

A Study on the Role of Men in Curbing the Scourge of Violence against Women and Children in KwaZulu-Natal: South Africa

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Abstract: In South Africa, the rates of sexual violence and rape are alarmingly high compared to other countries with similar populations and economies. In the 2022/2023 fiscal year, South Africa recorded 53,498 sexual offences. Therefore, approaches and interventions geared towards addressing Gender Based Violence need to correspond with the understanding of the pivotal role that men could play in dealing with this crisis. The main objective of this study was to explore the role of men in curbing the scourge of violence against women and children in KZN. The study used quantitative methods as well as qualitative methods. The results highlighted that men are not doing enough to curb GBV. Moreover, 40% of the respondents admitted to touching women inappropriately and passing sexist comments to women, whereas 25% indicated that they beat their partners if they were 'disobedient' or to prove their masculinity. Also, the findings depicted that the most prevalent type of abuse is physical abuse (65.8%) followed by the sexual exploitation of children (54.4%); emotional and psychological abuse (44.7%); abandonment and neglect (39.5%); and sexual violence (35.5%). Results paint a disturbing picture of South African gender relations and behove strong intervention from the authorities to stop this scourge.

Keywords: *Sexual Violence, Rape, Femicide, Covid-19, Unemployment, Masculinity*

1. Introduction

Gender-Based Violence (GBV) or, specifically, violence against women (VAW) is a global crisis with human rights and public health elements and has escalated to unprecedented levels in South Africa (Sanjel, 2013). It is pervasive and takes place in all societies and at all levels and stages of a woman's life cycle (Terry, 2007a, De Lange and Mitchell, 2014). This has given birth to campaigns like the 16 Days of Activism for No Violence Against Women and Children. GBV is a serious concern in South Africa and KwaZulu-Natal (KZN), in particular, has been cited as having one of the highest incidences of sexual violence (WHO, 2013). In his address at the *Presidential Summit on Gender-Based Violence and Femicide* on November 1, 2018, the South African president highlighted Gender-Based violence as a profound crisis fragmenting society at large. He further underscored its pervasive impact on every community nationwide, noting that it disrupts the lives of numerous families. The President, also, contended that Gender-Based violence violates the core of the nation's collective humanity (RSA, 2018). Between the years 2018 and 2020, the province of KwaZulu-Natal acknowledged the severity of this crisis and its heavy effects on the experiences and well-being of survivors, children, families, communities, and the wider community (Terry, 2007b).

Sexual violence in South Africa remains a national crisis as there were 42289 rape cases in 2020 and 36330 in 2020/21 (SAPS, 2021). Statistics for the period 1 July to 30 September 2021, indicated that 9 556 people were raped, whereas 11 315 were raped during the festive season (1 October and 31 December 2021) (SAPS, 2021). KZN recorded 8759 sexual offences and 7243 rape cases in 2021. Moreover, the extreme cases of femicide (the murder of women by men) have sparked outrage in the country as there were over 2930 femicide cases reported in 2017/18 (Commission for Gender Equality, 2018). Sexual violence, including rape, remains an enduring and gendered challenge within South African society, where women and children are disproportionately at risk. The circumstances surrounding incidents of sexual violence are diverse; perpetrators may be intimately connected to the victim, such as partners, family members, or individuals within the community, as well as strangers (Machisa et al., 2017). The prevalence of rape in South Africa far surpasses that of many other nations and may be rooted in the country's turbulent political and social history alongside entrenched structural and gender inequalities (HRC, 2016). Research has shown that rape happens more in social settings of poverty where a lack of job opportunities is pervasive (Jewkes et al., 2011). Also,

disturbingly, the risk of rape is heightened among individuals who experienced abuse as minors, those with dysfunctional family backgrounds and young women who consume drugs and alcohol (Morrison et al., 2007).

According to Caicedo-Roa et al. (2020), femicide is the murder of women and girls based on their gender identity. Femicide, or the murdering of women, is usually motivated by a lack of humanity, greed, and fear of the consequences (United Nations Office on Drugs and Crime, 2019). This is the most extreme kind of Gender-Based violence, in which males kill women with whom they previously had an intimate relationship. This is typically due to fear of the consequences; for example, after raping a woman, men may feel obligated to murder her to eliminate the evidence (Zara et al., 2019). Femicide is primarily caused by societal, sociological, and sometimes theological circumstances that give men power over women, leading men to assume that they have natural control over women (Hadi, 2017). The vast majority of reported femicide cases involve an intimate relationship. Unfortunately, femicide is more common in homes, family, and related contexts, where one would expect all women to be safe. It is no secret that South Africa has one of the highest rates of gendered violence in the world. The murder rate of women in South Africa is around five times the global norm, with at least half of those killed by an intimate partner (Boonzaier, 2023). Occasionally, the murder of a South African woman makes national and international headlines (e.g. the murder of the model Reeva Steenkamp by her intimate partner). Boonzaier (2023) asserted that the way these crimes are reported is critical in moulding public perception of crimes against women, gendered violence, and the sexist, misogynistic, and patriarchal conditions that give rise to them.

Gender-Based violence and femicide (GBVF) have long been significant issues in South Africa, with high rates documented even before the COVID-19 pandemic. However, the pandemic exacerbated existing vulnerabilities, resulting in a surge in GBVF incidents across the nation. Before the pandemic, South Africa already faced alarmingly high rates of GBVF, significantly surpassing global averages. The World Health Organization (WHO) estimates that 12.1 in every 100,000 women are victims of femicide in South Africa each year, which is five times the global average of 2.65 (Govender, 2023). Factors contributing to these high rates include entrenched patriarchal norms, economic disparities, and limited access to justice and support services.

2. Literature Review

The onset of Covid-19 pandemic proved disastrous for KZN, as the province recorded the highest number of GBV-related incidents and femicide cases. The presence of lockdowns where single families could be trapped in one place for longer periods meant that abuse was easily happening without recourse for victims. This is attributed to the fact that GBV prevention and responses were not declared as essential services by the state; therefore, facilities that care for victims of abuse were not operational during the lockdown (Roy et al., 2021). South African Lifeline reported that cases related to GBV increased by 500% starting from when the lockdown commenced in March 2019 (Metsing, 2020). A major contributing factor to such a drastic increase was high unemployment and the shifting of priorities by the government to COVID-19 responses, which led to GBV prevention and responses being deprived of state attention (Roy et al., 2021). Since people were restricted from recreational places, alcohol became the main source of entertainment during the COVID-19 lockdowns; this made it easier for people to abuse alcohol, which subsequently led to increased GBV-related incidents. Moreover, the Covid-19 pandemic had an adverse effect on businesses, and as a result, the unemployment rate also rose to an all-time high in 2020. South Africa's unemployment rate was at 33.9% in the Q2 of 2022 whereas, during the fourth quarter of 2021 it was at 35.3% (StatsSA, 2022).

Economic problems stemming from quarantine and unemployment further exacerbated tensions within households, leading to increased violence against women. Additionally, patriarchal social norms have perpetuated unequal power dynamics, limiting women's ability to seek help or escape abusive situations (Ostadtaghizadeh et al., 2023). The closure of essential services such as shelters and the lack of access to social support networks also contributed to the rise in GBV incidents. Women working in the informal sector face additional challenges, including reduced access to care and treatment facilities (Ndlovu et al., 2022). Moreover, the digital gap in e-learning and access to social networks hindered communication and support for vulnerable women. Efforts to address GBV during the pandemic were hampered by numerous factors, including the lack of transparent rules and registration systems for GBV cases, stigmatization of victims, and insufficient

government regulations. The absence of clear internal rules and registration systems led to a lack of knowledge about the actual number of GBV related incidents and hindered effective government responses.

Additionally, lockdown measures worsened the situation, with restrictions on movement and economic downturns confining many individuals with their abusers. The closure of schools and workplaces further limited opportunities for victims to seek help or escape abusive situations. The South African Police Service (SAPS) recorded 42,289 GBVF in the 2019/2020 fiscal year, reflecting an increase from 41,583 in 2018/2019, indicative of the overall rise in GBVF (SAPS, 2021). The strain on healthcare and social services during the pandemic also hindered access to support for survivors of GBVF, leading to a notable surge in incidents during the lockdown period (Perez-Vincent et al., 2020).

Numerous factors contributed to the increase in GBVF during the COVID-19 pandemic. Quarantine and social distancing measures intensified stress and isolation, particularly for women, amplifying the risk of violence within households. Economic problems stemming from quarantine and unemployment exacerbated tensions, leading to increased violence against women. Additionally, patriarchal social norms perpetuated unequal power dynamics, limiting women's ability to seek help or escape abusive situations. Efforts to address GBVF have been made through legislation such as the Domestic Violence Act and the implementation of the National Strategic Plan on GBVF. Specialized services for survivors, improved law enforcement responses, and awareness campaigns challenging harmful gender norms have been prioritized. Collaboration with civil society and the private sector further supports efforts to curb GBVF. COVID-19 exacerbated GBVF in South Africa, highlighting the need for comprehensive strategies to address the root causes of violence and create a safer and more equitable society for all South Africans. Efforts to address GBVF must continue both during and after the pandemic, focusing on holistic approaches that address the social, economic, and cultural factors contributing to Gender-Based violence.

The high unemployment rate in South Africa was one of the major driving forces of GBV as families were struggling to put food on the table which resulted in psychological challenges. It was not until the 13th of April 2020 that clarification was made and GBV organizations were permitted to operate, however, that was not an effective prevention strategy as GBV cases continued to increase (Roy *et al.*, 2021). According to the study conducted by Roy et al. (2021) in Uganda, Nigeria, Kenya, and South Africa showed that 99.3% of the respondents agreed that COVID-19 drastically increased the prevalence of GBV. The GBV prevention and response strategy starts with acknowledging that GBV is a pandemic on its own and therefore deserves the same response as COVID-19 (Mittal and Singh, 2020). Perrin et al. (2019) suggested that there should be an increase in community initiatives against GBV and that there is a need to create more awareness to discourage the fear of reporting cases of GBV even if it does not affect one directly. The government needs to assist the GBV support groups financially as they play a pivotal role in dealing with GBV (Van Gelder et al., 2020).

Violence against women and children (VAWC) in South Africa is extreme in terms of its prevalence and severity. The Minister of Police, Bheki Cele, reported that 10 006 people were raped between April and June 2021 and most of the perpetrators were not found (RSA, 2021). The true extent of rape and Gender-Based violence is significantly underestimated, as many survivors endure in silence. Barriers such as limited access to justice, disempowerment, intimidation, and fear of further trauma, scrutiny, and stigma within the criminal justice system often deter these victims from coming forward (Norman et al., 2010). Gender-Based violence is a well-documented matter that is frequently driven by men and boys, community members, and others who perpetuate harmful masculine norms within KwaZulu-Natal. Although there is an increasing understanding of the potential drawbacks of narrowly defining the scope of GBV as that of between men and women (Graaff, 2021) there is a realization that this is indeed a scourge worth fighting against. Eliminating GBV is a collective responsibility, requiring the entire community's engagement. Men and boys need to take on active roles as agents of change to dismantle the existing status quo. The inclusion of men and boys will provide perspective into psycho-social behaviors and patriarchal norms that lead to GBV. Moreover, GBV studies tend to focus more on the victims of abuse (women and children), and there are extremely limited studies focusing on a male's perspective in terms of their role in curbing the scourge of violence against women and children. Approaches and interventions geared towards addressing GBV should be married to understanding the pivotal role that men play or could potentially play in dealing with this crisis. Because of the nature of GBV generally, it is hard to research as it is often not seen in public and victims may not be in a position to speak about it due to fear

(Terry, 2007b). This article explores the role of men in curbing the scourge of violence against women and children in KZN, South Africa examines the factors that contribute to high GBV incidents in KZN and will conclude by recommending and proposing remedial measures in combating and responding to violence against women and children.

The United Nations Office of the High Commissioner for Human Rights Committee on the Elimination of Discrimination against Women (UN, 1993) defined GBV as the “violence that is directed against a woman because she is a woman or that affects women disproportionately.” This can involve various forms of abuse ranging from some that are mild in effect to some that are extreme. Scholars like Kapur (2020) and Terry (2007a) go at length to discuss what GBV is about and how it can be eliminated. In South Africa, all forms of GBV have been found with some very extreme, including femicide. Femicide is the most extreme form of GBV as it involves the murder of a woman by a man. It is usually linked to the entrenched gender inequality and discrimination against women from men who feel entitled and in performance of their masculinity end up killing women Prieto-Carrón et al. (2007). Authors like Hill and Diaz (2021) Stark (2015) and Graaff (2021) have looked at the issue of GBV and how it is carried out. Femicide has been rising in South Africa with some notable cases being widely reported in the media. However, reporting GBV has always been a hindrance to dealing with the scourge with worldwide reporting very low and reasons offered including embarrassment, belief that there is no use reporting, and belief that violence is part of life Palermo et al. (2014). This agrees with De Vries et al. (2014) study on adolescents’ beliefs about forced sex in KZN where they found that gender violence and related beliefs seem to be quite accepted by males and females. This is a problem that also extends to gender as men are less inclined to disclose violence even in their families. This may be due to gender norms that are inequitable from a very young age where men are told to uphold certain masculinities which engender negative attitudes and behaviors (Mills et al., 2015).

Numerous theoretical frameworks, such as Connell's theory of hegemonic masculinity and social learning theory, have been used to understand the link between masculinity and GBV. Connell's theory of hegemonic masculinity is one of the most widely used frameworks. It emphasizes the dominant social construction of masculinity, which promotes aggression, control, and dominance over women (Bozkurt et al., 2015). This theory highlights how men often use violence to establish and maintain their power within social hierarchies, contributing to the prevalence of GBV. Social learning theory underscores the role of socialization in shaping gender roles and behaviors (Varner et al., 2021). According to Varner et al. (2021), individuals learn and imitate behaviors deemed appropriate for their gender within their social environment. As a result, men exposed to violent and aggressive models of masculinity may be more likely to perpetrate violence against women.

The legacy of apartheid in South Africa continues to reverberate through contemporary society, shaping social dynamics and perpetuating deep-seated inequalities (Zinzombe, 2024). Apartheid's enduring impact is evident in the pervasive violence that plagues the nation, with South Africa ranking among the most violent countries globally (Norman et al., 2007; Enaifoghe et al., 2021). This violence is not merely a consequence of historical injustices but is intricately linked to the structural inequalities and cultural norms ingrained during the apartheid era (Zinzombe, 2024). Apartheid's institutionalized racism and violence entrenched patterns of exclusion and marginalization, particularly affecting non-white communities (Ndlovu, 2022). These communities continue to face disproportionate levels of poverty, limited access to resources, and systemic discrimination, perpetuating cycles of deprivation and social unrest.

One of the most profound legacies of apartheid is its influence on gender dynamics and the prevalence of Gender-Based violence and femicide (GBVF) (Ndawonde, 2023). Apartheid's policies not only enforced racial segregation but also disrupted traditional family structures and gender roles (Ndawonde, 2023). The emasculation of men in the face of societal shifts and economic disparities often led to the use of violence as a means of asserting power and control (Ndlovu, 2022). Women, meanwhile, faced heightened vulnerability to intimate partner violence, exacerbated by economic instability and social dislocation (Zinzombe, 2024). The normalization of violence within families and communities perpetuates cycles of abuse, contributing to the endemic nature of GBVF in South Africa. Transgenerational effects further compound the impact of apartheid on contemporary society (Gobodo-Madikizela, 2023). Economic disparities persist across generations, with non-white communities disproportionately affected by poverty and unemployment (Gobodo-Madikizela, 2023). The intergenerational transmission of trauma stemming from apartheid's gross human rights violations

has left deep psychological scars, manifesting in feelings of helplessness and despair (Crankshaw and Dwarika, 2023). Moreover, pervasive exposure to violence, both within households and communities, has desensitized individuals to its effects, fostering a culture of acceptance and tolerance towards violence (Gobodo-Madikizela, 2023).

Addressing the legacy of apartheid and its impact on GBVF requires a multifaceted approach that addresses both the structural and cultural dimensions of the problem (Ndlovu, 2022). Efforts to dismantle systemic inequalities, such as poverty alleviation programs and affirmative action policies, are crucial for addressing the root causes of violence (Ndlovu, 2022). Additionally, interventions aimed at challenging harmful gender norms and promoting gender equality are essential for preventing GBVF and fostering healthier relationships within communities (Ndawonde, 2023). Education and awareness-raising initiatives play a pivotal role in challenging the normalization of violence and empowering individuals to recognize and reject abusive behavior.

The data from the World Health Organisation shows that South Africa's femicide rate was 12.1 per 100,000 in 2016. This is almost five times higher than the global average of 2.6 per 100,000 (RSA, 2019). Studies on the causes of GBV are well documented with Abbey et al. (2004) and Abbey (2011) detailing some of the problems of intoxication and the abuse of substances as some of the causes. Also, the issue of gender and rurality in South Africa is documented in studies like those of De Lange and Mitchell (2014); stating that the situatedness of the women makes them vulnerable to abuse. Rape stands among the most severe forms of Gender-Based violence. South Africa, as Gouws (2021), contends, is considered a rape-prone society—characterized by high reported incidences of rape, the normalization of rape as a ritualized display of masculinity, or its use as a means for men to exert punishment or intimidation over women (Gouws, 2021: 02).

3. Methodology

Recruitment Strategy and Data Collection

Research participants were recruited from public facilities such as shopping malls, clinics, sports facilities, bus, and taxi ranks, etc. This study used a combination of qualitative and quantitative research approaches. A questionnaire and open-ended questions were used to determine the role of men in combating violence against women and children in KwaZulu-Natal. The research questionnaire comprised 15 questions addressing the demographics, male perspective on their role in addressing violence against women, type and causes of abuse. The qualitative aspect consisted of 9 probing open-ended questions unpacking the causes of GBV. Data were gathered from all 11 districts and 39 local municipalities in KwaZulu-Natal, South Africa. To assist with data collection, 150 data collectors were trained and deployed to various municipalities. On average it took approximately 20 minutes to complete the survey. Because of the nature of the study (GBV), minors under the age of 16 were barred from participating in the survey. Therefore, participants were at least 16 years and older. Given the sensitivity of GBV, it is not surprising that men were hesitant to participate in this survey. The participants were black African males from townships and rural areas (n=625).

Sampling strategy

In this study, male participants from KZN were selected through a random sampling method. This technique facilitates the unprejudiced approach that employs randomized selection of samples, thus ensuring that every individual or unit within a population has an equal probability chance of being chosen to reflect for inclusion in the larger population sample (McCombes, 2019). According to Noor et al. (2022), simple random sampling presents both benefits and limitations. While it provides an impartial and representative sample with equal probabilities of selection, it can be labor-intensive, often lacks an accessible public roster of individuals, and may encounter difficulties in heterogeneous and geographically dispersed populations. The sample size for this research was established at 625, determined using the Raosoft sample size calculator, which had a yield of 99% confidence level with a 3.5% margin of error.

Data analysis

The quantitative data was subjected to a thorough cleaning and validation process, during which duplicate entries and identified inaccuracies were eliminated, and typographical errors were rectified. To generate the desired outputs, descriptive statistical techniques, particularly frequency analysis, were employed to assist. Frequency tables along with corresponding summary charts were created using the Statistical Package for

Social Sciences (SPSS) and STATA version 17. To analyze qualitative data, thematic analysis (inductive analysis) was utilized. The data analysis methodology followed was crosstabulation and correlation tests for a selection of variables in the survey data. The crosstabulation analysis was used to extract key themes and compare the results of multiple variables in a dataset against one another. The Kendall's Rank Correlation Test is a nonparametric measure of the strength and direction of association that exists between two variables measured on at least an ordinal scale. For this analysis, the following relationships were examined:

- Age vs. Do you think Men in SA are doing enough to curb the scourge of violence against women and children?
- Gender vs. Do you believe that you have a role to play in curbing the scourge of violence against women insights from the participants. Children?
- Age vs. Do you believe that you have a role to play in curbing the scourge of violence against women and children?

Reliability and Validity

An expert panel, in this study, evaluated the questionnaire through content validity assessments and utilizing cognitive interviews. The Content Validity Index (CVI) was employed to gauge the questionnaire's validity. Furthermore, three specialists, who are experts in academic content were tasked with evaluating the relevance of each question using a four-point Likert scale, where 1 indicated not relevant, 2 indicated slightly relevant, 3 indicated relevant, and 4 indicated highly relevant. The number of experts who rated each item with a score of 3 or 4 was tallied (scores of 3 or 4 were deemed relevant, while scores of 1 or 2 were classified as non-relevant). The recommended I-CVI threshold is between 0.78 and 1.00, and our calculated score was 0.9.

Ethical considerations

Informed consent is acknowledged as a fundamental ethical principle in research across various disciplines; and this was taken into consideration in this study (Sanjari et al., 2014). Key ethical standards considered during this study included honesty, transparency, openness, anonymity, confidentiality, accountability, and informed consent. Participants engaged in this research voluntarily, without any coercion or expectation of financial compensation. Furthermore, the research proposal was reviewed and approved by the Research Control Committee and was further submitted to the Research Ethics Committee for further review and consideration. The ethical clearance for the research was obtained from the Research Ethics Committee, following a detailed review of the proposal and research questionnaire. Moreover, the research questionnaire was structured in a manner that prohibited traumatization and was not intrusive. Additionally, participants that needed support and counselling were referred to relevant organizations.

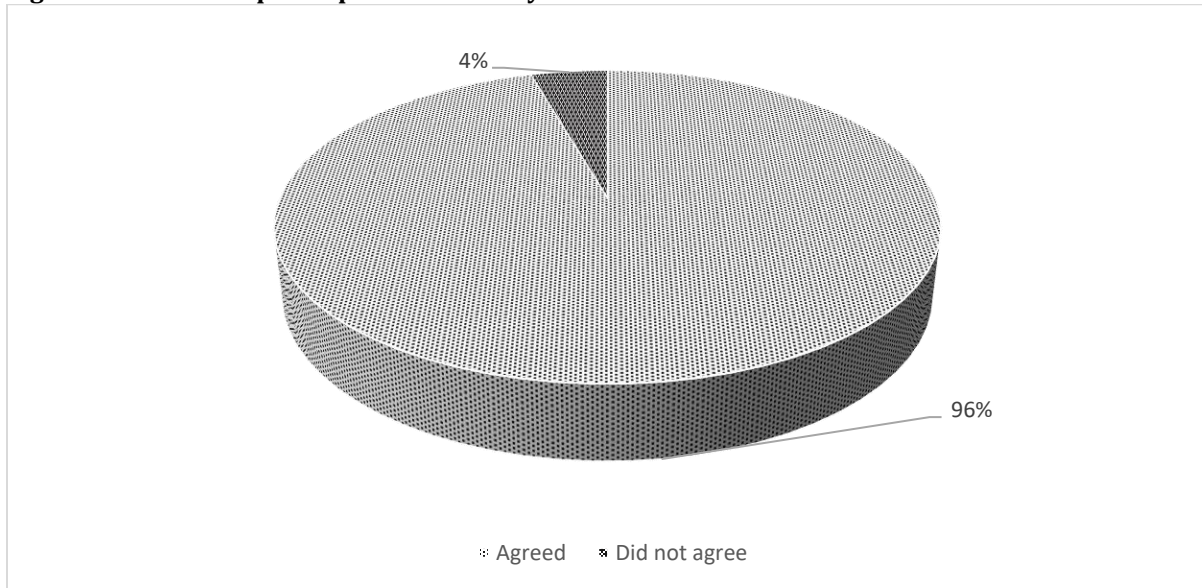
4. Findings and Discussion

The findings of this study are presented in the following subsections. They begin with some demographic analysis and then move on to more substantive issues. Furthermore, the results from the survey are further discussed with the aid of literature from relevant studies.

Consent to Participate in the Study and Participant's Nationality

Out of 654 respondents, only 29 did not consent to participate in the study. The 4% that did not give their full consent, did not form part of the study (Figure 1). One of the major reasons for the hesitancy in participating in this study can be attributed to the sensitivity surrounding GBV. Moreover, in certain areas, especially in rural KwaZulu-Natal, such topics are off-limit and considered taboo. There is still a lot of stigma associated with GBV in general in South Africa.

Figure 1: Consent to participate in the study



Gender vs Do you believe that you have a role to play in curbing the scourge of violence against women and children?

Table 1 presents responses from different gender groups to the question: "Do you believe that you have a role to play in curbing the scourge of violence against women and children? The majority of the respondents (82%) concurred that men have a critical role to play in curbing violence against women and children in KZN (Table 1). Even though men acknowledged that they have a critical role to play in curbing the scourge of violence against women and children, disturbingly some respondents admitted to touching women inappropriately and using physical violence. Additionally, 40% of the participants confirmed that they pass derogatory and sexist comments to women as this is viewed as a norm ("boys will be boys"). Whereas 25% indicated that they beat their partners if they are disobedient, or to prove their manliness or masculinity. Similarly, Jewkes et al. (2015) found that men who adhere to traditional masculine norms were likelier to perpetrate violence against women, including physical, sexual, and emotional abuse. Zinyemba and Hlongwana (2022) revealed that men who conform to rigid masculine norms are more prone to using violence within intimate partner relationships. Furthermore, qualitative research by Abba et al. (2022) illuminated how societal expectations of male dominance and control contribute to normalizing violence against women. The findings of this study are consistent with Connell's theory of hegemonic masculinity and social learning theory, which are utilized to explore the relationship between masculinity and GBV. Bozkurt et al. (2015) emphasized the dominant societal construction of masculinity, which fosters violence, control, and domination over women. This hypothesis accentuates how men frequently use violence to achieve and maintain their authority in social hierarchies, which contributes to the prevalence of GBV. Consequently, social learning theory emphasizes the importance of socialization in creating gender roles and behaviors (Varner et al., 2021). Varner et al. (2021) stated that people acquire and mimic gender-appropriate behaviors in their social context. Thus, males who have been exposed to violent and aggressive masculinity models may be more inclined to commit acts of violence against women. This highlights the need for educational and mentorship programs targeting young boys and men in our society to promote behavioral change and accountability.

Table 1: Gender vs Do you believe that you have a role to play in curbing the scourge of violence against women and children?

Gender	Maybe	No	Yes	Total
Male	11% (71)	6% (40)	81% (506)	99% (617)
Other	-	-	1% (8)	1% (8)
Total	11% (71)	6% (40)	82% (514)	100% (625)

Kendall's Test Results

Kendall's tau-b and tau-c tests assess the association between the two ordinal variables in a sample of 625 observations. The tau-b coefficient is 0.052, and tau-c is 0.009, both indicating a very weak positive association. This suggests that as one variable slightly increases, the other also tends to increase, though the association is minimal. The p-value for both coefficients is 0.005, which is below the typical significance level of 0.05. This means the results are statistically significant, indicating that there's a positive association between gender and the respondents' belief that they have a role to play in curbing the scourge of violence against women and children observed in this sample.

		Symmetric Measures ^c			
		Value	Asymptotic Standard Error ^a	Approximate T ^b	Approximate Significance
Ordinal by Ordinal	Kendall's tau-b	.052	.009	2.799	.005
	Kendall's tau-c	.009	.003	2.799	.005
N of Valid Cases		625			

a. Not assuming the null hypothesis.
b. Using the asymptotic standard error assuming the null hypothesis.
c. Correlation statistics are available for numeric data only.

Age vs Do you think Men in SA are doing enough to curb the scourge of violence against women and children?

Table 2 depicts the distribution of responses across the different age groups to the question: "Do you think men in SA are doing enough to curb the scourge of violence against women and children?" Across the entire sample (625), the majority of the respondents (402) answered "No" to this question, indicating a general perception across age groups that men in SA are not doing enough to curb the scourge of violence against women and children. The results also reveal that only one respondent amongst those between 55-65 years was of the view that 'men are doing enough to curb the scourge of violence against women and children. Furthermore, the younger age groups (15-24 and 25-34 years) had higher counts of respondents who were not certain as to whether men were doing merely enough to address GBV. It is therefore imperative that interventions and strategies geared towards addressing GBV should target these age groups.

Table 2: Age vs Do you think Men in SA are doing enough to curb the scourge of violence against women and children?

Age group	Yes	No	Not Sure	Total
15-24 years	18.3% (13)	15.7% (63)	13.8% (21)	15.5% (97)
25-34 years	49.3% (35)	39.1% (157)	46.1% (70)	41.9% (262)
35-44 years	28.2% (20)	28.9% (116)	23.7% (36)	27.5% (172)
45-54 years	2.8% (2)	11.2% (45)	11.2% (17)	10.2% (64)
55-65 years	1.4% (1)	4.7% (19)	3.9% (6)	4.2% (26)
Above 65 years	-	0.5% (2)	1.3% (2)	0.6% (4)
Total	100% (71)	100% (402)	100% (152)	100% (625)

Chi-Square Test result:

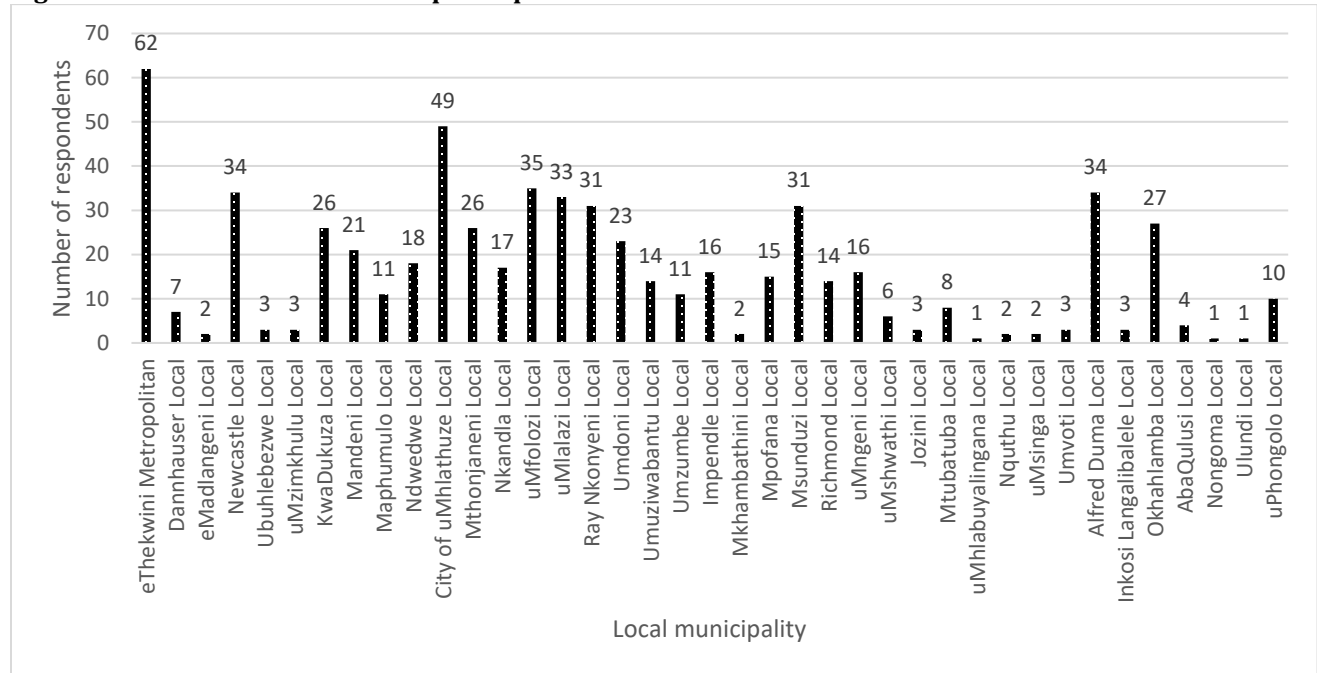
	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	11.654 ^a	10	.309
Likelihood Ratio	13.819	10	.181
N of Valid Cases	625		

a. 4 cells (22.2%) have an expected count of less than 5. The minimum expected count is .45

Location/ Municipality of the Research Respondents

Male respondents that participated in this study were from various municipalities distributed as follows: 62 from eThekweni Metropolitan; 49 from the City of Umhlathuze local municipality; 35 from Umfolozi local municipality; 34 from Alfred Duma and Newcastle local municipality; 33 from uMlalazi local municipality; 31 from Ray Nkonyeni and Umsunduzi local municipality. Respondents from other municipalities ranged from 1 – 30 (Figure 2). Other than eThekweni metropolitan and Umsunduzi municipality, the rest of the municipality are characterized by high employment and poverty. Furthermore, these municipalities are in townships and rural areas with poor socioeconomic dynamics where GBV is at its highest. Moreover, the Inanda police station (located in a township in KwaZulu-Natal) has the highest number of reported rape cases compared to all other police stations in South Africa.

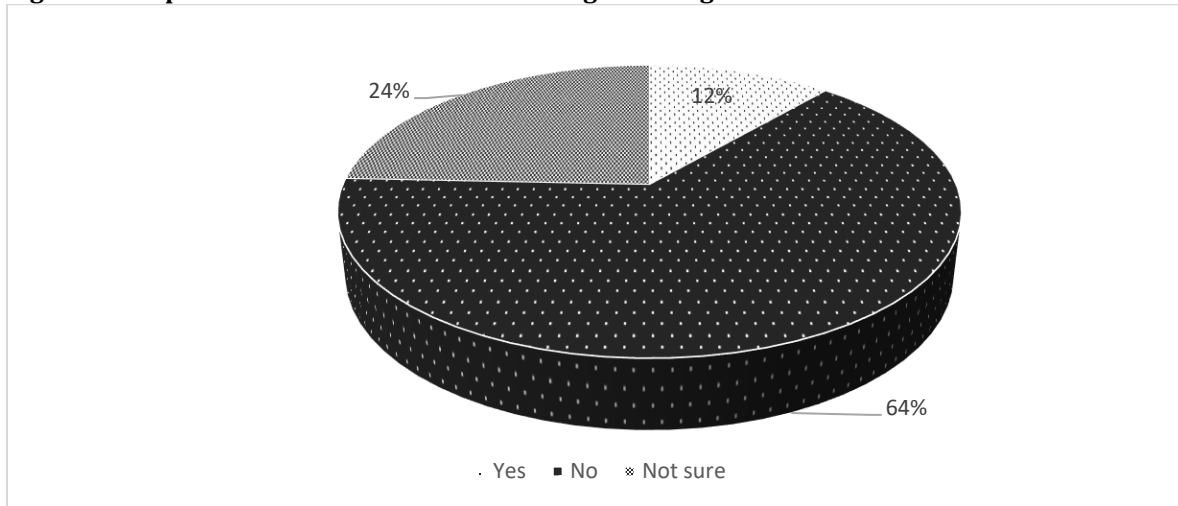
Figure 2: Location of the research participants



Respondent’s perspective on GBV efforts and initiatives in KwaZulu-Natal

Most of the respondents (64%) agreed that men are not doing enough to curb the scourge of violence against women and children. This is apparent from the disturbing statistics pertaining to femicide (2930), sexual offense (8759) and rape (41739) (SAPS, 2021). Twenty-four percent (24%) of the participants were not sure whether men were doing enough to address GBV. However, overwhelmingly, 64% agreed that men are not doing enough, whilst only 12% affirmed that men are doing enough to curb the GBV in South Africa (Figure 3). This, on the positive side, means that there is somewhat of an acknowledgment of GBV being a problem in South Africa, while, also, negatively, it speaks to how GBV has been normalized in various communities in South Africa. Govender (2023), confirmed that South African governments struggle to combat GBV due to gendered power dynamics in various cultures, despite existing laws and norms of behavior. Public perceptions and attitudes also contribute to the absence of political and institutional commitment to combating gender-based violence. It is apparent from the findings of the study that GBV has been normalized by society hence, the drastic increase in rape, sexual violence and femicide in South Africa. There is a need for an integrated approach targeting men in addressing GBV in South Africa.

Figure 3: Responses from men to whether enough is being done to curb GBV



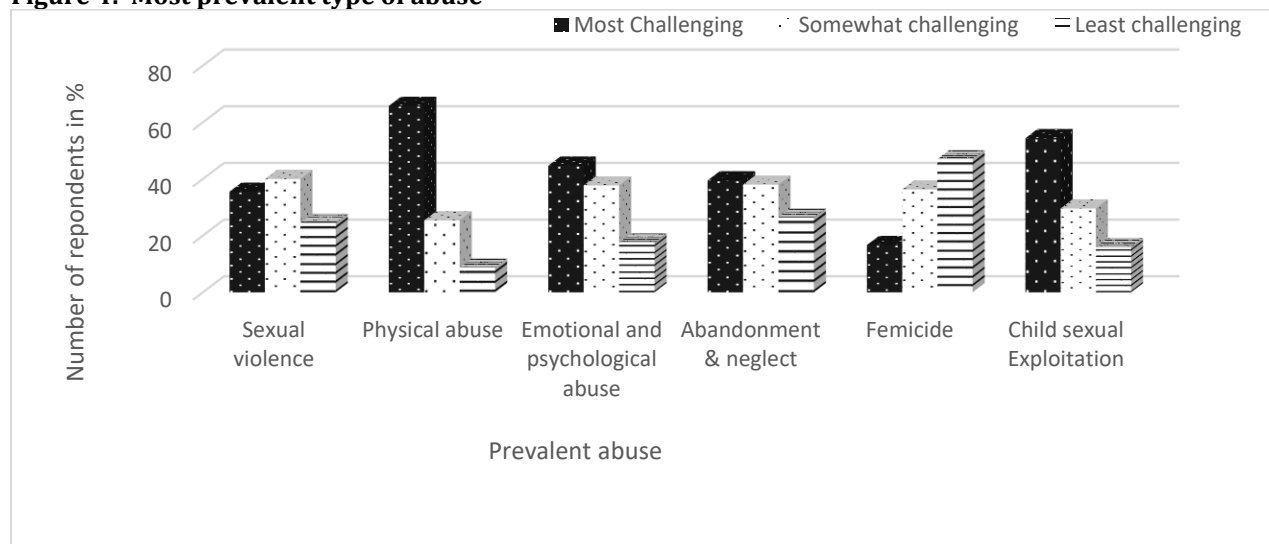
Most Prevalent Type of Abuse

Figure 4 highlights that the most prevalent type of abuse is physical abuse (65.8%). Physical abuse is an intentional act of causing injury or trauma to another person by way of hurting someone physically (Kapur, 2020). Violence in South Africa has been normalized because of the country's traumatic apartheid history. This was confirmed by the Truth and Reconciliation Commission's 1998 report, which stated that decades of Apartheid State-sponsored violence and reactive community insurrection have contributed immensely to a situation in which physical violence is a first-line strategy for resolving conflict and gaining dominance and prepotency for many people (Avruch and Vejarano, 2001). Gobodo-Madikizela (2023) affirmed that pervasive exposure to violence, both within households and communities, has desensitized individuals to its effects, fostering a culture of acceptance and tolerance towards violence. The legacy of apartheid continues to cast a long shadow over South African society, perpetuating cycles of violence and inequality. Understanding the historical context of apartheid is essential for comprehending the root causes of contemporary social problems, particularly Gender-Based violence. By addressing the structural inequalities inherited from apartheid and challenging the cultural norms that perpetuate violence, South Africa can work towards building a more just and equitable society for all its citizens. However, this endeavor requires sustained commitment and collaboration from government, civil society, and the broader community to break free from the shackles of the past and create a brighter future for generations to come.

Another form of abuse that is prevalent based on the findings of this study is Child Sexual Exploitation (CSE) (54.4%). Hill and Diaz (2021) reported that CSE has been found to have a detrimental and long-lasting impact on a victim's physical and emotional well-being. The findings of this study are consistent with the Optimus Study SA, which alluded that sexual abuse of children and adolescents is common: 36.8% of males and 33.9% of girls reported having been sexually abused. Overall, 35.4%, or one in every three teenagers, reported having suffered sexual abuse at some point in their lives (Ward et al., 2018). Moreover, there's been a drastic increase in sexual grooming and exploitation of children in South Africa as depicted in Figure 7. This was also affirmed by the Advisory Notes (2022) that found that in 2021 between 7% and 9% of children aged 12-17 years experienced online sexual abuse and exploitation such as grooming, gifts in exchange for sexual favors, and blackmail. Furthermore, 7% of the surveyed children stated that their intimate photographs were posted online without their permission, while 9% claimed they had been offered gifts or money to engage in sexual acts in person or share sexual images or videos. The perpetrators of the abuse were mostly unknown to the children, and the vast majority of those who experienced exploitation did not report the incidents to adults or authorities. These disturbing findings warrant policy changes and hefty penalties for perpetrators of sexual grooming of children. There is also a need for parents and guardians to monitor children's online activities (social media) to curb the exploitation of children online. Unfortunately, in most cases, perpetrators are rarely punished in South Africa for such obscene acts.

Emotional and psychological abuse was also highlighted as a challenge (44.7%); followed by abandonment and neglect (39.5%); and sexual violence (35.5%). Long-term effects of emotional and psychological abuse can lead to depression, anxiety, post-traumatic stress disorder, and difficulties in interpersonal relationships. Sadly, it also continues the cycle of abuse, as many abused individuals become abusers themselves (Stark, 2015). It is worth noting that some respondents indicated that sexual violence (40%); abandonment and neglect (38%), emotional and psychological abuse (37.7%), and femicide (36.3) were prevalent in their communities. Machisa et al. (2011) reported that between 25% and 40% of South African women have experienced sexual and/or physical intimate partner violence in their lifetime. South Africa has a five-fold greater rate of women murdered by intimate partners than the global average (World Bank, 2019). According to Mathews (2004), a woman is murdered by her intimate partner every six hours in the province of KwaZulu-Natal. Additionally, the study conducted by Malan et al. (2018) discovered that 92.5% of respondents reported being victims of intimate partner abuse in 2017. These statistics show the enormity of the crisis confronting women in South Africa, where women live in constant fear of being raped or killed by their partners. In one of the horrific femicide instances in KwaZulu-Natal a body of a well-known female doctor was found shot and stuffed in the boot of her car, in Imbali Township, Pietermaritzburg, (Miya, 2024). In another occurrence, a 34-year-old woman's body was discarded on the side of a jogging trail at Parkmore's George Lea Park (Luvhengo, 2023). Additionally, the dismembered body of a student was found in a suitcase, while a black refuse bag found next to the suitcase contained some of her other body parts (Shange, 2021). Similar occurrences are recorded daily in South Africa and KwaZulu-Natal. This demonstrates how vulnerable and endangered women are in this country.

Figure 4: Most prevalent type of abuse



Causes of Gender-Based Violence

Based on the result of this study respondents believe that a poor and ineffective justice system (65.9%), financial dependency (65.9%), and harmful social gender norms (64.2%) are the main causes of GBV (Figure 5). It is no secret that the justice system sometimes fails GBV victims as most of the offenders are usually released on minimal bail. Furthermore, police stations are designed in a manner that hinders reporting of sexual assault; the inadequate investigations by the police with most of the cases ending up being dropped by the victim due to victimization. (Palermo et al., 2014). Consistent with the findings of this study Nsahlai et al. (2023) found that financial dependency and poverty exacerbate GBV. The results of this demonstrate that there is an urgent need to economically emancipate women, especially at a grassroots level. Women must be empowered to be self-sufficient and must be encouraged to make their own money. Being financially dependent on a man can sometimes put women in compromising situations, such as tolerating abuse from their partners (**Error! Reference source not found.**). Anena and Ibrahim (2020) asserted that the economic empowerment of women could be an effective strategy for addressing GBV.

Transgressing gender norms can be dangerous for women as they are often blamed for the violence men inflict against them, leaving them with very little opportunity to negotiate power dynamics in relationships. In South

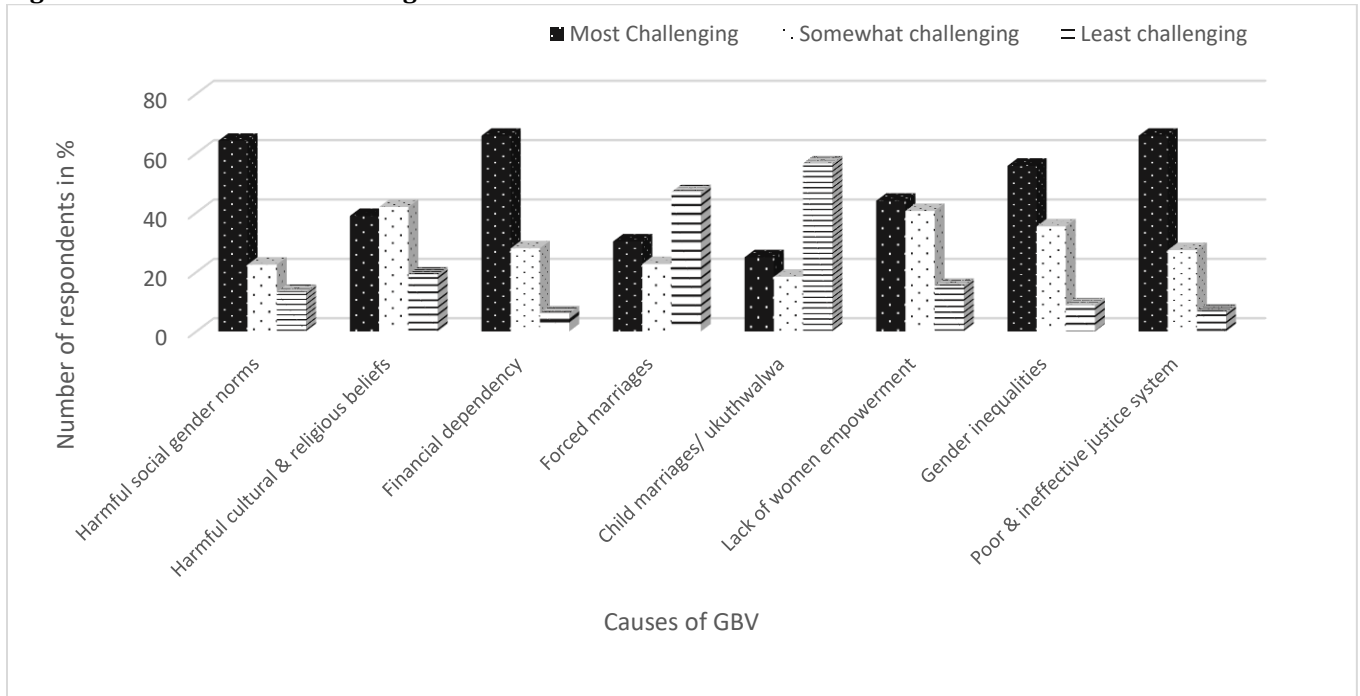
Africa there is often impunity for the perpetrators of GBV especially when it's a family member. Hence, there's a need to dispel myths such as *what happens at home must stay at home, my household, my rules, or what happens at home is nobody's business*. These ideologies are harmful and tend to exacerbate violence against women since there are no repercussions for the offender. Perrin et al. (2019) concurred that harmful social norms that perpetuate GBV include women's sexual purity, valuing family honor over women's safety, and men's authority to discipline women and children. This observation is consistent with the findings of this study indicating that harmful social gender norms (64.2%) perpetuate violence against women and children. Therefore, changing repressive gender, attitudes and societal norms in our communities should be prioritized. Awareness is warranted regarding the injustice that is taking place in rural areas in the guise of culture and customs, where families of victims accept payments through livestock like goats, cattle, or chicken as a form of compensation when a child has been raped by a family member, neighbor, or someone close and known to the family.

Gender inequalities (55.8%) and lack of women empowerment (44%) were also highlighted as contributing factors to GBV. Consistent with the findings of this study, numerous research (Abrahams et al., 1999; Jewkes, 2002; Sigsworth, 2009, Wood et al, 2008) have identified power imbalances in gender inequality and discriminatory patriarchal practices against women as root causes of GBV. These patriarchal beliefs frequently privilege men over women. There are contradicting views on whether women's empowerment causes or prevents GBV. Incongruent to the findings of this study, Okafor and Abdulazeez (2007) delineated that women empowerment may increase the danger of gender-based violence. They discovered that women who have enhanced livelihood possibilities, a stronger voice, and more decision-making ability may face "backlash" from their intimate relationships, family, and community members. This is mostly attributed to community and household power dynamics, in which gender roles are defined and enforced by social norms that consider men as providers and women as caregivers (Okafor and Abdulazeez, 2007). Modise et al. (2024) asserted that empowerment programs for women can increase their independence and reduce vulnerability to violence. Additionally, during the qualitative interviews, the respondents mentioned that other factors that cause GBV are:

- Jealousy (*isikhwele* in IsiZulu): the respondents were of the view that seeing your partner flirting with another man invokes jealousy to an extent that they begin to be abusive, as they feel threatened in a relationship, and they sometimes get very possessive of their partners which eventually leads to abuse. Buller et al. (2023) confirmed that male romantic jealousy is a common cause of intimate partner violence against women. Their research revealed that male jealousy was associated with controlling behaviors and sexual intimate partner violence. Moreover, controlling behaviors were associated with physical and sexual intimate partner violence (Buller et al., 2023).
- Mindset and power dynamics are the biggest challenges; men need to change their mindset and treat women and children with respect. It does not matter how the women present themselves in terms of how they dress (whether wearing long or skimpy clothing) they should not be perceived as objects of sexual abuse. Most men were of the view that women that dress provocatively are asking to be raped. They further stated that women who wear noticeably short, revealing clothes usually seek attention from men. Similarly, Dzinamarira et al. (2023) indicated that power imbalances, which stem from a patriarchal framework, play a role in exacerbating Gender-Based violence.
- Lack of respect for women and children is a major contributing factor to GBV. Some respondents even affirmed that for a woman to respect you as a man, you must discipline her by beating her up, this averment was very disturbing. These findings illustrate the dynamics of power within homes and in society. Furthermore, Swinford et al. (2000) found that harsh physical punishment in childhood is directly associated with a higher risk of violence against an intimate partner later in life. Abusive parents or background (background of the person), GBV is a learned behavior from being raised by abusive parents or having been a victim of abuse as a child, such incidents subconsciously manifest in a child as he grows up. Men further stated growing up watching their father abusing their mother and sisters, somehow affects them psychologically, and abusing women becomes a norm. Therefore, as young men transition to adulthood, they begin to abuse their partners. According to Wanjiru (2021), social learning theory suggests a child learns not only how to commit violence but also develops positive attitudes toward violence when he or she sees it rewarded. This shows that children who have observed violence or been abused develop harmful conflict resolution and communication behaviors as indicated by the disturbing findings of this study.

- Men feel superior to women. Respondents who took part in this survey stated that cultural and religious norms encourage a man's view that he is superior to a woman, which leads to abuse. Consistent with the results of this survey, Yesufu (2022) affirmed that social norms, religious and traditional values, patriarchy, and gender relationships all contribute to prevailing concepts of masculinity, ultimately undermining women's intrinsic right to exist.
- Women have the biggest role to play in curbing GBV. Some of the respondents stated that women have a bigger role to play due to them being nurturers. They should teach young boys how to behave and treat women. Coulson (2020) advocates that boys should be taught to respect women if the war against GBV is to be won.
- Absent fathers or single parenthood also contribute to GBV. Men lack role models and mentors that could assist them in navigating men-related challenges. Siu et al. (2017) stipulated that parenting programs involving fathers can reduce child maltreatment and Gender-Based violence. Additionally, to create and promote a constructive, nonviolent version of masculinity, men require relevant knowledge, skills, mentoring, and peer support (Hoang et al., 2013)
- Unemployment was also mentioned as a contributing factor to GBV. Respondents indicated that being unemployed as a man is frustrating, especially since, culturally, a man is the head of the family and is supposed to be a provider. Therefore, being unemployed as a man, they feel hopeless, powerless, and frustrated. This frustration then leads to violence and abuse. South Africa has an alarming unemployment rate. Using the expanded definition of unemployed, which includes those who have stopped looking for work, the level of unemployment in SA was 46.6% in 2022 (Stats SA, 2022). This indicates the magnitude of the problem. Similarly, Blade Nzimande, General Secretary of the South African Communist Party (SACP), concurred that the high unemployment rate among South African men contributes to Gender-Based violence because most men who are unable to provide for their families vent their rage on women and children, though this is not a justification for violence against women (IOL, 2019).
- Alcohol and drug abuse are also the biggest contributors to GBV in homes and communities. Respondents indicated that, sometimes, when men are intoxicated, they become violent towards their partners and children. Sometimes, they go to the extent of sexually assaulting and raping women and children. During the Covid-19 pandemic, there was an increase in domestic violence in South Africa, for which harmful alcohol consumption was a key factor. When the government imposed alcohol restrictions, citizens opted to brew their alcoholic beverages, which further exacerbated GVB. In South Africa, more than 2,000 Gender-Based violence cases were reported to police in the first week of lockdown in March 2020, a 37% increase over the weekly average in 2019. A study by Oxfam (2021) reported that during the pandemic calls to domestic violence hotlines in South Africa increased by 69% during the first month of lockdown (March 2020). The restrictions that were imposed on the movement of persons and goods also made it easier for men to perpetrate violence against women and children without consequences since even the first respondents were not operational. Additionally, Human Rights Watch (2021) confirmed that South African authorities acknowledged a significant increase in Gender-Based violence incidents both during and before the pandemic. Despite commitments, including in a National Strategic Plan, to address Gender-Based violence and femicide, the government has still failed to provide the required financing for shelters and other assistance for victims of GBV. The findings of this study are also consistent with that of Abbey et al (2004) who stated that the primary mechanisms through which alcohol consumption increases the likelihood of sexual violence perpetration are pharmacological and psychological. Overconsumption of alcohol impairs one's judgment and cognitive abilities such as episodic and working memory, abstract reasoning, set-shifting, planning, and judgment (Abbey, 2004; Abbey, 2011). When intoxicated, people focus on immediate, salient, superficial cues rather than distal, covert, embedded cues. The cues that usually inhibit sexually aggressive behavior such as a sense of morality, empathy for the victim, and concern for future consequences are likely to be less salient than feelings of anger, frustration, sexual arousal, and entitlement, especially among men who are predisposed to sexual aggression (Abbey, 2011).

Figure 5: Causes and contributing factors of Gender-Based Violence



Practical Changes and Interventions to Address GBV

Respondents indicated that to address the GBV crisis, men need to take a stand against GBV and hold perpetrators accountable (66.6%). Data obtained from the study points to a contradiction; whilst the respondents acknowledge that men need to take a stand against GBV, they still potentially hold harmful gender norms that legitimize violence against women and children. This contradicting data could be explained utilizing the Cognitive Dissonance Theory. According to Festinger's (1957) Cognitive Dissonance Theory (CDT), persons who possess contradictory cognitions experience dissonance until they can resolve it by changing their cognitions. Moreover, the results necessitate behavioral changes among men in South Africa to curb the scourge of violence against women and children. There is also a need for educational and mentorship programs for young boys and men on how to treat women and children (64.2%); a stronger justice system that will protect women and children (51.2%) and mobilization of NPOs and community forums to curb the scourge of GBV (Figure 6). Major changes are warranted to deal with GBV in our society, the society that blames the victim and supports the perpetrator (46.6%) and the notion that GBV will go away on its own needs to change (46.1%). Other respondents indicated that sexual objectification of women and children in the media needs to be dealt with if the country is serious about curbing GBV. Table 3 depicts the statistical results for Abuse Types, Causes of GBV, and Interventions to address GBV. Table 3 depicts the Statistical Test Results for Abuse Types, Causes of GBV, and Interventions to address GBV.

Figure 6: Practical changes or interventions to address GBV

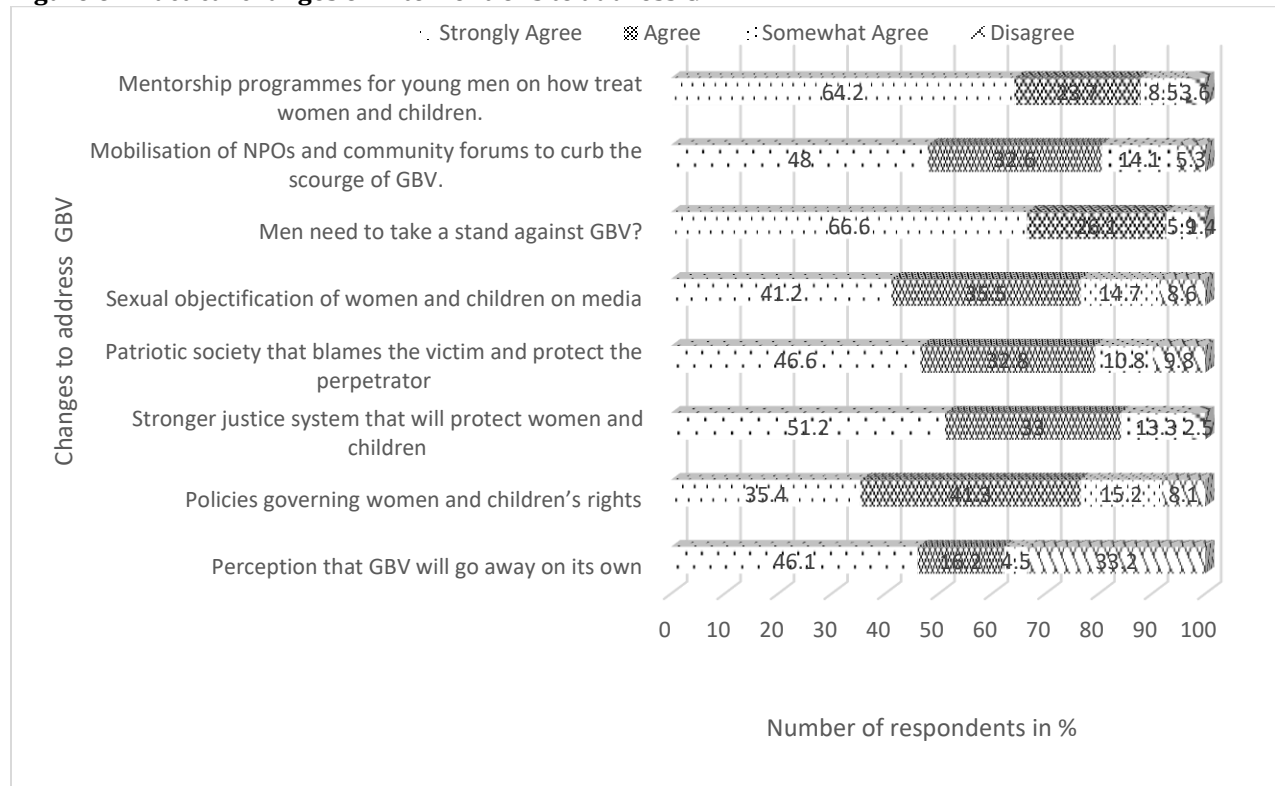


Table 3: Statistical Test Results for Abuse Types, Causes of GBV, and Interventions to address GBV

	Category	N	Mean Rank	Kruskal-Wallis H	Degrees of Freedom (df)	Significance Level (Asymp. Sig.)
Abuse Type	Sexual violence	3	9.33	0.345	5	0.997 n.s
	Physical abuse	3	8.33			
	Emotional and psychological abuse	3	10.00			
	Abandonment & neglect	3	10.67			
	Femicide	3	9.67			
	Child sexual exploitation	3	9.00			
	Total	18				
Cause of GBV	Harmful social gender norms	3	11.33	0.210	7	1.000 n.s
	Harmful cultural & religious beliefs	3	13.00			
	Financial dependency	3	12.17			
	Forced marriages	3	13.67			
	Child marriages/ukuthwalwa	3	12.33			
	Lack of women empowerment	3	13.00			
	Gender inequalities	3	12.33			
	Poor & ineffective justice system	3	12.17			
	Total	24				

Intervention to address GBV	The perception that GBV will go away on its own	4	17.25	0.597	7	0.999 n.s
	Policies governing women's and children's rights	4	17.75			
	Stronger justice system to protect women	4	16.25			
	Patriarchal society blames the victim and protects the perpetrator	4	17.25			
	Sexual objectification in media	4	18.00			
	Men need to stand against GBV	4	14.25			
	Mobilization of NPOs/community forums	4	16.50			
	Mentorship programs for young men	4	14.75			
	Total	32				

NB: n.s means not significant

5. Conclusion and Recommendations

The GBV pandemic in South Africa is rooted in unequal power in gender relations, patriarchy, homophobia, and sexism, amongst other harmful discriminatory beliefs and practices. Such violence is reinforced by the widespread use of drugs and alcohol, and the continued stereotyping of women in the media, further compounded by the Covid-19 pandemic and the high unemployment rate in South Africa. Rape is a violent crime and should carry heavy sentences irrespective of whether the perpetrator is a first-time offender or not. However, harsh sentences are rarely given to first-time offenders. Victims are often ashamed to come forth due to the fear of secondary victimization from society. This can be attributed to the poor justice system and a culture of denialism, which protects the culprit and blames the survivors for being victimized. Several interventions can be employed to address the scourge of violence against women and children as highlighted by the findings of this study.

These include but are not limited to: (i) Children, especially boys need to be taught about consent from an early age. (ii) There is an urgent need for GBV awareness and mentorship programs targeting men in general. (iii) Law enforcement needs to train a specific group of officers that will deal solely with rape, sexual assault and any GBV-related reporting and investigations. (iv) Resources must be channeled to increase police visibility, especially in areas with the highest number of GBV-related incidents. (v) Mobilisation of NPOs, places of safety, churches, and community forums is of paramount importance in curbing the scourge of violence against women and children. (vi) A stronger justice system that will protect women and children is necessary for addressing GBV in South Africa. (vii) GBV is a pandemic and a state of emergency, it deserves to be treated with the same urgency as the COVID-19 pandemic. (viii) Policies governing women's and children's rights need to be properly workshopped and implemented and KwaZulu-Natal provincial government needs to develop a detailed strategy and policies on how to deal with violence against women and children. There is a need for additional research that will focus solely on the Sexual Exploitation of Children in South Africa and develop frameworks on how this crisis can be adequately addressed to ensure the safety and security of children.

Limitations of the study

Due to the sensitivity and negative connotations associated with GBV in South Africa, most men were not keen to participate in the study. This affected the project completion date.

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