta like caught my eye was that like I never wanted to accept who I was at first. I was never happy with my life. Cos when I get this then I thought but this is not enough for me. Why don't I get this? I never happy with accepted my life. Why but through attending the workshop meeting and meeting other people from other areas of life, I realized that my life was even better than most peoples'. So I must just accept it first then that way I will try to move positively forward in my life

Researcher: Is there anything specific that they have done in the programme the areas that they covered, things they have spoken about that you found difficult – to listen to, to understand?

Participant: I think gender based violence was something that is really close to my heart. Cos it's something that you see every day. As I said before people in the community ignore it and meanwhile it is killing the community. So I think that was something that was really close to my heart. I had always made it a point that I had a point to give to give out. Suggestion, addition, subtraction, multiplication ja.

Researcher: It doesn't sound as if there anything you found challenging? You came to do the programme. You realized that your life was not as difficult?

Participant: Ja

Researcher: So there was nothing that you found difficult about participating in the programme or what they covered?

Participant: No, for me personally I don't think that there was anything difficult. For me I am a very open minded person. Everything that comes my way I always try and look at both sides the bad and the good. Ja, so for meSo I think it was really challenging to see it from the bad side and the good side

Researcher: Ja

Participant: When they talk about HIV/AIDS I'd always see ok. the bad side and good side is this and this and this. How do you put them together to move forward?

Researcher: It sounds as if you have learnt a lot. You've learnt a lot about HIV/AIDS, the way it is transmitted. Understand it better and because of that support other people in your community and treat them differently

Participant: Ja

Researcher: As well as GBV. You say that you always thought it was one specific behaviour but that you realized that it can have many forms

Participant: Ja

Researcher: You said just now that GBV is killing the community?

Participant: Ja ja

Researcher: What did you mean by that?

Participant: Cos people are ignoring it. And it happens every day. Let me say when was this? Can I say a month or two back me and my friends we also have a tuckshop that we running in the corner. In the morning round about 7 o' clock when we opening there was this lady coming out of her house shouting like she was screaming ah ah. Then the man comes out ja ja swearing at her and then we laugh. You see ja so that was like something. When I was alone I realized that that was something bad that we did. Why didn't we as people of change go to that man and ask him what's wrong, what is happening? Why don't you take your wife and lock the door and sit down, talk about it instead of becoming physical about everything? So I think people ignore it. Ja

Researcher: Maybe they don't know what to do?

Participant: Ja cos other people they don't know I don't know how you say how to confront their problems and issues in life I think everyone even me everytime I had problem with girlfriend, little brother, sister, I would always resort to beating them up or swearing at them stuff like that. But then I thought that's not the solution it just creates more problems. Why don't I take my little brother sit down with him and tell him look this is my property. If you wanna use my property why don't you ask me first? That way we have some level of understanding both of us.

Researcher: Mmm. So what you are saying is that violence doesn't necessarily have to be the answer to everything, to conflict although it must be difficult if it's the way you've always been, the way everyone behaves

Participant: Ja everybody behaves

Researcher: So what would you do now? You felt that you were wrong to laugh at that lady coming out her house?

Participant: Ja

Researcher: What would you do now? How would you deal with it?

Participant: I think the first thing to do is to have to go and talk to the man because he was the one who started it, the beating up. Go to the man asks him, “chief what is the problem?” Then if he says the wife is cheating. Then ask him “who are they cheating with?” “Why are they cheating?” Cos everything. There’s this man that I always see on TV. He always says like where there is smoke there’s fire. So maybe if that woman ended up cheating, maybe there’s something happening wrong in the house that s making her to go outside. Why don’t they see whats wrong in the house? I think I would go and talk to the man even though sometimes like when there are older people when a young person comes to them like we are disrespectful stuff like that

Researcher: So it makes it difficult, hard. Maybe they won’t listen?

Participant: Ja ja but at least I think that burden is off my shouldersI think I try

Researcher: So would you do that now if you saw it.

Participant: Ja I would do that now.

Researcher: With your girlfriend

Participant: No I don’t do it anymore. I would rather ignore her instead of .going there. ‘Cos when everytime when you talk you know and then if she’s angry and I’m angry I end up wanting to win the situation

Researcher: Yes

Participant: I’d just be like that....Sooner or later one of us will have to realize that problem. Ja

Researcher: You said before that violence was the way you normally used to solved your problem. With your girlfriend

Participant: Yes even my little brother, my sister my friend practically with anyone. As long as there is anyone who is interfering everyone who giving me problem I always thought that beating them up Show them they must stop interfering in my life Be afraid of me and stuff like that

Researcher: So it wouldn’t matter if they were male or female?

Participant: No, I would still do it. Cos that way I thought it was some sort of demanding respect to that person. Like I was demanding respect.

Researcher: You thought they were not hearing you so you had right

Participant: Ja

Researcher: But its changed now since you started the programme

Participant: Yes it's changed. Slowly but surely.its changed

Researcher: It must be hard to change if you have always done that

Participant: It's very hard ja. That's what I am saying slowly but surely. That's why I'm saying I end up just moving away from that situation before I end up by creating issues

Researcher: It sounds as if the programme has had a lot of influence on your life. Its not finished you still have few weeks to go.

Participant: 3 to 4 weeks, 2 weeks something like that

Researcher: It sounds as if it has affected you life. Benefitted your life. Do you think it could have an effect on others (aeroplane overhead) in Alex?

Participant: Sorry?

Researcher: Do you think it will affect others families, communities in Alex

Participant: If people coming to the workshop take it outside then it will effect in a good way. Personally with me as I said before, everytime I come from the workshop, if I find my homeboy there I always tell them hey gents you know HIV is something that you can make it go down like circumcision lowers chances of you getting STI's Everyday when I come from the workshop everyone that I meet I know if we can have that 2 minute talk. I always tell them gents hey when you beat up girl its not right. Why don't you just ignore her so I think if everyone would take on that word of mouth to me it would change it would slowly change?

Researcher: It sounds as if you are changing things. You are trying to change things

Participant: Ja personally in my life

Researcher: Has there been any difference in your family?

Participant: Yes there is especially with my mother

Researcher: Ja ? (smiles)

Participant: Ja you laugh (laughs) because everytime I'm a person I like chilling out with my boys and stuff like that. So I come back late. . So now when that happens she just resorts to sleeping and then she wakes up in the morning then she comes to me and asks me where were you last night ?. Why didn't you call me to tell me that you gonna come back late. At first she shouted at me, ended up throwing things at me you know 'cos she was too angry. Now I tell her whenever I come back. I used to tell her the key to

everything is communication. Sometimes I'd even write notes about important things and then would show her you seen this is what we learn. This is what we must do as a family So I see that slowly and surely. Even with my little brother. Now the funny part aish if he wants to take my things, he will ask me big brother can I just take your cap for the day when I bring it back will wash it. Is it alright? If I am ok with that I tell him ja its ok. I'm fine. With my family even this morning we were sitting there and laughing which I never did with them. I never thought I like things to happen my way. Now I have realized that as I said as I said before that it is not always about me. I must always try to understand what other people are saying, what other people are feeling, what other people are seeing
 Researcher: Yes it sounds as if your communication is better. Your relationships are better. You are communicating and realizing that maybe better to talk?

Participant: Ja

Researcher: And because you are talking you can understand each other better.

Participant: Ja understand each other Understand the problem better

Researcher: Have any of them said anything to you about changing?

Participant: My mother. She always saying it. She says ay you whatever you eating its not good. Now she said that I am too soft.

Researcher: You've changed?

Participant: Ja me and my mother normally never we had a civilized conversation. Normally we greet each other me and she asked what did you do today and then I tell her none of your business and then I walk out. Then I come back and then she said you think I am your bitch. You know how mothers are.

Researcher: Mmm

Participant: I just look at her. And then I end up going out of the house and coming back tomorrow morning. When she goes out to work after I left last night. Even though we create another conflict

Researcher: And now?

Participant: But now everytime when I do something or go somewhere I tell her I'm gonna go now. Stuff like that

Researcher: It doesn't sound as if it has just been with GBV that you've become more aware. It's about your relationships and communication and resolving conflict as well as HIV. It sounds as if it has had a huge impact

Participant: Yes it has hey. Even now the people like facilitators. They are even recommending now when something comes up they say ay M... do that do this. They now realized that I have had that piece of knowledge that I've put it upon myself that that's what I wanna gain for myself. This is what I wanna know from my side

Researcher: You say that you also been able to tell people when you come back from the workshops

Participant: Yes I always refer to somebody. I even tell them in the organization if they are free. Hey gents come to 3 Square at 10 o' clock. Come this is what we talk about then I can just summarise everything you know in 5 minutes bla bla bla

Researcher: If there was anything that they could change about the programme. How could it be improved or is it ok as it is?

Participant: Well I think everything is ok. Maybe if they could change like the level of professionalism it would be better

Researcher: What do you mean by that?

Participant: In terms of telling, how can I put this? People who know the story if talking about HIV/AIDS someone who is working at an organization that's well developed would comes and then just for that day give us a session.

Researcher: How do you mean?

Participant: Give us a session someone out there. Something like that. They always tell us but I think they don't always go deep deep. Cos we always end up on the shallow end don't go to the deep end.

Researcher: So you would like more information and with more information, maybe deeper richer. More detailed. Maybe you feel as if they touch on topics too

Participant1: Ja they too shallow, too brief

Researcher: Too brief

Participant: Ja so I think if like there was someone who knew the story that we are talking about. Like with the guy talking on that day we were talking about circumcision. There was something they brought from Orange Farm. He told us everything, the benefits, all

types of circumcision. Even now people I ask someone in my neighbourhood not circumcised hey this and this and this like can get to them easily. You know a person partially circumcised this and this and this. A person who is fully circumcised this and this. So I think that if they were to do with every topic there will be more understanding and a deeper level of understanding

Researcher: So you are saying a representative, someone who works at organisation with GBV to come in and cover it more in detail

Participant: In detail ja

Researcher: That chap from Helen Joseph who spoke about circumcision. He seems to have made a big impression. It sounded as if it was a very rich experience. People learnt a lot from that

Participant: Yes. People like for me I also like to have open mind about circumcision. In African tribe the Zulu people. They maybe how can I say this 10 years back they never believe in circumcision. At one point I think you know about this highest rate of HIV/AIDS. After people went there and then they explained to them. Now it's the no.1 province in circumcision. And I never knew so I think stuff like that really opens eyes.

Researcher: Ja

Participant: 'Cos then if they can do it surely Johannesburg can do it.

Researcher: Because for example, it's easier to access in Alex than in rural areas? But there is nothing else?

Participant1: Everything is on point. The Facilitator, Exercises, activities

Researcher: The topics?

Participant: When it comes to dealing with the topics, explaining the topics I think there should be some kind of twist to that

Researcher: Ok, you'd like to see more?

Participant: Ja and hear more, know more (laughs)

Researcher: Maybe something that can be noted to improve the programme. Part of this research is how can it help people. To bring more change. There may be others who may agree with you who might say we need more indepth, deeper

Participant: Ja under the surface to the point

Researcher: How do you think in the future how will it affect you?

Participant: For me personally well I think not that I am trying to be big headed. I think for me there is light at the end of the tunnel. There is light. SHINING light at the end of the tunnel

Researcher: What do you mean by that?

Participant: At the current moment I've realized that everything that you want and need in life you must sit back and wait for it come to you, you must always go and get it. On your own not relying on other people or your parents or your friends. I think that things don't just come easily you have to work hard for them. Cos then I think if I can always have this mentality that I have now, then I don't think anything can go wrong.

Researcher: What's that mentality? How would you describe it?

Participant: As I said before to be broad minded or open minded. Ja. I think that's the key. When you broad minded if someone comes to see you and criticize you. I think if you're open minded you can see it as a step ladder. Normally people when you come to them and challenge them hey you you you. They will almost feel like that this guy and almost pull back. When someone comes to me and says I think I am better. I think that that that. I am this person has realized that me I'm making a move. Why don't I push stronger with them. Ja so I think to be broad minded and open minded in your life people can go far. Not to always think in the box.

Researcher: Ja ja. It sounds as if because of doing this programme it has helped you to think out of the box.

Participant: Ja it has

Researcher: You've enjoyed it. Empowering.

Participant: Ja very refreshing.

Researcher: Sounds as if you are empowered by it, more confident, more sure of yourself

Participant: I am

Researcher: Is there anything else? Yes you said more professionalism. More people to talk you said. Anything else? If there is nothing else.

Participant: Everything is on point. Just if they can bring more depth in topics. Now we understand about GBV but if it had to come from another angle I don't know how to tackle it. I don't know can I say this. If I get involved with an older person I don't know how to deal with that. Those sort of things. But then if it went deep I'd always know that

with this and this there's a solution like this, there's a place where I can go to where they can help me can deal with this

Researcher: You said earlier that if you are younger it's not so easy to approach an older person?

Participant: They always think that you don't know you are younger.

Researcher: You would also like to see ways of coping with that situation. Because if you see a situation you would know what to do. Not only having the information but practical things where to go. If you could help a community member,

Participant: How to help that person ja. If there was a man abusing children or wife. If I cant go to that man I can go to a particular organisation and ask them to could go to the man, get older person and that person can go to that man's house and try and sit down with him. Or and make an appointment with that man.

Researcher: Sounds as if helpful suggestion to you and to others. ADAPT do domestic violence issues. I don't know where their offices are?

Participant: There's one in M Clinic and one in OR Thambo

Reseracher: Ok. Is there anything you would like to add? Some questions that we spoke about have come in another way. We have spoken about that indirectly. It seems as if you are really pleased you did it.

Participant: I really am. I have created more networks. .Now if I know someone who wants to be circumcised this man I don't know if I should call him. Arrange transportation. There's this man I've made change in that person. That's more than enough for me.

Researcher: Ja sounds as if empowering as now you feel as if you can reach out. You have more authority. As you know more so you feel empowered. You know more you can tell people of your own age so easier than telling older person.

Participant: With people my age, I always try. Even though if they don't listen One day one way they'll remember that this guy said to me this and this and this even if I am not there

Researcher: Ja

Participant: Even if I am not there, I can bring change that's enough for me

Researcher: Anything else? Anything else to add?

Participant: I think everything is covered. Maybe all I can say is if they can bring like I don't know how to put this. Maybe they can extend it but if like to tackle it but from a different angle. Like what we do now in our organisation. Yesterday or today today starting 16 days against. Ja like what we did in our organization we sorta like took it along with hip hop session and now. People are gonna inform them about 16 days of activism but at same time the gonna enjoy themselves. People came at first but they also felt but now realized that it was too dull but if they tackle it from a different angle maybe if we had to go out to the youth, maybe if we had to spice it up a bit

Researcher: Ja people would receive it better

Participant: I think that's what we need now. We have had too much awareness. People are not listening. If we had to bring like all these issues that are affecting us like in a different way. Like when I say GBV. Bring people who are famous people if they had to come and then gooi something something. People would receive it better. Whereas I'm there but then I'm there to tell them about GBV. They wouldn't listen to me. They had to receive it better. If a well known soccer player had to come, people would actually listen to you. With me I know personally if someone had to come and tell me out of the blue I would think Ag who are you to tell me? But if someone from TV had to come and tell me I would remember this and this and this. Firstly I would tell people person from TV said this and this and this and in that way it sorta like remained in me.

Researcher: So people listen more so the message comes across better?

Participant: Yes, it will come across better and they will receive it better. I think that's what we need now.

Researcher: Maybe ADAPT could do invite well known figures to come, role models, people perhaps have suffered from things?

Participant: Ja maybe someone experienced affected with HIV/AIDS. Something like that. Just to gooi a few lines that's already enough. Had these awareness. People rally around with banners, hand out condoms. People still don't listen. It's more than enough. Here we are with this person. People don't listen. They hand out condoms. People are filling them with water and throwing them at each other. I think that's what we need (Laughs)

Researcher: Possibly a suggestion for the programme?

Participant: Ja I think that's what we need. Cos I always tell them in our organization that if you are a youth, you are not gonna come here and listen and then that's person points at billboard all the time. Ok they can point there.

Researcher: Yes?

Participant: We need something that will make us listen

Researcher: Yet for you this programme hasn't been like that. Even if facilitators stand at front it's been ok.

Participant: Ja you know with this one. 'Cos with these people I've had one on one conversation, I receive them better before. I knew them before (Meaning facilitators) so regularly talking, exchanging words. So I think it was easier for me to listen to them whereas if I met someone today. Like you for instance if I don't think I would be this open with you if this is our first day talking. But now that's when I'm kinda feeling free to talk with you more.

Researcher: Ja to talk more. Do you think it could be something to put in this programme Hip hop in this programme?

Participant; I think it can. Even its not hip hop or drama. A well known figure that's something. When you watch tv you always hear when they say yes, so and so with single mother, so and so grew up being abused. But then you never see them those people coming to the community to come and tell us.

Interruption from other players (pause)

Researcher: So we've spoken about lot of things. I thank you very much for your time and for meeting me and taking part in this. The suggestions that you made and everything we have spoken about can help with this research. I am very appreciative. Thank you.

Participant: Ja, I also think I gained something. Ja!

