“Creating a Generation of Equality”: A Stakeholder’s Perspective on Power Dynamics and Gender-Based Violence in Zimbabwe

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Abstract

Background: Gender-based violence (GBV) remains a significant public health concern in Zimbabwe, with 38% of women experiencing intimate partner violence. Rooted in the country's patriarchal structure, power imbalances contribute to this epidemic. This study aimed to investigate the perspectives of key stakeholders on the relationship between power dynamics and GBV in Zimbabwe, and as well as to explore potential interventions to address this issue.

Methodology: A descriptive qualitative research design was used. We collected data from fourteen participants using three focus group discussions. Qualitative content analysis was used to analyze the data.

Results: Three themes that emerged on power dynamics and GBV were economic inequality, gender stereotypes, and lack of access to justice. Two themes that emerged for recommendations were gender-transformative and economic empowerment programming.

Conclusion: Findings from this study underscore the need to include men in designing and implementing gender-transformative programs alongside economic empowerment initiatives to effectively address GBV and dismantle patriarchal structures in Zimbabwe.

Keywords: Gender-based violence, power dynamics, Zimbabwe, recommendations

1. Introduction

Gender-based violence (GBV) is any form of violence against a person, whether male or female, based on the person’s gender (Akudolu et al., 2023). GBV can be in the form of physical, sexual, socio-economic, verbal, or psychological violence. It also includes threats of such acts, use of force to compel someone into doing things contrary to his/her will, deprivation of rights, economic, and social benefits, whether privately or publicly (Richters, 1994). Although GBV can be against men or women, women and girls are more vulnerable. It is estimated that one-third of women experience physical and/or sexual violence from their intimate partners in their lifetime (WHO, 2021). It can have a devastating impact on survivors, both physically and emotionally. Survivors of GBV may experience physical injuries, post-traumatic stress disorder, anxiety, depression, and other mental health problems. They may also have difficulties in their relationships at work, and in their communities (WHO, 2021). GBV is a serious problem in Zimbabwe. According to a 2017 study by the United Nations Population Fund, 38% of women in Zimbabwe have experienced physical or sexual violence at the hands of an intimate partner, and this is one of the highest rates of GBV in the world (Iman’ishimwe Mukamana et al., 2020).

There are several factors that contribute to GBV in Zimbabwe. Gender inequality has been shown to be a major factor contributing to GBV in the country (Magezi & Manzanga, 2019). Zimbabwe is a patriarchal society, where men are traditionally seen as the heads of households and have more power and authority than women. This gender inequality can create a context in which GBV is more likely to occur (Fidan & Bui, 2016). Zimbabwe has experienced several economic challenges in recent years, including high unemployment, inflation, and poverty. These economic hardships can put a strain on relationships and make women more vulnerable to GBV (Mashiri,
Some cultural norms in Zimbabwe condone or even encourage GBV (Chirongoma & Zvingowanisei, 2022). For example, the belief that men have the right to control their wives’ behavior can lead to physical and emotional abuse. Lack of education and awareness of GBV has also been shown to contribute to the high rate of GBV in the country (Ogunyemi, 2023). Many people in Zimbabwe lack education about GBV and its harmful effects. This lack of education can make it difficult for women to recognize GBV and seek help (Fidan & Bui, 2016).

Power dynamics in the context of GBV refer to the unequal distribution of power between men and women that can lead to violence (Dahal, et al., 2022). The relationship between power dynamics and GBV in Zimbabwe is complex and multifaceted. However, there are some clear patterns that emerge from research and data. Men hold more power than women in the Zimbabwean society. This is evident in several ways. For instance, men are more likely to be educated and employed than women (Lasong, et al., 2020), men are more likely to hold positions of power in government, business, and other institutions (Jena, et al., 2023). Moreover, men are more likely to be seen as the head of the household and to have decision-making power over family matters (Maviza & Carrasco, 2023). This imbalance of power gives men a sense of entitlement over women and girls. It also makes it more difficult for women to challenge violence or to seek help. As a result, GBV is often seen as a normal part of life for women in Zimbabwe (Mashiri, 2013). This study aimed to investigate the perspectives of key stakeholders on the relationship between power dynamics and GBV in Zimbabwe. It also aimed to explore potential interventions to guide programming aimed at addressing this issue.

2. Materials and Methods

2.1 Study Design

A descriptive qualitative research design was utilized for this study. This design was relevant because it uses methods appropriate for studying other qualitative research designs.

2.2 Theoretical Framework

Feminist theory, a broad field of study that examines the role of women in society, among other things (Ferguson, 2017), was employed to understand how power dynamics and GBV intersect and to explore interventions to address this issue. Feminist theory does not believe in dualistic thinking that tries to divide a complex world into two dichotomous, opposing variables like male and female. According to the theory, dualistic thinking creates hierarchies that lead to the domination of one group over another. This process naturalizes existing power structures and makes them more difficult to change (Ferguson, 2017).

2.3 Setting

The three focus group discussions were conducted online using the Zoom platform. The selected time for the FGDs (Focus Group Discussions) was agreed upon by all the participants. All the selected participants were involved in GBV issues in Zimbabwe.

2.4 Participant Selection, Sampling, and Sample Size

Participants were enrolled using purposive sampling. Participants were approached via email or telephone and invited to participate in the study. A total of 15 stakeholders were invited to participate in the study. Fourteen participants took part in the study. Of the 15 invited participants, one failed to attend (Session 2) and dropped out due to competing priorities. In this study, key stakeholders included government officials, community leaders, survivors of GBV, and Civil society organizations (CSOs). Government officials play a role in changing laws and policies that perpetuate gender inequality and GBV. Community leaders help to raise awareness of GBV and to challenge harmful attitudes and beliefs about gender roles. Survivors share their experiences and help to break the silence around GBV. CSOs play a critical role in the response to GBV in Zimbabwe. They provide a range of services to survivors of GBV, including health care, psychosocial support, legal aid, refuge, and community mobilization.

2.5 Research Team and Reflexivity

(i) Researchers’ personal characteristics: The first (male) and second (female) authors moderated the focus group discussions. At the time of the study, both were Social Work degree students conducting research under the supervision of a terminal degree holder. At the time of the research, both held certificates of registration as social workers, along with the Zimbabwe Council of Social Workers with valid practicing certificates. The researchers were trained in qualitative research methods as part of their university degree studies and on-the-job research capacity development at their workplace.

(ii) Researchers’ relationship with participants: The researchers were known to some of the participants in this study. As fellow social workers and program cadres working in the GBV space in Zimbabwe, the familiarity was
due to previous encounters at workshops and stakeholder meetings. A few of the participants were encountering
the researchers for the first time. However, a relationship was established with these participants one day prior to
the scheduled focus group discussion. This preliminary meeting was conducted online and aimed to introduce the
researcher to the participants and explain the research objectives.

2.6 Data Collection

(i) Informed consent
Participation was voluntary. Participants received the consent form via email prior to the FGD. Researchers
ensured that the potential participant fully understood what s/he was consenting to by following up with a phone
call to explain the content of the consent form and clarify any questions they might have had on the study. Briefly,
the informed consent form introduced the study and the researchers and identified the purpose of the study and the
length of the FGD. Participants were informed of their right to (a) decline to participate in the study; (b) decline
to answer any questions asked in the FGD; and (c) stop participation in the FGD at any time without incurring any
penalties. All participants provided written informed consent prior to participating in FGDs.

(ii) Interview guide
The interview guide was developed by the researchers by consulting a GBV research and programs expert.
Questions included, “In your view, what is the relationship between power dynamics and GBV?”, “In your
experience, what have been some of the main contributors to the male-dominated power dynamics underpinning
GBV in Zimbabwe?”, “What are your recommendations for anti-GBV programming that can directly address the
contributors discussed today?”.

(iii) Focus group discussions
Qualitative data was collected through a primary data collection process through FGDs with stakeholders. Data
was the audio recording of the group recorded digitally on the Zoom platform. Each FGD was conducted until data
saturation was reached. This was defined as a point where no new information was generated from the discussions.
FGD duration ranged between 60 and 90 minutes. Transcripts were returned to participants for comments and/or
corrections.

2.7 Data Analysis
FGD transcripts were uploaded and managed in NVivo 12 (QSR International Pty Ltd., 2020). The analysis began
with a conceptual content analysis, which involved identifying the research question and choosing a sample text
for analysis. Next, the text was coded into manageable content categories through selective reduction (Vaismoradi
& Snelgrove, 2019). This allowed the researchers to focus on specific words or patterns that informed their research
question.

The second step of the analysis was relational content analysis, which explored the relationships between concepts.
Similar codes were then put together to form categories. Themes were then developed by interpreting categories
for their underlying meaning. In other words, the themes were the expressions of the underlying meaning of the
textual data (Vaismoradi & Snelgrove, 2019). The first and second authors coded the data and resolved any
discrepancies through discussion with the senior author. The findings were returned to participants for comments
and/or corrections.

3. Results

3.1 Characteristics of Study Participants
Three FGDs were conducted. Among the participants were eight females and six males. Seven of the participants
were from CSOs, two were social workers, and one each was a GBV program officer at a UN agency, a member
of parliament, a community leader, a GBV survivor, and an officer at the Ministry of Women Affairs, Gender, and
Community Development. More details are presented in Table 1.
Table 1. Characteristics of study participants.

<table>
<thead>
<tr>
<th>Session 1</th>
<th>Title/ Role</th>
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<tr>
<td>Session 1</td>
<td>Title/ Role</td>
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<tr>
<td>1 (Female)</td>
<td>Director, Regional CSO</td>
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<tr>
<td>2 (Female)</td>
<td>GBV Programs Officer, UN agency</td>
</tr>
<tr>
<td>3 (Female)</td>
<td>Founder, Local CSO</td>
</tr>
<tr>
<td>4 (Male)</td>
<td>Officer at Ministry of Women Affairs, Gender, and Community Development</td>
</tr>
<tr>
<td>5 (Male)</td>
<td>Programs Officer, Padare/Enkundleni/Men’s Forum on Gender</td>
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<tr>
<th>Session 2</th>
<th>Title/ Role</th>
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<tr>
<td>1 (Female)</td>
<td>Member of Parliament; Parliamentary Portfolio Committee on Women’s Affairs</td>
</tr>
<tr>
<td>2 (Male)</td>
<td>Social Worker/ Field Officer</td>
</tr>
<tr>
<td>3 (Female)</td>
<td>GBV Programs Specialist, Local CSO</td>
</tr>
<tr>
<td>4 (Female)</td>
<td>GBV survivor and Founder of a feminist organization</td>
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<th>Session 3</th>
<th>Title/ Role</th>
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<tbody>
<tr>
<td>1 (Male)</td>
<td>Deputy Director, Local CSO</td>
</tr>
<tr>
<td>2 (Male)</td>
<td>GBV Programs Team Lead, Local CSO</td>
</tr>
<tr>
<td>3 (Female)</td>
<td>Social Worker/ Field Officer</td>
</tr>
<tr>
<td>4 (Male)</td>
<td>Community leader</td>
</tr>
<tr>
<td>5 (Female)</td>
<td>Gender Activist, Local CSO</td>
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Power dynamics and its intersection with GBV in Zimbabwe

Three themes emerged on how power dynamics contribute to GBV in Zimbabwe.

(i) Economic Inequality

Stakeholders reflected that women in Zimbabwe are more likely to be poor than men. According to the stakeholders, this economic inequality can make women more vulnerable to violence, as they may be dependent on their partners for financial support.

“Economic inequality is a major driver of gender-based violence. When women are economically dependent on men, they are more vulnerable to abuse. They may be afraid to leave their partners or speak out against the violence, because they fear losing their financial support.” FGD 1 Participant

(ii) Gender Stereotypes

Stakeholders also highlighted how the Zimbabwean society often upholds traditional gender stereotypes that can contribute to GBV. Stakeholders perceive these gender stereotypes as precursors for GBV. Two main stereotypes emerged from the data. Firstly, stakeholders perceive that the stereotype portraying women as weak and subordinate to men can contribute to the acceptability of violence against women by men. Another stereotype is that women are responsible for taking care of the home and family, which can make it more difficult for them to leave their abusers or to seek help.

“Gender stereotypes that portray men as strong and women as weak create a power imbalance that can lead to violence. When men are seen as having more power, they are more likely to feel entitled to control women’s bodies and behavior.” FGD 1 Participant

(iii) Lack of Access to Justice

Stakeholders perceive that unequal distribution of power can lead to a lack of access to justice. Stakeholders highlighted how when women are in a position of less power, they may be less likely to be believed or taken seriously when they report GBV. They may also be less likely to have the resources they need to navigate the legal system.

Two interesting sub-themes also emerged from the data. The first sub-theme was the normalization of GBV. Stakeholders perceive that power dynamics can contribute to the normalization of GBV. When men are seen as
having more power than women, GBV may be viewed as a means for men to assert their dominance or control. This can make it more difficult to challenge GBV and to hold perpetrators accountable. The second sub-theme was victim blaming. Stakeholders perceive that power dynamics can lead to the victim-blaming survivors of GBV. When women are seen as being in a position of less power, they may be blamed for the violence they experience. This can make it even more difficult for survivors to come forward and seek help.

“... are the necessary justice procedures being followed? For example, you might realize that most perpetrators are let out on bail, and after that, the case is not being pursued at all. So, it paints a picture to the community that GBV victims are not being taken seriously. The justice system also acts as a barrier to reporting such cases” FGD 2 Participant

Recommendations for anti-GBV programming

Two themes emerged for recommendations for anti-GBV programming to address power dynamics and its impact on GBV in Zimbabwe.

(i) Gender-Transformative Programming

Stakeholders perceive that gender-transformative programming (GTP), a type of programming that seeks to challenge the unequal power dynamics between men and women could be strengthened to better combat GBV in Zimbabwe. Three sub-themes emerged centered around challenging gender stereotypes, promoting gender equality, and changing social norms.

Stakeholders perceive that GTP can help to challenge the stereotypes that justify violence against women. Stakeholders gave an example that one of the most oppressive stereotypes that needed to be challenged was that men are naturally aggressive and that women are naturally passive. Regarding promoting gender equality, stakeholders perceive that GTP can help to promote gender equality by ensuring that women have equal rights and opportunities in all aspects of life. This can include things like providing women with access to education and employment and ensuring that they have a voice in decision-making. Stakeholders also perceived that GTP programs raise awareness and challenge the beliefs that justify violence against women and thus can help to change the social norms that support GBV.

“We are talking about creating a generation of equality here. We ought to use an approach called gender transformative approach which can be called gender norms transformation. What this approach does is it’s a working model, it is worth investing in and all the negative things that have been mentioned above can be reversed and there is empirical evidence that it can be reversed if this GTA is put in place and systematically applied. So, it strives to examine questions and change rigid gender norms and power imbalances towards achieving the inequalities between male and female eventually or all human beings.” FGD 1 Participant

“A program that raises awareness of GBV and challenges the beliefs that justify violence against women can help to change social norms. This can make it more difficult for perpetrators to get away with violence and can make it easier for survivors to get help. And, if such a program supports women’s leadership, then it can help to empower women and give them a voice in decision-making. This can help to challenge the patriarchal power structures that contribute to GBV.” FGD 2 Participant

(ii) Economic Empowerment Programming.

Stakeholders perceive that economic empowerment programming could be used to transform the unequal power dynamics between men and women and ultimately reduce gender-based violence against women. Economic empowerment programming seeks to give women the skills and resources they need to be economically independent. This can help to reduce women’s vulnerability to GBV, as they will be less dependent on men. Stakeholders perceive that empowering women by giving them the skills and knowledge they need to challenge the status quo such as skills training and helping them to develop their leadership abilities was important to create a more just and equitable society for all.

“A program that provides education and skills training to women can help them to become more financially independent. This can give them more power to leave abusive relationships or to seek help.” FGD 3 Participant.

Discussion

This study revealed that women are more likely to be poor, making them vulnerable to violence perpetrated by men. The poor economic status of women is prevalent in Africa (Manda & Mwakudo, 2014). This has been attributed to low educational attainment among women as a result of most African societies giving priority to educating males and boys. Fifty-five percent of children who did not complete upper secondary education in Zimbabwe in 2021 were females (Ministry of Primary and Secondary Education, 2021). Without tertiary education,
women are more likely to hold lower-paying positions or hold no work at all, making them dependent on their male partners for financial support. Due to a lack of tertiary education, the majority of women in Zimbabwe, like in most African countries, work in the informal sector or on tiny plots of land, providing care for others for little to no remuneration. Women also have less access than males to markets for their produce, credit, land, agricultural inputs, equipment, and extension services (Manda & Mwakudo, 2014). Some studies have revealed conflicting results on the association between a woman’s income and the risk of intimate partner violence (IPV) (Abramsky et al., 2011) (Abramsky et al., 2019). A higher income for women may result in fewer arguments over the male partner’s inability to provide for the family, which can lead to an improvement in the dynamics of their relationships. Furthermore, women who have a high income are highly likely to dissolve the relationship if there is GBV compared to those who have a low income or are unemployed since they can look after themselves (Farmer & Tiefenthaler, 1997). According to a study conducted in Tanzania, women who contributed more financially than their partners were at a higher risk of IPV, possibly because of the tensions over men’s inability to provide (Abramsky et al., 2019). It is therefore important that interventions aimed at empowering women should also consider men’s livelihood, male gender roles, and masculinity norms that drive GBV.

This study revealed that gender stereotypes contribute to GBV. GBV that women experience is made worse by the gender roles that are imposed by systems and practices that are dominated by men (Ferguson, 2018). Men are idealized as people with skills, positions, power, and influence in some communities. Men are therefore expected to provide for their families and defend them. To gain their respect and obedience, some males may discipline women using GBV (Dahal et al., 2022). Men who hold traditional and inflexible ideas on gender norms, attitudes, and behaviors are more likely to assault women (Heise, 1998). The social acceptance of men’s authority over women, which is a manifestation of the unequal gender-power relationships, occurs on many levels and contributes to a variety of inequities and acts of violence (Krug et al., 2002). Patriarchal norms limit women’s opportunities, causing more obvious and pronounced inequities, which in turn cause greater GBV. These patriarchal traditions also prevent women from participating in key decisions that have a direct impact on their lives. They risk experiencing GBV when they attempt to defy these standards because the male partner may see their actions as disobedience (Ridgeway, 2009).

This study revealed that lack of access to justice is associated with GBV. Because some women believe that they are unlikely to be believed if they report GBV, they may end up not reporting the perpetrators to law enforcement agents. The problem is exacerbated by cultural perceptions that GBV is a private matter that should only be discussed within the family (Garcia-Moreno et al., 2005). The fear of ending relationships, the fear of defying social norms that forbid women from speaking out against men, the threat of increased violence, and a lack of financial resources to support a legal case that may drag on for a long time are additional factors that may contribute to women not reporting GBV (Palermo et al., 2014).

This study revealed that strengthening gender-transformative programming may help reduce GBV. Gender-transformative programming involves engaging men and boys to critically reflect, challenge, and change gender attitudes and behaviors that promote gender inequality (Brush & Miller, 2019). Gender-equitable attitudes, behaviors, and community structures that promote both men and women in full community participation are the objectives of gender transformational and empowering programs. Several studies have revealed the effectiveness of gender-transformative programming in supporting changes in attitudes and behaviors among men (Barker et al., 2007; Dworkin et al., 2015). However, in order to initiate these programs, men should be willing to participate. It is, therefore, important that men are convinced that GBV is an issue that is worth discussing. Men may need to be reached through their personal relationships and community role models may need to be mobilized in order to recruit them into gender-transformative programming. Men’s local ideas and experiences with GBV should be taken into consideration when creating and implementing gender-transformative programs in order for them to be effective (Dworkin et al., 2015). The other recommendation revealed in this study is economic empowerment programming. Women may be able to earn an income and accumulate savings through economic empowerment initiatives like group savings and microcredit programs. These programs for economic empowerment should be carried out alongside broader initiatives aimed at altering men’s perceptions of gender inequality. This is crucial since, as women grow more financially independent, they may begin to question gender norms in the home, which could lead to an increase in IPV (Kim et al., 2009).

This study had a number of advantages. The fact that the researchers employed FGDs to quickly gather the opinions of numerous people is one of their strengths. Another strength is that because they were responding to what others had said, the participants were able to express their ideas more thoroughly. Additionally, all of the participants in this study were experts on GBV. This study also had some limitations. Some participants may have felt uneasy in a group environment and may not have been able to express their ideas honestly. Another drawback is that the
FGDs’ design may have fostered a group culture that might have discouraged diverse viewpoints. This study had several limitations, common to other qualitative studies. First, the small sample size limits the generalizability of the findings. Second, the sample was selected based on expertise or experience, which may introduce selection bias. Third, key informants may have volunteered to participate due to a particular interest in the topic, which could also introduce self-selection bias. Fourth, interviewers may have influenced the responses of key informants through leading questions or their own perceptions of the study topic. Fifth, social desirability bias may have led key informants to give responses that they believed were socially desirable, rather than their true opinions or experiences. Finally, the lack of triangulation limits the reliability of the findings.

5. Conclusion
It is estimated that 38% of women in Zimbabwe have experienced physical or sexual violence at the hands of an intimate partner. Gender inequality has been shown to be a major factor contributing to GBV in the country. Some cultural norms in Zimbabwe condone or even encourage GBV. In addition, many people in Zimbabwe lack education about GBV and its harmful effects. This lack of education can make it difficult for women to recognize GBV and seek help. This study revealed three themes on how power dynamics contribute to GBV in Zimbabwe. The themes are economic inequality, gender stereotypes, and lack of access to justice. Two themes that emerged for recommendations for anti-GBV programming to address power dynamics and its impact on GBV in Zimbabwe were gender-transformative programming and economic empowerment programming. However, for these recommendations to be successful, there should be involvement of men in the design and implementation of the programs.

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Miriam Mutevere - Conceptualization; Writing Original Draft (Equal)
Stephen Nyoka - Writing Review and Editing
Dr Enos Moyo - Writing Review and Editing
Lorcadia Muzenda - Writing Review and Editing
Fortunate Kakumura - Writing Review and Editing
Dr Tafadzwa Dzinamarira - Supervision, Writing Review and Editing

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