THE ROLE OF FAITH--BASED ORGANIZATIONS IN CURBING GENDER--BASED VIOLENCE IN NAIROBI COUNTY, KENYA

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MMUST
DECLARATION

DECLARATION BY THE CANDIDATE

This thesis is my original work prepared with no other than the indicated sources and support
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Signature .............................................. 20/11/2017

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DEDICATION

I would like to dedicate this work to Prof. Esther Mombo of St. Paul’s University, my mentor and role model for her zeal in fighting Gender-Based violence.
ABSTRACT

Faith-based organizations are defined as faith-influenced non-governmental organizations. They are often structured around development and/or relief service delivery programs and are sometimes run simultaneously at the national, regional and international levels. Faith-Based organizations have played an important part in effective global responses to gender--based violence over the past twenty years and have a central role to play in the development and implementation of gender--based violence retention programs. An increasing amount of research highlights the health burdens, generational effects, and demographic consequences of Gender-based violence. Gender-based violence occurs across all socio-economic and cultural backgrounds. In Kenya, women are socialized to accept, tolerate, and even rationalize gender--based violence and to remain silent about such experiences. The consequences of gender--based violence include death, HIV/AIDS, unwanted pregnancies, physical and psychological trauma. Most of the literature on Faith-based organizations initiatives towards Gender-based Violence response is scarce and primarily addresses what Faith-based organizations are against rather than their efforts in combating gender-based violence. There is very little evidence to show how the potential of Faith-based organizations have been or can still be tapped in curbing Gender-based violence. It is against this background that this study examines their role in combating gender-based violence as well as care and support for the survivors. The specific objectives of the study were:- to examine the nature and status of gender based violence in Nairobi County, Kenya, to analyse the role of faith--based organizations in curbing gender--based Violence in Nairobi County and to explore the challenges faced by faith--based organizations in combating gender--based Violence. The conceptual framework that guided the study comprised of Reasoned Action Theory and Gender Schema Theory. These theories argue that people’s behavior, attitude and practices can change for better if influenced in the right way. Faith-based organizations fall in this category of change agents within the society or at an individual level and become very relevant in addressing Gender-based violence reduction measures. The study was based on exploratory and descriptive research design. The data was collected using interviews, semi structured questionnaires consisting of both open and closed ended questions and focus group discussions. The sample size of the research was two hundred and fifty (250) respondents from members of the four Faith-based organizations namely Muslim Advocacy Network against Domestic Violence, Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa, Amani Communities Africa, Circle of Concerned African Women Theologians, public administration officials and survivors of gender- based violence. The data was analysed through Statistical packages for social science. The study found out that all types of Gender-based violence exist in Nairobi County. It also found that Faith-based organizations have a great potential not only in the prevention of Gender-based violence but also in providing care and support to people living with trauma associated with gender-based violence. The study recommends that more research to be done in other counties across the country to assess the effect of Gender-based violence for comparison and observation of the trends in gender-based Violence. The findings of the study will contribute to existing knowledge on how to curb Gender-based violence. The research findings further provide a foundation for more discussions and actions on matters related to Gender-based violence among the academic settings, policy makers, community leaders and Kenyans in general.
LIST OF ABBREVIATIONS AND ACRONYMS

ACA------------------Amani Communities Africa

AWFN---------------African Women of Faith Network

CATI---------------Conference of African Theological Institutions

CEDAW--------------Convention on Elimination of Discrimination Against Women

CIRCLE-------------Concerned African Women Theologians fellowship

COVAW-------------Coalition on Violence Against Women

CREAW-------------Centre for Rights Education and Awareness

DESECE------------Development Education Services for Community Empowerment

EATWOT-----------Ecumenical Association of Third World Theologians

EEAT-------------Ecumenical Association of African Theologians

FBOs---------------Faith Based Organizations

FECCCLAHA--------Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa

FIDA--------------International Federation of Women Lawyers (Kenya)

FGM/C-------------Female Genital Mutilation/ Cut

GBV---------------Gender-Based Violence

GOK--------------Government of Kenya
HIV------------------------ Human Immuno Deficiency Sydrome

IASC-------------------Inter Agency Standing Committee

IHRD-------------------International Human Rights day

KNBS-------------------Kenya National Bureau of Statistics

LGBT-------------------lesbian Gay Bisexual Transgendered

MANADV---------------Muslim Advocacy Network Against Domestic Violence

NCRC-------------------National Crime Research Centre

NGO-------------------Non Governmental organization

NGP-------------------National Gross product

PFP---------------------Peaceful Families’ Project

SACCO------------------Savings and Credit Cooperative Organization

SAWA-------------------Solidarity for Advancement of Women’s Agenda

UNEP-------------------United Nations Environment Program

UNFPA-------------------United Nations Population Fund

UNICEF-------------------United Nations Children’s fund

UNIFEM------------------United Nations Fund for Women

UNDP-------------------United Nations Development Program
WHO------------------------World Health Organizations

WCC------------------------World Council of Churches
OPERATIONALIZATION OF KEY CONCEPTS

Gender--Based Violence (GBV): GBV includes a variety of acts of violence committed against females because they are females and against males because they are males. It includes sexual violence, intimate partner or spouse abuse (domestic violence), emotional and psychological abuse, sex trafficking, forced prostitution, sexual exploitation, sexual harassment, harmful traditional practices and discriminatory practices based on gender.

The understanding of gender based violence differs with legal context, community, and country and therefore there is no single definition that is acceptable universally. Similarly, since there is a general lack of a clear and commonly accepted language, development of databases and reporting systems is inhibited. As a result, efforts of advocacy, monitoring, and prevention are restrained region (Betron and Doggett, 2006). However, a wide definition of the term gender based violence may refer to the physical, emotional or sexual abuse of a survivor. The sexual element of this definition is usually the primary focus of many GBV studies, but the management of the situation touches on the emotional and physical aspect. The World Health Organization, defines gender based violence as “any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic women’s sexuality, using coercion, threats of harm or physical force, by any person regardless of relationship to the survivor, in any setting, including but not limited to home and work”. This research adopts this definition by the World Health Organization. However, it expands the scope to include child sexual abuse, rape experienced by both sexes, and forced sex region (Population Council, 2008).

Sexual violence---- is used to represent behaviors that fall under scope of abuse, assault, and violation in relation to sex. Such activities or behaviors may include harassment and voyeurism. Gender based violence is used synonymously to sexual violence. Essentially, it is used to
demonstrate the gender inequality that exist in the society and is the root cause of the violence witnessed. However, in as much as majority of the victims of gender based violence are women, in this report, the term sexual and gender based violence will be inclusive of men, children, and women region (Population Council, 2008).

**Faith-based organizations:** It refers to any organization that derives inspiration and guidance for its activities from the teachings and principles of the faith or from a particular interpretation or school of thought within the faith.

**Faith communities:** These are people who identify themselves with different faith and who allow their faiths to influence their beliefs, practices and world view

**Violence:** refers to all acts or threats that cause direct physical, mental or sexual harm or suffering.
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CHAPTER 1 INTRODUCTION

This chapter contains the background of the study, statement of the problem, research objectives, research questions, scope of the study and limitations encountered in the course of the study. The chapter concludes with the description of the significance of the study in the academic and policy making processes.

1.1 BACKGROUND TO THE STUDY

Gender-based Violence describes the specific type of violence that is linked to the gendered identity of being a woman or a man (NCRC, 2015). Gender refers to the socially constructed roles, behaviour, activities and attributes that a particular society considers appropriate for men and women (Ibid). The distinct roles and behaviour may give rise to gender inequalities, that is, differences between men and women that systematically favour one group. In turn, such inequalities can lead to inequities between men and women in both social, economic and political status and relationships. Thus the weaker gender is rendered vulnerable to domination and exploitation by the more powerful one. Such domination and exploitation may be symptomized in limited access to social goods like health, education, security, nutrition as well as victimisation from violent and non-violent sexual and non-sexual offences against the person. Acknowledging that the common victim of GBV is the female gender, the World Health Organisation (WHO, 2005) observes that for women in many parts of the world, violence is a leading cause of injury and disability, as well as a risk factor for other physical, mental, sexual and reproductive health problems. GBV takes form in a variety of behaviour including physical, mental, or social abuse (UNHCR, 2000) and sexual abuse and harm (UNFPA, 2003). According to (UN-GA, 1993), in 1993, the United Nations General Assembly presented a partial list of GBV which included: Physical, sexual and psychological violence within the family, Child sexual abuse, Dowry-related
violence, Marital rape, Female genital mutilation, Rape and sexual abuse, Sexual harassment in the workplace and educational institutions, Trafficking in women, Forced prostitution. A significant characteristic of GBV is that the victim has no choice to refuse or pursue other options without severe social, physical, or psychological consequences owing to the fact that it is rooted in a society’s social structure, that is, the society’s nerve centre or its system of norms, values and beliefs (UNHCR, 2000). It is also an important characteristic that GBV can be perpetrated by an intimate partner as well as a stranger, and within and outside the family and home environment.

There have been increasing concerns about GBV in both developed and developing countries. GBV has been acknowledged worldwide as a violation of the basic human rights. An increasing amount of research highlights the health burdens, generational effects and demographic consequences of GBV. GBV occurs across all socio-economic and cultural backgrounds (KHDS, 2009). Women are socialized to accept, tolerate and even rationalize gender-based violence and to remain silent about such experiences. GBV has a serious impact on the country’s economy because women bear the brunt of domestic violence, they also bear the health and psychological burden (Ibid). Experienced by an estimated one third of women worldwide (UNICEP, 2009) GBV is a global affront to human rights, a public health crisis and a major barrier to development. Violence can happen to anyone but some groups such as minority women, indigenous women, refugee women and children are especially vulnerable throughout the world to a range of violence. With some of the highest cited rates of GBV, awareness is growing with respect to the relationship between GBV, human rights, health and development in the various African regions.

As public, private, and NGO sectors increasingly respond to GBV in Africa, it will be essential to address not only the consequences of GBV by attending to the needs of survivors, but also its causes and contributing factors. As with any complex social problem, GBV stems from and manifests itself at every level of society, from individual to societal, and in a wide array of forms, from private to public. Successful efforts will require coordinated, comprehensive, multi-sectoral responses.
The United Nations defines gender-based violence as any act that results in, or is likely to result in, physical, sexual or mental harm or suffering to a person on the basis of their gender, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life (UNFPA, 1993). The first report of the "WHO Multi-country study on women’s health and domestic violence against women" (2005) in 10 mainly low- and middle-income countries found that, among women aged 15-49, between 15% of women in Japan and 71% of women in Ethiopia reported physical and/or sexual violence by an intimate partner in their lifetime, between 0.3–11.5% of women reported experiencing sexual violence by someone other than a partner since the age of 15 years. 17% of women in rural Tanzania, 24% in rural Peru, and 30% in rural Bangladesh reported that their first sexual experience was forced.

In 2005 WHO carried out a research with the London School of Hygiene and Tropical Medicine and the Medical Research Council, based on existing data from over 80 countries and found that globally 35% of women have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence (WHO report, 2005). Most of this violence is intimate partner violence. Worldwide, almost one third (30%) of all women who have been in a relationship have experienced physical and/or sexual violence by their intimate partner, in some regions this is much higher. Globally as many as 38% of all murders of women are committed by intimate partners.

Domestic and sexual violence in the United Kingdom costs the country £5.7 billion per year, including costs to the criminal justice system, health care costs, housing and the loss to the economy. In the United States, the health care cost of intimate partner rape, physical assault and stalking totals $5.8 billion each year, nearly $4.1 billion of which is for direct medical and mental...
health care services. Lost productivity from paid work and household chores and lifetime earnings lost by homicide victims total nearly $1.8 billion (WHO, 2005). Reports on rape during conflict detail profound brutality towards women and girls, including serious beatings, mutilation or removal of the genitals, rape with sharp objects, and gunshots to the genitals. Others have witnessed the death of friends and family members from similar forms of brutality.

Globally, Faith-Based Organizations (FBOs) are an integral part of life and society found within every community. They have much credibility because of their involvement with the people in every aspect of their life (Guiney, 2012, Green, 2003). They are central actors within the broader civil society in developing countries especially in Africa (Mallya, 2010). As social and cultural institutions, FBOs shape social norms, beliefs, attitudes and peoples’ reality with regard to sexual self-understanding. This makes them a crucial partner in combating gender-based violence.

Kenya, like any African country is a country where religious beliefs play a major role in shaping peoples’ personal identities, perceptions of diseases and decisions made from these perceptions. Faith communities have a pivotal role in determining how individuals, families and the whole community respond to problems of gender-based violence pandemic, which is the greatest challenge and development issue facing the country and the continent as a whole. (Hayness, 2007) highlights that “throughout the developing world, it is implausible to believe that religious factors can be isolated from life’s general context. This is because, irrespective of which faith we refer to, religions provide necessary concepts and ideas to answer people’s existential questions.

A faith-based organization is ‘any organization that derives inspiration and guidance for its activities from the teachings and principles of the faith or from a particular interpretation or school of thought within the faith (Clarke G, & Jennings M., 2007). At a minimum, FBOs must
be connected with an organized faith community either in the form of a particular faith ideology, drawing of staff, volunteers or leadership from a particular faith denomination (Scott J.D, 2003). Other qualities that qualify an organization as ‘faith-based’ are religiously-oriented mission statements, the receipt of substantial support from a religious organization or the initiation by a religious institution.

Faith-based organizations can play a big role in reducing gender-based violence. FBOs leaders can be good change agents who can help bring positive changes in matters GBV. This research will find out what FBOs are doing in curbing GBV in Nairobi County, Kenya.

GBV cases are on the rise in Kenya, Africa and globally (KDHS, 2009). It is a serious problem that leads to loss of life, physical paralysis and other health hazards like depression, low self-esteem among others. GBV poses a myriad of developmental problems and raises critical concerns to political leaders, international organizations, civil society and the community as a whole (Wasike & Waruta, 1993). According to World Council of Churches, socio-economic and cultural contexts are determinant factors in the spread of GBV and they differ from place to place, countries, districts and even villages which results in different GBV stories and current profiles (Ibid). GBV is an issue that affect the growth and development of individuals in the country. Regardless of the form that gender-based violence takes, it is a human rights violation or abuse, a public health challenge, and a barrier to civic, social, political, and economic participation. It is associated with many negative consequences, including adverse physical and mental health outcomes, limited access to education, increased costs relating to medical and legal services, lost household productivity, and reduced income. Gender-based violence undermines not only the safety, dignity, overall health status, and human rights of the millions of individuals who
experience it, but also the public health, economic stability, and security of nations. Gender-based violence cuts across ethnicity, race, class, religion, education level, and international borders. Kenya demographic and health survey (KDHS) conducts research concerning GBV every after five years. According to KDHS, between 2008-2009, 45% of women aged 15-49 years experienced physical, sexual or emotional violence (KDHS, 2009). After five years, KDHS carried another survey between 2013-2014. Although this time, they categorized the women in groups that is 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, when the average was calculated, 43% of women between 15-49 had experienced either physical, sexual or emotional violence (KDHS, 2014)

A number of Non-Governmental organizations like Gender Violence Recovery centre based at Nairobi women hospital in Nairobi kenya is also involved in GBV research. According to their report in 2012, 45% of women aged 15-49 experienced physical, sexual or emotional violence (population Bureau, 2012). According to the United nations population fund report in 2013, 20% of women world wide will become a victim of or attempted rape in her life time and 0.7—2Million women are trafficked every year (UNFPA, 2013). Across Africa, in 2007, GBV research was carried out in Botswana, Lesotho, Malawi, mozambique, Namibia, swaziland, zambia and Zimbabwe and an average of 40% of women had experienced either physical, sexual or emotional violence (CIET, 2007)

United nations population fund (UNFPA, 2013) gives the global picture concerning GBV and reports that, 33% of women have been beaten, coerced into sex, or otherwise abused in their lifetime. Intimate partner violence is the most common form of violence experienced by women globally. According to UNFPA, almost 50 percent of all sexual assaults worldwide are against girls 15 and younger. In 2002, 150 million girls and 73 million boys under the age of 18 years
experienced forced sexual intercourse or other forms of sexual violence. With this in mind it is of essence to determine how Gender Based Violence can be reduced to a minimum.

Looking at the highlights of KDHS reports of 2002, 2008 and 2014 on GBV, we are confronted with the reality that GBV continues to rise or remain constant with between 41-45% of women experiencing either physical, sexual or emotional violence. In Kenya, non governmental organizations and FBOs meant to reduce GBV increases everyday. FBOs seem to work very hard to reduce GBV in Kenya but it seems like the number of GBV either increases or remain constant.

WHO(2005) and Carrillo(1992) agree that development is clearly under threat when women are excluded from participating in, contributing to and benefiting from development initiatives and from political decision making at micro and macro levels since their participation is crucial to promote lasting change.

According to the United Nations report (2006) GBV undermines the eradication of extreme poverty and hunger, achievement of universal primary education, promotion of gender equality and empowerment of women, reduction of child mortality rates, improvement of maternal health, combating HIV/AIDS, ensuring environmental sustainability and developing global partnerships for development all of which require the active participation of all members of the society.

The National Crime Research Centre report(2016) argues that GBV will hinder the Kenya’s vision 2030. Vision 2030 is a long term development blueprint that seeks to transform Kenya into a newly industrializing middle income country providing a high quality of life to all its citizens in a clean and secure environment. The plan is anchored on three pillars, economic, social and political governance. The economic pillar aims to achieve an economic growth rate of 10% per annum and sustaining the same till 2030 in order to generate more resources to address
development goals. The social pillar seeks to create just, cohesive and equitable social development in a clean and secure environment. The political pillar aims to realize an issue based, people centred, result oriented and accountable democratic system. These aims cannot be efficiently achieved in an insecure social economic environment epitomised by GBV (GOK, 2011, IASC, 2005). Thus GBV need to be prevented and controlled. Where it has already occurred, survivors need to be rehabilitated and restored and perpetrators punished and corrected.

1.2 STATEMENT OF THE PROBLEM

According to Kenya Demographic and health Survey report 2014, National Crime Research Centre report 2016 and United Nations Population report 2013, Gender based violence cases continue rising or remain constant despite the efforts by government bodies, non government organizations, Faith based organizations etc. There is need to identify and analyse the social-cultural causes and motivations leading to Gender based violence. This research on the role of Faith based organizations in curbing gender based violence will provide an overall understanding of the problem and facilitate the preparation of appropriate strategies for combating gender based violence.

1.3 RESEARCH OBJECTIVES

The general objective of the study was to analyze the role of Faith Based Organizations in curbing Gender- Based Violence in Nairobi County, Kenya.

The specific objectives of the study were:

1. To examine the nature and status of Gender- based violence in Nairobi County, kenya.
2. To examine the role of faith-based organizations in curbing gender based violence in Nairobi County, Kenya.

3. To explore the challenges faced by FBOs in curbing gender violence in Nairobi county, Kenya.

1.4 RESEARCH QUESTIONS

1. What is the nature and status of gender based violence in Nairobi County Kenya?

2. What is the role of faith based organizations in curbing gender based violence in Nairobi county Kenya?

3. What are the challenges faced by faith based organizations in combating gender based violence in Nairobi county Kenya?
1.5 JUSTIFICATION OF THE STUDY

According to World health organization report (2005), socio-economic and cultural contexts are determinantal factors in the spread of GBV and they differ from place to place, countries, districts and even villages which results in different GBV stories and current profiles (Wasike & Waruta (1993). GBV has been an issue that has been seen to affect the growth and development of individuals in the country.

As a result of ‘years of neglect, political strife within countries and lack of resources’, Governments in these countries are unable or unwilling to provide basic services such as Education. Girls are particularly affected by lack of safe schools, increased violence, and disrupted social, economic and family structures. Today, girls account for 55 percent of the World’s out-of-school population. Education is widely considered a precondition for development and a key to promote lasting peace and stability (UNICEF, 2003). Provision of education on gender based violence will assist in its reduction and this study will provide scholars with the relevant literature especially involving the role of faith based organizations in curbing gender based violence.

The starting principles for addressing GBV are contained in the Kenyan Constitution. Article 8(1) state that “The dignity of all persons shall be inviolable,” and Article 8(2) (b) states that “No person shall be subject to torture or to cruel, inhuman or degrading treatment or punishment.” Article 10 stipulates that “All persons shall be equal before the law,” and that “No persons may be discriminated against on the grounds of sex, race, color, ethnic origin, religion, creed or social or economic status.” In addition to the Constitution, Kenya is a signatory to the international and regional instruments which have a bearing on GBV, and has brought into force a number of national policies and laws to combat GBV (Ndung’u: 2011). The evidence of intent and consistent
research on ways and means of combating gender based violence, will ensure that gender based violence is reduced in the Kenyan society.

The Role of Religious Communities in Addressing Gender-based Violence was designed and implemented by Futures Group International and Religions for Peace. Recognizing the importance of collaborating to prevent and reduce gender-based violence (GBV) among women and girls, the research will improve the capacity of religious leaders and faith-based organizations (FBOs) to respond to GBV. FBOs, religious communities and, in particular, religious leaders, are often key catalysts for positive social change. Religious leaders are key stakeholders in responding to health and social issues and can play an influential role in validating and promoting best practices for preventing and reducing GBV in their communities.

Some studies have been carried on the role of NGOs and the government in combating gender based violence. However, literature on critical role of FBOs in reducing gender based violence in the society has not been adequately covered. This study therefore will attempt to fill the existing literature gap by providing extra knowledge to the existing pool of knowledge. It will become a resource that can be used by scholars and other policy makers who are interested in playing different parts in reducing gender based violence.

1.6 SCOPE AND LIMITATIONS OF THE STUDY

The study was conducted from September to December 2015 in Nairobi County Kenya. The study will be based on four faith-based organizations; fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa, Amani Communities Africa, Muslim Advocacy Network Against Domestic Violence and Circle of concerned African Women Theologians whose headquarters are in Nairobi and their contributions in curbing gender based violence in Nairobi
county Kenya respondents targeted for the study were leaders and members of faith-- based organizations, survivors of gender based violence and provincial administration officials. The data collected from the respondents was very valuable owing to their knowledge and experience on the subject under investigation.

**Limitations of the study**

Gender- based violence is a very sensitive issue. Many respondents were not willing to speak about it. The researcher persistently utilized all communication avenues and assured the respondents that the information received from them will be confidential and that their names will not be printed out. Some FBOs leaders were not comfortable even after assuring them that the purpose of the research is to enhance and improve on the work they are involved in. Some respondents kept on postponing the date of the interviews but the researcher was patient with them until the interviews were carried out. There was the limitation of financial resources but the researcher mobilized all available resources and carried out the research.

**1.7 CONCLUSION**

Chapter one has laid the broad introductions for the study by discussing the background to the study followed by the statement of the problem leading to the isolation of the three main objectives and the three corresponding research questions for the research. The chapter has also discussed the scope of the study and the limitations encountered in the course of conducting the study. The chapter concludes with the setting out of the significance and benefits that will follow from the study findings and recommendations. Chapter two sets out to review literature on the subject of study.
CHAPTER TWO---LITERATURE REVIEW

2.1---DEFINITION OF GENDER BASED VIOLENCE

Gender Based Violence is an umbrella term for any harmful act that is perpetrated against a person’s will and that is based on socially ascribed (gender) differences between men and women. Gender-based Violence (GBV) describes the specific type of violence that is linked to the gendered identity of being a woman or man (Baker, 2007). Gender refers to the socially constructed roles, behaviour, activities and attributes that a particular society considers appropriate for men and women. The distinct roles and behaviour may give rise to gender inequalities, that is, differences between men and women that systematically favour one group. In turn, such inequalities can lead to inequities between men and women in both social, economic and political status and relationships. Thus the weaker gender is rendered vulnerable to domination and exploitation by the more powerful one (Baker, 2007). Such domination and exploitation may be symptomized in limited access to social goods like health, education, security, nutrition as well as victimization from violent and non-violent sexual and non-sexual offences against the person. Acknowledging that the most common victim of GBV is the female gender, the World Health Organization (WHO, 2005) observes that for women in many parts of the world, violence is a leading cause of injury and disability, as well as a risk factor for other physical, mental, sexual and reproductive health problems. GBV takes form in a variety of behaviour including physical, mental, or social abuse (UNHCR, 2000) and sexual abuse and harm (UNFPA, 2003).

According to (UN-GA, 1993), the United Nations General Assembly presented a partial list of GBV which included:- Physical, sexual and psychological violence within the family, Child sexual abuse, Dowry-related violence, Marital rape, Female genital mutilation, Rape and sexual
abuse, Sexual harassment in the workplace and educational institutions, Trafficking in women, Forced prostitution. A significant characteristic of GBV is that the victim has no choice to refuse or pursue other options without severe social, physical, or psychological consequences owing to the fact that it is rooted in a society’s social structure, that is, the society’s nerve Centre or its system of norms, values and beliefs (UNHCR, 2000). It is also an important characteristic that GBV can be perpetrated by an intimate partner as well as a stranger, and within and outside the family and home environment.

Primarily, any form of violence is taken to mean physical aggression and physical or sexual harm. Any restriction of the freedom, independence or physical integrity of women and girls is a form of gender-based violence (GBV). This conforms to the definition as understood by the Declaration on the Elimination of Violence against Women (CEDAW) adopted by the UN General Assembly in 1979. For the purposes of this Declaration, the term "violence against women" means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life (UN, 1993).

The GBV social ill was one of the issues which led to the adoption of The Convention on the Elimination of All Forms of Discrimination against Women-(CEDAW), in 1979 by the UN General Assembly. In the same spirit one agenda extensively dealt with during the United Nations Fourth World Conference on Women held in Beijing China in 1995 was that of GBV. These initiatives point to the fact that, varied stakeholders have recognized the magnitude of the GBV problem, its effects on the victims and the utmost need to address it in all corners of the world.
The prevalence of GBV is underscored by such campaigns as the "The 16 Day Activism for No Violence against Women and Children". This is an international campaign which takes place every year from 25 November (International Day for the Elimination of Violence against Women) to 10 December (International Human Rights Day). During this time Governments and stakeholders run a 16 Day Activism Campaign to raise awareness on the negative impacts of violence on women and children and to act against abuse (Phillips, Barrasso, 2009).

Gender-based violence is a leading cause of girls and women’s death and incapacity globally. In addition to facing physical and psychological trauma and injury, Girls and women who suffer violence are at a higher risk of contracting sexually transmitted infections including HIV/AIDS. They may also face unintended pregnancies, adverse pregnancy outcomes and chronic health problems. Survivors of GBV often suffer rejection and further victimization from partners, family and community members due to the shame and stigma associated with such violations (Okioma, Kimani, 2007).

Adolescent girls are particularly vulnerable to sexual abuse and harassment in and around school settings. Bennet (2005)In a research study based in South Africa found that a third of men who raped girls under the age of 15 were teachers. The risk of school-related violence and exploitation deterred parents from sending their daughters to school and was also a reason why the girls dropped out of school. It is worth noting that GBV is so rampant in South Africa that four women are killed every day by their intimate partners (Njenga, 2001). Many children are still being married off in several African countries. All the reports around Africa point to the same conclusion; girls and women have been unacceptably subjected to gender based violence (Ibid)
Mutua (2009) notes that GBV takes place at all levels of society and within all social classes. In Kenya such violence is sexual, political, physical or criminal. He further notes that GBV is in the home, the workplace, on the street with strangers and all around us. He concludes that "Kenya has an epidemic of gender-based violence in all stages of one’s life. Mutua argues that GBV violence is experienced in all levels of existence as shown below.

**Pre-birth**

Battery during pregnancy, Unwanted pregnancy as a result of rape and other forms of coerced sex, HIV and other infections during rape and other forms of coerced sex, Unsafe abortions, Sex selection of unborn child, Disability resulting from difficult birth due to GBV, including fistula and other reproductive health complications

**Infancy and childhood**

The findings indicate that the most common types of GBV perpetrated against children are defilement, neglect and abandonment, Female genital mutilation/cut, child trafficking, child prostitution, child labour, disability

**Adolescence**

Emotional/physical/sexual abuse, Sexual harassment, Early marriage, Female genital mutilation, Trafficking, Forced prostitution, Denial of access to resources, date rape, Disability
Productive/ Reproductive age

Battery, Marital rape, Abuse on account of dowry, Denial of access to resources

Workplace sexual harassment, Disability.

Elderly

Abandonment and neglect, Battery, Coerced distribution of resources, Murder

Power and power differences, translate directly into explicit and implicit expectations of gendered behaviour—called roles, scripts, and norms—which in turn are associated with GBV. Gender roles are socially shared expectations about behaviour that apply to individuals on the basis of socially identified sex. For any given person, gender roles exist as abstract knowledge structures about groups of people. For instance, as men are more likely to occupy roles that wield power, individuals often expect and socialize males to behave in dominant, assertive manners. As women are more likely to occupy roles as caretakers, individuals often expect and socialize women to be passive, communal, and responsive (Anderson, John, Keltner, and Kring, 2001). Societal gender roles have been linked directly to GBV, serving to justify behaviour or define relationships. Interview studies have revealed that men who beat their wives justify the violence by citing —unwifely—behaviour (Anderson and Anderson, 2008). Other scholars conclude that masculine gender roles have become defined in part by sexual access to and dominance over women. Indeed, research has shown that —sex role stress,— that is, when men feel they are inadequately meeting prescribed masculine gender roles, predicts sexual aggression (Koss, Goodman, Browne, Fitzgerald, Keita and Russo, 1993). Closely related to gender roles, gendered scripts are essentially roadmaps for behaviour considered appropriate for men and women. In gender-polarized societies, scripts for men and women rarely overlap (Bem, 1993). Koss et al (1993) cite studies of sexual scripts among middle school through college aged students showing that, for example, 25 percent of
boys believed that if a man spends money on a woman, then it is acceptable for him to force her to have sex. Gendered scripts are often reflective of social norms: socially shared perceptions of where a social group is or ought to be on some dimension of attitudes or behaviours. Descriptive norms (where the group is) imply a perceived consensus about a descriptive pattern of behaviour (for example, —in our group, men typically hit their wives ), whereas injunctive norms (where the group ought to be) imply a perceived consensus about a prescribed or proscribed behaviour (for example, —in our group, hitting your wife is not acceptable ) (Fitzgerald and Ormerod, 1993). Research has identified norms supporting the acceptability of GBV across a variety of group settings, including workplaces, and the military (Russell and Frohberg, 1995). Social norms influence behaviour when they are made salient by situational features, often through media. For example, a television or radio program depicting relationships between spouses can reinforce descriptive norms of spousal abuse by featuring a husband abusing his wife. Exposure to sexual violence in popular movies leads many men to become less bothered. War and general instability in the East and Central African region continues to catalyse the occurrence of GBV. For instance, in the Democratic Republic of Congo, UNFPA (2008) reported 15,996 new cases of sexual violence in 2008. The report also indicated that 19 percent of 1,575 Burundian women surveyed in 2004 had been raped; 40 percent had heard about or had witnessed the rape of a minor. According to UNFPA (2003) study, one in three women in rural Uganda are subject to verbal or physical threats from their partners, while 50 percent of those women who have been threatened subsequently receive injuries. Beating a female partner was viewed as justifiable in certain circumstances by 70 percent of the male respondents and ninety percent of the female respondents. (jenga, 2001). On the other hand, Mutua (Ibid) notes that wife-battery; wife-murder, rape and other forms of gender-based violence are possible because men see themselves in a superior-subordinate role towards women,
A 2010 Amnesty International study showed that more than half the women in slums had experienced physical, sexual or psychological violence. The report found that perpetrators of these abuses included youth gangs, intimate partners, family members, employers and security personnel. The study was conducted in four slums of Nairobi between November 2009 and February 2010 (CREAW, 2009)

2.2.----GENDER ROLES

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2.3---RISK FACTORS OF GENDER BASED VIOLENCE

Studies conducted on GBV have concluded that there is no single path to GBV and that the risk factors are varied and intertwined (NCRC, 2016). In particular, there are four categories of risk factors responsible for GBV in society and include:

i. Individual risk factors, which are social and demographic factors including age, gender, marital status etc.

ii. Relationship risk factors, which are interactional factors such as interpersonal conflict, marital conflict, peer pressure etc.

iii. Community risk factors, which are situational factors including economic deprivation, prevalence of violence or of organized criminal groups etc.

iv. Societal risk factors, which are macro level predisposing factors such as prevalence of norms and values determining asymmetrical power relations between men and women, general social change in statuses and roles etc.

2.4 GENDER-BASED VIOLENCE IN KENYA

According to statistics, 45% of all women in Kenya have faced one form of violence or another at one or more stages in their lives (Musoga, 2008). In some regions in Kenya, the statistics indicate that 90% of women have experienced physical, sexual or emotional violence. Compiling the report on violence against women and children in Kenya, Musoga notes that women are violated by both state officials and non-state actors. They are violated at all stages of their lives that is during their childhood, adolescent stage and adulthood. They are violated at home, schools, colleges, work places. According to Musoga (Ibid), gender based violence is a serious and persistent issue in Kenya. Persistence of certain cultural norms, traditions and stereotypes as well
as discrimination regarding the role of women in the society perpetuates violence against women in Kenya. This violence can be loosely classified as physical such as assault, rape, murder, female genital mutilations/cut, sexual harassment, trafficking, bullying and psychologically in terms of verbal abuse, exclusions, discrimination on the base of gender.

According to the committee on the elimination of discrimination against women (CEDAW, 2004) Kenyan authority has not yet taken sustained and systematic action to modify or eliminate stereotypes and negative cultural values and practices. Most GBV remains unreported and unpunished. Although Kenya has signed and ratified the convention on the elimination of all forms of discrimination, committed herself to the Beijing Declaration and platform for action and also signed security council resolution 1325(2000) on women, peace and security and the African Union Solemn Declaration on Gender and Equality(2004), she has done little in the implementation of these conventions.

According to Ndung’u (2011) Global trends have shown that in the last twenty years governments have made deliberate efforts to increase women’s representation in law and policy making. These initiatives are informed by the direct linkages between discrimination against women and all its associated elements such as GBV and other gross violations of women’s rights, and the under representation of women with a political voice and power to address these injustices through a legislative framework. Most Governments have now included affirmative action in their constitutions or political party policy to ensure that women’s voices can be translated into formal action through legislation.

Ndung’u(Ibid) argues that despite these legislation and very promising clauses in the Kenya’s constitution, Kenya remains one of the most paternalistic societies in Africa. This creates a conducive environment to any advocacy work or lobbying on issues of women emancipation. In
her article, preventing and responding to violence against women and girls, she notes that Domestic and sexual violence were the leading crimes in Kenya by 2005 (Ndung’u, 2005). She however notes that there were hardly any successful prosecutions of the perpetuators of these crimes for the law made it difficult for victims to testify or even prove especially on sexual violence.

The legal and policy instruments addressing GBV in Kenya are essentially the Constitution of Kenya 2010, the Sexual Offences Act 2006, the Penal Code and the United Nations Committee on the Elimination of Discrimination against Women (CEDAW) 1979. Other relevant instruments include the Prohibition of female genital mutilation Act 2011 and the Gender policy 2011 (KLRC, 2010; 2011). Chapter four of the Constitution consists of the Bill of Rights and has the following important provisions: Section 27 (1): Every person is equal before the law and has the right to equal protection and equal benefit of the law. Section 27 (2): Equality includes the full and equal enjoyment of all rights and fundamental freedoms. Section 28: Every person has inherent dignity and the right to have that dignity respected and protected. Section 30 (1): A person shall not be held in slavery or servitude. Section 30 (2): A person shall not be required to perform forced labour. The Sexual Offenses Act 2006 is a comprehensive law that criminalizes a wide range of behaviours including rape, sexual assault, defilement, compelled or induced indecent acts with child imbeciles or adults, gang rape, child pornography, child trafficking, child sex tourism, child prostitution, exploitation of prostitution, incest by male and female persons, sexual harassment, deliberate transmission of HIV or other life threatening sexually transmitted disease, stupefying with sexual intent, forced sexual acts for cultural or religious reasons among others. The Act also has orders for medical treatment for victims including free HIV prophylaxis, emergency pregnancy pill and counseling. The Act provides stiff penalties in which most of the crimes attract
minimum of ten years imprisonment which can be enhanced to life imprisonment. Considering the wide range of behaviours covered and the stiff penalties, the Act is definitely an important tool in combating sexual offences. International and regional legal policy frameworks have also sought to address gender based violence. Over the years, different bodies have been formed to monitor implementation of the international human rights treaties. The bodies have continually taken up States parties’ obligations to address GBV for example, in its general recommendation No. 19 (1992) on violence against women, the Convention on the Elimination of Discrimination against Women (CEDAW) recommended that States parties should ensure that laws against family violence and abuse, rape, sexual assault and other gender-based violence give adequate protection to all women, and respect their integrity and dignity. The Convention also urged states to take all legal and other measures that are necessary to provide effective protection of women against gender-based violence, including effective legal measures, including penal sanctions, civil remedies and compensatory provisions and to protect women against all kinds of violence. In addition, the prohibition of FGM Act 2011 seeks to prevent any girl circumcision as a harmful cultural practice while the gender policy 2011 seeks to promote interventions for the reduction of sexual and gender based violence and to promote the generation of sex disaggregated data to guide interventions (KLRC, 2011). In terms of the efficacy of the above legal and policy frameworks, it is reasonable to assert that ordinarily behaviour change is a process whose impacts may be realized in the short, medium and long term. However, the Kenya Demographic and Health Survey (KNBS and ICF Macro, 2010) indicated that about 45% of women aged 15-49 have experienced either physical or sexual violence. Specifically, the report reveals that 25 percent of women have experienced physical violence, 7 percent have experienced sexual violence, and 14 percent have experienced both physical and sexual violence. The KDHS report
(Ibid. 2010) also indicated that 3% women had perpetrated physical violence against their husbands or partners. The Police Annual Crime Report showed an increase of 8% in rape cases, 19% in defilement cases and 22% in cases of incest (GoK, 2010). Sexual violence and general vulnerability like weak capacity to negotiate sex are key factors limiting the ability of women and girls to prevent HIV/STI transmission. This is undermining Kenya’s progress towards achieving its national HIV targets. At the same time, CSA (the Centre for the Study of Adolescence) (2008) reported that between 10,000 and 13,000 girls dropped out of school annually due to pregnancy. The foregoing shows the need for vigilance by all stakeholders in enforcement of laws and policies for effective management of GBV. As to the specific impacts of the laws and policies concerned, that is an empirical question suitable for further study.

2.5 GENDER-BASED VIOLENCE IN AFRICA

GBV is a common factor in many countries in Africa. In a 2002 survey across eight countries (Botswana, Lesotho, Malawi, Mozambique, Namibia, Swaziland, Zambia and Zimbabwe) it was found that 18% of women aged 16–60 years had experienced GBV in the past 12 month (CIET, 2007). In a repeat survey across the same countries in 2007, 18% of women had experienced GBV in the last 12 months; one in every five youths aged 12–17 years said they had been forced or coerced to have sex, and one in 10 said they had forced sex on someone else (Ibid) The inability to implement prevention choices (‘choice disability’) affects a greater proportion of the population. Some 40% of women across the 10 countries said they would have sex if their partner refused to use a condom, and a similar proportion did not think women have the right to refuse sex with their partner (Ibid).
Among women interviewed in three provinces of South Africa, 19–28% said they had experienced GBV and 5–7% had been raped. In another survey 42% of women in a Cape Town township reported sexual assault (Ibid). In Rakai district in Uganda, one in every four women reported coercive sex with their regular partner (Ibid). The World Health Organization multicounty study on domestic violence included estimates from Namibia and Tanzania. The proportion of women who had ever experienced physical or sexual violence was 36% in Namibia (capital), 41% in Tanzania (capital), and 56% in Tanzania (district) (Ibid).

In one of the studies done among young women aged 13–24 years in Swaziland, one in three women had experienced some form of sexual violence (including forced sex, coerced sex, and attempted unwanted sex) as a child; one in four had experienced physical violence; and three in 10 had experienced emotional abuse (Ibid). These high rates of GBV among both adults and children in Africa are in the context of a culture of violence in most of African regions.

2.6 GENDER--BASED VIOLENCE--GLOBAL SITUATION

Intimate partner violence is the most common form of violence experienced by women globally. As noted previously, gender-based violence can also take the form of harmful traditional practices. Children are particularly vulnerable to violence, especially sexual abuse. According to the United Nations Population Fund (UNFPA, 2003), almost 50 percent of all sexual assaults worldwide are against girls 15 and younger. In 2002, 150 million girls and 73 million boys under the age of 18 years experienced forced sexual intercourse or other forms of sexual violence. Sexual violence is also often used as a tactic of war during conflicts. In the context of humanitarian crises and emergencies, civilian women and children are often the most vulnerable
to exploitation, violence, and abuse because of their gender, age, and status in society. Women with a disability are two to three times more likely to suffer physical and sexual abuse than women with no disability. Lesbian, gay, bisexual, and transgender (LGBT) persons also face heightened risk. Although statistics on the prevalence of violence vary, the scale is tremendous, the scope is vast, and the consequences for individuals, families, communities, and countries are devastating (Ibid).

Globally, the United Nations has a strong interest in preventing and responding to gender-based violence around the world. Regardless of the form that gender-based violence takes, it is a human rights violation or abuse, a public health challenge, and a barrier to civic, social, political, and economic participation (Ibid). It is associated with many negative consequences, including adverse physical and mental health outcomes, limited access to education, increased costs relating to medical and legal services, lost household productivity, and reduced income. Gender-based violence undermines not only the safety, dignity, overall health status, and human rights of the millions of individuals who experience it, but also the public health, economic stability, and security of nations. Gender-based violence cuts across ethnicity, race, class, religion, education level, and international borders. An estimated one in three women worldwide has been beaten, coerced into sex, or otherwise abused in her lifetime.

A key aspect of ecological models is that they illustrate the interrelated nature of the risk factors at various levels. Individual-level risk factors for intimate partner and sexual violence are personal characteristics, but they can also occur within families, communities, and the larger society. Many of these factors are associated with both perpetrators and victims of violence, but some are specific to one or the other. The relationship level of the ecological model explores how close
relationships such as those between peers, family members, and intimate partners increase the risk for perpetrating or experiencing GBV. Proximal relationships typically involve repeated interactions on a daily or frequent basis, giving peers, intimate partners, and family members the ability to shape an individual’s behavior and experiences (Krug, 2002). At the broadest levels, communities and the larger society have characteristics that exert a great deal of influence over the behavior of those who live in them.

Given its range and magnitude, GBV is a form of human rights abuse that has few rivals. There is abundant evidence that GBV is endemic to communities around the world, affecting people of every class, race, age, religion, and national boundary, although to varying degrees and in different ways. While systematic data is not available in all countries, a WHO multi-country study found that between 15–71% of women reported experiencing physical and/or sexual violence by an intimate partner at some point in their lives (WHO, 2011).

GBV spans the lifecycle and begins early. Nearly one third of adolescent girl’s worldwide report that their first sexual experience was forced and almost half of all sexual assaults are against girls 15 years or age of younger (UNICEF, 2009). Socialized into the gender roles of their specific cultures, women and girls often hold beliefs that support their oppression through GBV.

Worldwide, approximately 100 to 140 million girls and women have experienced female genital mutilation/cutting, with more than 3 million girls in Africa annually at risk (UN women, 2011). In Sub-Saharan Africa,14.1 million girls are child brides, married before the age of 18 (UN Women, 2011). In a 2007 survey across eight countries (Botswana, Lesotho, Malawi, Mozambique, Namibia, Swaziland, Zambia and Zimbabwe) 18% of women aged 16-60 years had experienced intimate partner violence in the past 12 months; one in every five youths aged 12-17 years said
they had been forced or coerced to have sex, and one in 10 said they had forced sex on someone else (CIET, 2007).

2.7 CAUSES OF GENDER-BASED VIOLENCE

The causes of GBV are complex and occur at different levels of society: individual, relationship, and community. By examining the relationship between the individual and contextual factors that influence behavior, an ecological model illustrates the necessity of a comprehensive, multilevel approach to eliminating GBV; it cannot be eliminated by simply implementing interventions at one level of risk, as other levels will continue to support violent behavior if not simultaneously addressed (WHO, 2003).

Individual level risk factors are elements of biological or personal history that influence a person’s behaviors. These can include biological factors, demographic factors, psychological characteristics, and past experiences that increase the likelihood that a person will be a perpetrator or victim of violence. Risk factors common to both intimate partner violence and sexual violence include low levels of education, exposure to child maltreatment, witnessing parental violence, antisocial personality disorder, substance abuse, multiple partners/infidelity, and attitudes accepting of violence (WHO, 2011).

The unequal power relations between females and males in society are the root cause of gender-based violence. According to Betron and Doggett (2006), the abuse of power and gender inequality is at the core of GBV. Power relations have been critical in fuelling GBV, although erroneously advocated as normal and acceptable based on traditional and customary attitudes and practice. Other factors can only be legitimately viewed under the scope of these power relations. In other words, other factors cannot suffice on their own without reference to unequal power relations. In a quest to bring to light the primal cause
of CBV, the UNHCR (2007) report suggests that other factors only exacerbate these unequal power relations. In fact, in most cases, these other factors only determine the type and extent of violence.

The other factors may be classified differently depending on the perspective taken. In this study however, the factors viewed by and large include socio cultural causes, policy and legal frameworks as well as institutional factors. The social and cultural factors to a great extent help explain the legitimization of the unequal power relation function while legal, economic and Institutional challenges may explain the extent and sustenance of GBV in any given context.

2.7.1 SOCIO-CULTURAL FACTORS

While some literature uses power relations and socio-cultural factors interchangeably, the two are inherently distinct in that while power relation has to do with psychological positioning, the latter has to do with the perpetuators of this positioning. With this understanding, factors like the patriarchal nature of most societies would then help explain the existence and extent of unequal power relations. In these societies, there is legitimized subordination of women, which includes the treatment of women as the property of men through practices such as payment of bride price. This, in turn, perpetuates violence against women and girls (CREAW, 2009).

The socialization process is such that the female gender is relegated to positions, functions and roles that are viewed as inferior and by extension suitable for the bearers of these aspects (IRIN, 2004). In other words, females are perceived as, and socialized to believe that they are weak, inferior and needing direction, guidance and discipline. In other cases, they are socialized to believe that they exist for the sole purpose of satisfying
men's needs and desires (Long, 2001). Males, on the other hand, are socialized to demand and expect services from women and to treat them as inferior (Njenga, 2001).

Traditions, customs, beliefs and attitudes are used to justify the subordination and violation of women's rights (El Jack, 2003). According to Bennet, (2005) women are the gatekeepers of the traditions, customs, practices and attitudes passed on through generations. Those who do not toe the line are ostracized by society and endure violence of different types. The powerlessness of women is worsened by their general lack of exposure, illiteracy and low education, which also limits their choices to a better life.

2.7.2 POLICY AND LEGAL CONDITIONS

Lack of access to legal services, justice and protection for victims is a major hindrance to actualization of women's rights (Krug, 2003). Inaccessibility to these services makes it difficult even for the willing to make headway while the perpetrators of violence often go unpunished. Some of the laws as well as the poor justice implementation structures make the victims of violence feel left out and even in some cases traumatized in the pursuit of justice. On the other hand, the level of commitment by some governments to the implementation of the international commitments is not sufficient (Mezieobi, 2004). For most countries, the spirit and letter of the said commitments goes only as far as the ink of the appended signatures reaches.

In most countries, national constitutions provide for the equal rights of women and men. However, in some cases, there is a disconnect between the existing laws and policies and the constitutions of the respective countries(Ibid). This disconnect invariably requires certain amendments to allow for conformation. The challenge arising from this regards the pace of amendments which has itself become a major constraint to achievement of equality.
between the females and males. Equally, the law reform processes are dependent on the support of law makers, most of who are men and whose commitment to support the gender equality agenda cannot be guaranteed. Experience from several countries has demonstrated that women cannot expect much from these legislative institutions (Judith, 2004).

There are no laws governing domestic violence in most countries. The law enforcement agencies, including the police and the judiciary, largely rely on penal provisions relating to assault and battery to fill the gap, inadequate as they are in dealing with the seriousness of the problem. In matrilineal and patrilineal societies alike, men are the key architects and custodians of customary law and authority as well as government policies and programmes. The absence of women from decision-making positions is a major factor contributing to the negative policy and political environment, which perpetuates or at least tolerates violence. Most governments only pay lip service to the global commitments to eliminate violence and often sign conventions and covenants they have no intention of implementing (UNIFEM, 1998).

2.7.3 INSTITUTIONAL FACTORS
In most countries there are few, if any, victim support services. Even where they exist, the services are far away and victims cannot easily or cheaply access them. Long distances from courts, health facilities and police stations are a major obstacle to combating gender-based violence. According to Ahmadu (2000), most settings especially the rural areas, chiefs, religious as well as community leaders are the only link to any form of justice for victims of GBV and other crimes. These positions are invariably occupied by men who are heavily influenced by the patriarchal culture which ultimately becomes the definition of social justice. For instance, among the Somalis, the incidents of
domestic violence or rape are in most cases reported to the Maslaha courts. All the Maslaha members are usually men and even when judgments are passed, the victim is never at the center of their consideration. Restitution for lack of a better word is done to the members of the Maslaha rather than to the victim of violence. With such institutions, the challenge of GBV remains deeply rooted in the communities.

2.8 EFFECTS OF GENDER--BASED VIOLENCE

Gender based violence affect girls and women in various environments. In this study the consequences are grouped into three categories economical, health and social. UNICEF (2000) captures the situation in a report on GBV and states that GBV against girls and women continues to be a global epidemic that kills, tortures, and maims physically, psychologically, sexually and economically. The report further emphasizes that GBV is one of the most pervasive of human rights violations, denying girls and women equality, security, dignity, self-worth, and their right to enjoy fundamental freedoms.

2.8.1 ECONOMIC CONSEQUENCES

Female-focused violence represents a hidden obstacle to economic and social development. By sapping women's energy, undermining their confidence, and compromising their health, gender violence deprives society of women's full participation. As the United Nations Fund for Women (UNIFEM) observed, "Women cannot lend their labour or creative ideas fully if they are burdened with the physical and psychological scars of abuse" (UNIFEM, 1999)

The potential psychological effects of a GBV incident include lowered self-esteem, difficulty with interpersonal relations, increased stress, depression, frustration, and
anxiety. Those who have encountered GBV display common coping strategies i.e. indirect expression of anger, denial or minimization of the incident, and compliance; as well as feelings of powerlessness, aloneness, fright, humiliation, and incidence of posttraumatic stress disorder (Dobash and Dobash, 2007).

GBV is also a serious development concern. Development is not simply the pursuit of economic growth but the linking of economic growth to indicators of social justice and individual well-being. The UNDP defines development as the "enlargement of choices," and the improvement of women's individual agency is essential to this. Therefore, at the most fundamental level, GBV contradicts the goals of development (UNDP, 2010).

GBV also undermines development outcomes, because it depletes resources and has various direct and indirect economic and social costs. Sash (2007) identify direct costs such as medical, criminal justice, social services as well as non-monetary costs such as increased homicide, suicide, alcohol/drug abuse, depressive disorders. For example, in the United States, the health related costs of rape, physical assault; stalking and homicide by intimate partners are more than $5.8 billion every single year (UNIFEM, 2003)

World health organization Research(2005) identified larger economic consequences of GBV such as loss of productivity, decreased investment and social impacts such as intergenerational transmission of violence, reduced quality of life, reduced participation in democratic processes (Burton, 2000). Violence and the threat of violence have been found to significantly reduce women's and girl's opportunities for work, their mobility and their
participation in education, training, community activities and wider social networks. Fawole, and Osungbade (2003), in Mexico a study found that a major reason why women stopped participating in development projects was due to men's threats (Heise, 1999).

2.8.2 HEALTH CONSEQUENCES
Health consequences of GBV take various forms. First there are physical and reproductive consequences such as, injury, diseases, gastrointestinal problems, infections, gynaecological disorders, unwanted pregnancy, menstruation disorders, pregnancy complications, sexual disorders, unsafe abortion and miscarriage among others. There are also emotional and psychological effects including post-traumatic stress disorders, mental illness, suicidal thoughts and behaviours, shame, insecurity, self-hate and self-blame.

According to USAID (2006) the impact of gender-based violence resonates in all areas of health and social programming: survivors of GBV experience increased rates of morbidity and mortality, and violence has been shown to exacerbate HIV transmission, among other health conditions. Fawole,(2003) did a study on prevalence and nature of violence among young female hawkers in motor-parks in south-western Nigeria. He found that the women who had undergone any form of GBV were physically injured or had suffered mental torture. The study found that victims usually have scars and in the severe cases such as where acid was used in the attacks the physical appearance of the victim was altered completely. The study also noted that there were instances of death though they could not be traced directly to the GBV.

Regarding the issue of female genital mutilation/cutting (FGM/C), the consequences include stress, fear, extreme shock, heavy bleeding and sometimes death. This is complicated like in the case of Somali women who are stitched. Brady (2001) indicated
that depending on the type of excision made, cutting the tip of the clitoris or removal of the clitoris as well as the minor and major labia - women end up suffering complications during their menstrual period, during marriage and at childbirth. Carr (2007) also found that as the stitching done during FGM leaves only a small opening, this often results in complications that can lead to infections during the menstrual period and at times a woman has to undergo surgery upon marriage to re-open the vagina. Even during childbirth, surgery must be performed and this can lead to the baby's or woman's death where surgery is not easily available.

2.8.3 SOCIAL CONSEQUENCES
Morrison (2004) observes that GBV leads to social consequences including social stigmatization, social rejection and isolation, loss of roles/functions in society, the blaming of the victim, feminization of poverty and increased gender inequality. All these consequences have led to an increase in maternal morbidity.

GBV has an impact on young girls in social, family and school settings. It is only through the studies presented in the foregoing discussions that we can assess the impact of gender violence against girls. They suggest that violence against girls is an important cause of poor performance and dropout in schools, although it is difficult to establish cause and effect. The study by Dunne (Leach, 2003) on the impact of violence experiences on retention and achievement found that violence against girls, in the form of sexual intimidation, verbal abuse and physical assault was a significant contributor to irregular attendance and underachievement of girls in school and extra curricula activities.
The United Nations Fourth World Conference on Women held in Beijing in 1995 observed that violence against women is an obstacle to the achievement of the objectives of equality, development and peace in the society. It was further noted that GBV against women both violates and impairs or nullifies the enjoyment by women of their human rights and fundamental freedoms (Morrison, 2004).

Domestic violence has been found to cause untold suffering on the victims of the violence especially the mother and this in turn affects the relationship with the children. In most cases as observed domestic violence leads to family breakdown. According to Njenga (2001) this situation is confirmed by the high number of households which are having single parents. This is because in the long term abusive relationship ends up in separation or in extreme cases deaths.

2.8.4 - POLITICAL IMPLICATIONS
According to NCRC report (2016) GBV has adverse effects on the person’s functioning which ultimately affects the community, country and the world at large. UNFPA (2008) agrees that GBV kills and disables more women aged 15-44 years than does cancer, malaria or even traffic accident. UNFPA explains that immediate effects of GBV include poor health, lowered social participation and economic productivity among others.

Physical abuse may lead to pregnancy complications like miscarriage, placental abruption, premature delivery, low birth weight and fatal or infant death (UNFPA 2008). NCRC(2016) agrees that the consequences of sexual abuse on reproductive health includes sexually transmitted diseases and infections including HIV/AIDS, unwanted pregnancy, unsafe abortion, pelvic inflammatory disease, infertility and genital injuries including obstetric fistula. The report shows that when a woman is not able to seek proper health care in the period surrounding pregnancy or
after physical abuse, the consequences can be fatal. The CREAW report (2008) gives the psychological consequences of GBV as post-traumatic stress syndrome, depression, anxiety and low self-esteem which can lead to alcohol and drug abuse, risky sexual behaviour and victimisation.

According to CREAW (Ibid) these outcomes are evident in Kenya where women who suffered during the post-election violence are still enduring similar symptoms. Children who were affected by the post-election violence were also found to suffer from some form of anxiety compared with children who grew in peaceful environment (Ibid). Morrison and Orlando (1999) adds that GBV undermines livelihood strategies and economic alternatives and this impoverishes the family. Morrison and Orlando(1999) argues that this has been evidenced in studies elsewhere such as Nicaragua where violence limits women’s ability to maintain a job.

GBV at community level can be regarded as a new form of subjugating the population and limiting freedom of movement through the use of terror in particular in relation to women and such impedes progress in participation and peace building(Morrison and Orlando, 1999). Carrillo(1992) agrees that a lasting consequences of the internal armed conflict has been the dissolution of social capital and community network as these have been replaced by mistrust and pervasiveness at local and national levels. He argues that in this regard, affected women and their families become isolated as violence hinders their participation in their community’s social, political and economic life. Carrillo concludes that GBV exerts considerable economic impacts and therefore takes its toll on the state.

In 2005, according to conservative estimates, violence cost the state the equivalent of 7.3% of GNP based on costs incurred in the health sector and the justice system as well as lost investment

According to Carrillo (1992) GBV is felt in all sectors. It burdens the health and security systems diverting funds from the National budget allocation to primary health and education. In terms of macro-level economic production, GBV erodes human capital and accounts for a loss of productivity from both paid and unpaid work as well as foregone value of life times earning on the part of women who have died. Carrillo continue to argue that GBV further undermines and destabilizes democracy building, good governance and promotion and defence of human rights. He shows that at institutional level, it destabilizes the state, reducing citizens’ confidence in government authorities and institutions. It renders it more difficult for government to build a truly democratic and legitimate state and accomplish one of the main duties that is protecting the life and development of citizens.

WHO (Ibid) and Carrillo (Ibid) agree that development is clearly under threat when women are excluded from participating in, contributing to and benefiting from development initiatives and from political decision making at micro and macro levels since their participation is crucial to promote lasting change.

According to the United Nations report (2006) GBV undermines the eradication of extreme poverty and hunger, achievement of universal primary education, promotion of gender equality and empowerment of women, reduction of child mortality rates, improvement of maternal health, combating HIV/AIDS, ensuring environmental sustainability and developing global partnerships for development all of which require the active participation of all members of the society.
The National Crime Research Centre report (2016) argues that GBV will hinder the Kenya’s vision 2030. Vision 2030 is a long term development blueprint that seeks to transform Kenya into a newly industrializing middle income country providing a high quality of life to all its citizens in a clean and secure environment. The plan is anchored on three pillars, economic, social and political governance. The economic pillar aims to achieve an economic growth rate of 10% per annum and sustaining the same till 2030 in order to generate more resources to address development goals. The social pillar seeks to create just, cohesive and equitable social development in a clean and secure environment. The political pillar aims to realize an issue based, people centred, result oriented and accountable democratic system. These aims cannot be efficiently achieved in an insecure social economic environment epitomised by GBV (GOK, 2011, IASC, 2005). Thus GBV need to be prevented and controlled. Where it has already occurred, survivors need to be rehabilitated and restored and perpetrators punished and corrected.

2.9 COMBATING GENDER BASED VIOLENCE

Several institutions including USAID have been on the forefront of fighting GBV in Kenya and have come up with programs which are committed to prevent this type of violence by working towards increasing access to justice and integrated support services and creating public awareness about GBV. According to NCRC (2016) two types of interventions are needed to combat GBV. The primary intervention which seeks to prevent GBV occurrence by targeting social norms or through educational outreach. These programs focus on societal and situational factors. Secondary intervention is used to address GBV once it has occurred. It include barterer intervention program, couples therapy, programs to increase help seeking behaviour by targets, civil protective orders, criminal sanctions etc
According to Black and Weiss (2008) the exaggeration of gender roles by youth and adolescents is hypothesised to increase the risk of dating violence and therefore should inform the design of primary interventions in schools. These could be a school based intervention program targeting every adolescent. They argue that other curricula could target adolescent attitudes, specifically those that may justify use of aggression. These views are supported by Cascadi and Cano (1997) who argue that by changing perceptions of norms of masculinity, the program hopes to encourage more gender equitable behaviour and attitude among participants. These interventions uses social modelling techniques to communicate gender equitable social norms and to transfer relationship skills in peer to peer educational sessions.

Ajzen (1991) argue that in some settings, programs also target men outside these small sessions using media campaigns such as radio transmissions and billboards. Such programs target potential targets of violence seeking to help them avoid future violence. According to Brecklin (2008) primary preventive strategy is to reduce rape and sexual assault among adults in the country. Palluck (2009) adds that social norms affect behaviour change more dramatically than personal attitude. Social norms can sustain GBV rooted in community customs including FGM/C. He shows that even when families oppose FGM/C, they may have their daughters go through it because they perceive that other community members view it as normal or desirable or because they believe their daughters chances of marrying will be reduced by foregoing FGM/C.

Palluck (Ibid) argues that media’s power to influence gender norms has been demonstrated in studies examining instances in which media depicted widespread adoption of different gender roles and responses to GBV. Scheepers (2001) agrees that viewing TV programs that depict neighbours and family members rejecting domestic violence was correlated with a decreased likelihood that survey respondents defend or approve of domestic abuse. Edutainment (integration
of educational messaging with popular entertainment) is a common form of social norms marketing. Jensen and Oster(2009) agrees that edutainment is one of the best ways of reducing GBV.

Legal methods can also be used to curb GBV in Nairobi County Kenya. GBV is a crime and a moral indignation as provided and envisioned in the Kenyan legal system(KLRC, 2010). GBV violates the penal code and is a violation of the constitutional rights of a person. The legal and policy instruments addressing GBV in Kenya are essentially the constitution of Kenya 2010, the sexual offences acts 2006, the penal code and the United nations committee on the Elimination of Discrimination against Women(CEDAW,1979). Other relevant instruments include prohibition of FGM/C act 2011 and gender policy 2011(KLRC, 2010)

Chapter four of the constitution consists of the bill of rights and has the following important provisions in regard to GBV. Section 27(1) indicate that every person is equal before the law and has the right to equal protection and benefit of law. Section 27(2) indicate that equality includes the full and equal enjoyment of all rights and fundamental freedoms. Section 28 indicate that every person has inherent dignity and the right to have that dignity respected and protected. Section 30(1) indicate that a person shall not be held in slavery or servitude and 30(2) indicate that a person shall not be required to perform forced labour.

According to Ndung’u(2011) the sexual offence of 2006 is a comprehensive law that criminalizes a wide range of behaviors including rape, sexual assault, defilement, compelled and induced indecent acts with child imbeciles or adults, gang rape, child pornography, child trafficking, sex tourism, child prostitution, exploitation, incest by male or female, sexual harassment, deliberate transmission of HIV/AIDS, stupefying with sexual intent, forced sexual acts for cultural or
religious reasons among others. The act also has orders for medical treatment for victims including free HIV phylaxis, emergency pregnancy pill and counselling.

The act provide stiff penalties in which most of the crimes attract minimum of ten years imprisonment which can be enhanced to life imprisonment (Ibid). Considering the wide range of behaviour covered and the stiff penalties, the act is definitely an important tool in combating sexual offences. According to KLRC (2011) the gender policy 2011 seeks to promote interventions for the reduction of sexual and gender based violence and to promote the generation of sex disaggregated data to guide interventions. The foregoing shows the need for vigilance by all stakeholders in enforcement of laws and policies for effective management of GBV

2.10 FAITH-BASED ORGANIZATIONS

There is no single generally accepted definition of a faith-based organization. Different authors have given a number of definitions. In most cases the term faith-based organization is used broadly to encompass any religious institution or organization influenced by faith. According to the centre of Faith and Service (2003), a faith based organization can be a religious congregation (a mosque, synagogue, church or a temple) or an organization, programme or project sponsored or hosted by religious congregations. It can also be a body that is non-profit and founded by a religious congregation or religiously motivated incorporators or has a mission statement that is religiously motivated.

According to UNAIDS’ strategic framework of faith-based organizations are diverse in their forms, structures and outreach. In UNAIDS’ experience, it is possible to distinguish these communities based on the way that they operate at three main levels, that is the informal social groups or local faith communities, for example: local women groups or youths, second are the
formal worshiping communities with an organized hierarchy and leadership, for example major religious faith groupings (for example Sunni Islam, Theravada Buddhism or Catholic Christianity). Thirdly, the independent faith-influenced non-governmental organizations; for example: Islamic Relief and Tear Fund. These also include faith-linked networks such as the Ecumenical Advocacy Alliance, Caritas Internationalis, and World Conference of Religions for Peace and the International Network (UNAIDS 2009).

2.10.1 THE CIRCLE OF CONCERNED AFRICAN WOMEN THEOLOGIANS (CIRCLE)
Mercy AmbaOduyoye (the founder of the circle) describes the Circle as a community of African women theologians who come together to reflect on what it means to them to be women of faith within their experiences of religion, culture, politics and socio-economic Structures in Africa(Oduyoye,2011). Phiri(2004)adds that the Circle seeks to build the capacity of African women to contribute their critical thinking and analysis to advance current knowledge using a theoretical framework based on theology, religion and culture. It empowers African women to actively work for social justice in their communities and reflect on their actions in their publications(Phiri,Ibid). From the outset, the circle was inclusive in its membership and on the type of theology produced. African Women were defined as women who belong to diverse classes, races, cultures, nationalities and religions found on the African continent (Oduyoye, Ibid) In the Oduyoye’s article, the search for a two winged Theology, women’s participation in the development of Theology in Africa, moans the fact that women’s’ contributions in development, justice has been greatly ignored creating a lot of imbalances. Oduyoye argues that, it is in this context that the circle was created to recreate and retrieve women’s’ stories so that they can become an integral part of the story of the religion in Africa as a whole(Oduyoye Ibid).
Esther Mombo(2003) describes the circle as an ecumenical and interfaith body of African women Theologians who traces their background to such organizations as the Ecumenical Association of Third World Theologians (EATWOT), Ecumenical Association of African Theologians (EEAT) and the Conference of African Theological Institutions (CATI) (Mombo,2003). Members of the circle include women who belong to Christianity, Islam and Indigenous African Religions. Among Christians are Catholics, Protestants, conservatives, liberals and evangelicals. Irrespective of their differences, these women come together to form the circle to struggle together for just and humane systems (Ibid) concerning the underlying elements in the circle Mombo explains that, the circle shares with EATWOT as well as African Theology, the underlying assumptions that in any relevant theology, there should be a convergence between theory and practice and that such theology should also be from the perspective of the poor and the oppressed (Ibid).

The need to rediscover the dignity and respect of humanity is the basic aim of the circle (Ibid). This is a crucial factor that unites all circle members. Through their writings, the circle members bring to light the fact that male dominated structures and systems place the majority of women in disadvantaged positions denying women their dignity, respect and full participation in the activities of the society and religion. Mombo argues that with such consciousness, the members of the circle relentlessly question and challenge power structures or systems and search for renewed societies and relationships in which both women and men treat each other with dignity and respect (Ibid).

According to Phiri (Ibid), the main objective of the circle is researching, writing and publishing on culture, religion and other issues affecting women, she summarizes the other tasks of the circle as social education on women health, women empowerment, promoting safe sex practices
through educational programs and workshops in the home, faith communities and society, advocacy to counter harmful cultural and religious practices and retrieve positive ones.

2.10.2 THE CIRCLE AND GBV
The circle has been trying to reduce GBV in different ways. The most important method used by the CIRCLE is by empowering women to recognize and disapprove GBV. Njoroge (1997) explains that it is called a circle because the circle expands as more women are discovered in the journey of empowering women. The circle members care about the erosion and destruction of human dignity. They are also concerned that much needs to be done in the areas of religion and culture to address the social evils that block the experience of abundant life for people and environment (Ibid)

Circle members are also concerned that for many years, women have been silenced and as a result have suffered and others have died because nothing was done. Njoroge (Ibid) argues that, unless the sin of sexism is named and people work for its elimination, the African religious institutions will continue to be blind to the injustice suffered by women. Circle members are concerned and care deeply, they join with those who struggle for justice, peace and reconciliation in their communities. CIRCLE members reduce GBV by naming, challenging, condemning and teaching against cultural issues that are oppressive and affect women negatively (Njoroge, 1997). Njoroge further notes that when no other tool can be used to subjugate women, patriarchal society will invoke culture to justify negative things done against women. Cultural beliefs will justify such practices like female genital Mutilation/cut which result in life-long physical and emotional health problems. It will also justify wife inheritance and ritual cleansing which create possibilities for HIV/AIDS and other sexually transmitted diseases and infections. Uncritical
cultural retrieval and glorification of some African practices will continue to erode women’s’ dignity and wholeness. For example, Njoroge argues that the circle must critically analyse and examine how myths, proverbs, folk tales and symbols operate in the socialization of women working to preserve the negative customs in the communities (Ibid).

Bringing patriarchy to its knees is another way of reducing violence against women (Ibid). Njoroge notes that patriarchy is a destructive powerhouse with systematic and normative inequalities as its hallmarks. Its roots are well entrenched in society as well as the church which means, we need well equipped and committed women and men to bring it down. Njoroge notes that women and men must work together if the effect of patriarchy and sexism will be minimized.

Commenting further on patriarchy, Phiri (2004) argues that the construction of womanhood by patriarchy is one of the central issues for feminist theologians globally and particularly in Africa because it has influenced the way women and the roles that women can play in African church and society are imaged. Patriarchy has defined women as inferior to men thereby perpetuating the oppression of women by religion and culture.

Musimbi Kanyoro (2011) introduces the question of cultural hermeneutics as a way of reducing violence against women. In her article, “Engendered communal Theology: African women contributions to Theology in the 21st century”, Musimbi notes that African women are custodians of cultural practices and that for generations, African women have guarded cultural prescriptions that are strictly governed by the fear of breaking taboos and that many aspects that diminish women continue to be practiced often making women objects of cultural preservation. Musimbi argues that we must re-look at these harmful practices that are passed as cultural values and therefore are not to be discussed, challenged or changed.
Oduyoye (2004) argues that for years, women have been carrying the knowledge that men were oppressing them but the conditions were not suitable for them to raise their voices because as she notes, “When your hand is in someone’s mouth, you do not hit that person on the head.” Using an illustration of a bird, she compares patriarchy with a bird flying using only one wing because the other wing is depontialised. Although the bird can fly with one wing, it faces a lot of danger in that it can fall; it cannot achieve or even fly high like the one using two wings. Oduyoye argues that the world communities will not have any meaningful development, peace as long half of the human race is ignored or excluded.

Gathogo (2001) argues that African women Theology can be used to curb GBV. Comparing it with other liberation theologies, he argues that African women theology handles practical issues that affect women negatively. He argues that African women theology covers a wide range of society concerns such as cultural identity, poverty engendered by globalization, widowhood, childlessness, wife inheritance, HIV and AIDS.

Commenting on Biblical hermeneutics further, MusimbiKanyoro argues that the Bible is a message of liberation for African women much as it is also used to deny them their freedom. She argues that women will need to read the Bible side by side with the study of cultures and learn to recognize the boundaries between the two. Such recognition will help women to interpret biblical passages within proper hermeneutical understanding of ourselves and our contexts as Christian women (Oduyoye&Kanyoro, 2007).

Hazel O. Ayanga traces GBV in the African oral literature. In her article, violence against women in African oral literature as portrayed in proverbs, she discusses how proverbs, sayings and traditional stories are used to pass biases against women from one generation to another. Getui (1998) also showed how GBV is maintained through traditional rituals. She studied the naming
ceremonies in her native Abagusii community with special reference to women and concluded that as far as naming and naming process is concerned, women are getting a raw deal (Wamue, Getui, 1998) GBV can be curbed if these negative sayings, proverbs can be reviewed. Gecaga (2007) argues that GBV can be reduced if women are economically empowered. In her article, A Theological reflection on economic violence against women, she argues that poverty deprive women of their dignity and this makes them to be involved in shameful things like using their bodies for entertainment, commercial sex working.

GBV can be curbed by re-interpreting bible texts that seem to justify suppression of women. Teresa Okure, a Biblical scholar tries to distinguish timely truth in the Bible from its cultural underpinnings. She argues that, re-reading the Bible as a patriarchal book demands that sustained efforts be made to discern between the divine and human elements in it for while the former embodies timeless truth for our salvation, the latter inculcates practices that are socio-culturally conditioned and hence inapplicable universally (Fabella & Oduyoye, 1988). The Circle publications aims at curbing GBV. In almost all publications, there is a section dealing with GBV from different perspectives. The aim of these writings is to raise and discuss these issues which the community would like to keep in the crotchet and discuss them openly with an aim that community members, women, men and youth will take the challenge, get involved in fighting all forms GBV.

2.11 FELLOWSHIP OF CHRISTIAN COUNCILS AND CHURCHES IN THE GREAT LAKES AND HORN OF AFRICA (FECCCLAHA)

Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa is a regional ecumenical body consisting of councils and churches that work at creating peaceful existence within its members in the region. It was launched in March 1999 and registered in

The birth of FECCLAHA was necessitated by the many interstate and intrastate conflicts that characterized the Horn of Africa and the Great lakes region. For example Somalia was already a collapsed state, Rwanda was barely healed from genocide, Sudan was engaged in a vicious war that had gone for twenty years, Ethiopia was caught up in war with Eritrea and even Kenya (Which had been described as an highland of peace) had witnessed tribal crashes in 1992. It was the cry of the people for peace and security that made the churches to think of a possible platform that could convene the church leadership so that they could articulate the issues and their voice especially in the area of advocacy and humanitarian assistance (FECCLAHA publications, 2007)

FECCLAHA aims at building equitable and peaceful communities where individuals live in harmony and justice within the great lakes and Horn of Africa. FECCLAHA addresses the root causes of conflict working with National Council of Churches and churches at the grass roots levels using contextual bible study to impact Christian values. In summary, FECCLAHA roles include:-Empowering men, women and youth to be effective instruments of peace and gender justice in Society. They focus on sexual Gender Based Violence, Gender Injustice in Church and Society, Women Participation in governance and peace building. FECCLAHA realizes that it is not possible to talk of any meaningful peace in the society as long as gender based violence exist and aims at reducing it to minimum percentage.
2.11.1 FECCLAHA AND GBV (TAMAR CAMPAIGN)
Tamar campaign (breaking the silence on GBV) was launched in Kenya in 2005. It seeks to acknowledge the existence of gender-based violence in African society with particular focus on sexual and domestic violence and to challenge churches and religious institutions to address the crisis (Fred, Taryn, 2007). The campaign is sponsored by FECCLAHA in conjunction with St. Paul’s University and World Council of Churches and stands as a proactive voice empowering the church to break the chains of silence surrounding GBV (Fred, Taryn: 2007). What makes the Tamar Campaign faith-based is use of the scriptures; the guiding principles of the faith to react to the high numbers of human rights violations experienced. The Tamar Campaign is developed from a story in the Bible of the incestuous rape of Tamar (2 Samuel 13:1-22), the text is a hair-rising narrative that describes only too accurately much of the dynamics of sexual violence experienced by women across the world. This is not only a text about gender violence; it is also a text about the failure of family and governmental structures to protect women and about the effects of gender violence on other aspects of life. Although Tamar is denied justice, she is a symbol of strength as she spoke out about her rape and thus the campaign’s tagline, Tamar that is “Breaking the silence against gender-based violence”

The church stands in a unique position in the society to play a decisive role in the prevention and elimination of the different forms of violence against women. The church also possess the moral authority, responsibility and capacity to minister to the needs of those who have been abused but also the perpetrators of violence who are members of the church most of the time. FECCLAHA has developed the Tamar campaign manual to help church leaders deal with GBV (Ibid)

Contextual Bible study begins with the analysis of the local context and then moves to the Bible to allow it to speak to the context and then moves to the participants planning a course of action.
arising from the bible study. Addressing gender based violence in a responsible and respectful manner that both affirms the survivors and condemns the actions of the perpetrators is the call of the church and Tamar campaign is meant to do this. (Ibid)

The Tamar campaign aims at involving the community members to recognize GBV and break the silence that surround such violations such as rape and other sexual defilements. In most of the African communities, members of the community prefer to keep quite about sexual crimes because it is considered as a taboo. When people talk about it, they do it in whispers and even when they know the perpetrator of sexual crimes, many people are not courageous enough to challenge them or report them to the authorities. Survivors of such violence also choose to keep quite other than face the judgmental community members who blame the survivors for inviting the rapists may be because of what they were wearing, how they were walking etc. relatives of survivors also discourage the survivors from reporting these crimes fearing that the family may be disgraced (Taryn, 2007)

Against this background Tamar campaign urges community members to stop treating sexual crimes as taboo because these crimes continue to increase as long as community members do not speak about them. From the story of Tamar, 1 Samuel 13, community members especially women are encouraged to be wise and know the rapists tricks. For example Tamar should have asked herself why her brother was demanding that everyone was to go out and leave her and him alone. She would have asked herself, why did her brother demand that she take the food to his bedroom? Why did she not shout when he began making attempt to rape her? However community members can emulate Tamar in that after the rape, she removed the richly ornamented robe which was worn by the king’s virgin daughters and wailed loudly making a few people including her brother Absalom know that she had been raped by her step brother Ammon (Mombo, 2003). When
Tamar’s father David heard about the rape, he was furious but did nothing. David represents the people who get upset by sexual crimes but do nothing about it. The Tamar campaign calls upon such community members to start taking action that will help in reducing such crimes. Tamar’s brother Absalom organized for the killing of his step brother Ammon as a way of revenge for raping his sister. He may have taken the revenge so far but he still represents community members who feel that perpetrators of sexual crime must be dealt with adequately (Mombo, 2003). These teachings from the Bible provide a solid basis where the FBO’s who advocate for the following of the teachings of Christ should take a lead role in combatting gender based violence.

The story in Judges 19 is rarely mentioned in the church. A part from highlighting the type of deep violations that women are subjected to, it also raises the question of how sincere community members are in handling GBV. In this story, a man from Ephraim took a concubine but at one time she run away and went to her father. When the man went to take her back, they stayed until late and an old man from Gibeah gave them a place to sleep. At night, wicked men from the city went to the old man’s house and demanded to have sex with the man. The old man persuaded the wicked men to have sex with his own daughter and the man’s concubine but the wicked men refused and continued demanding to have sex with the man from Ephraim. As the wicked men continued to ask the man to come out, the man threw out his concubine to the men who raped and abused her throughout the night. The old man and the man from Ephraim slept comfortably while the concubine was being harassed and in the morning, the concubine died.

The man from Ephraim carried her home, cut her into pieces and used her body parts to make Israelites fight the Gibeonites. In this story, we see the men using women to defend themselves. It is clear that these men believed that it is better for a woman to be defiled than a man. If these men
were convinced that neither men nor women should be defiled, they would have sought help from neighbours so that no one was defiled (Mombo, 2003).

Cutting someone into pieces was the most undignified treatment one person could do to another in Israel yet this is what the man from Ephraim did to his concubine. The community members must be exposed to such evils that still happen to women even today. The Tamar campaign seeks to involve the community members and make them realize that just like the man from Ephraim, we are not doing enough to curb GBV and we must improve in our efforts (Oduyoye, 2011).

The Tamar campaign uses the story of the rape of Dinah to show how violence begets more violence (Genesis 34). In this story, Dinah, the daughter of Jacob through Leah went to visit her Canaanite friends and while there the local ruler seized her and raped her. He loved her and decided to marry her. The ruler requested her father to allow him marry her but the father begged to be allowed to seek the consent of his sons. When the sons knew about the rape, they were very angry and started planning for revenge. (Ibid)

They deceived the ruler that they were willing to give their sister Dinah to him if the entire male from his region were circumcised. The ruler had all his men circumcised but while they were still hurting, Jacob’s sons killed all of them including the ruler who wanted to marry Dinah (Fred, Taryn, 2007) the sons killed their sisters suitor without caring whether she had learnt to like him or not. Dinah did not get married or get children because the one who would have married her was killed without her consent. She suffered double catastrophe, rape and remaining unmarried. The community members must be taught on how to cater for the emotional needs of the survivors of rape (ibid).
Tamar campaign recognizes GBV as a spiritual problem and human rights violation affecting millions of people, women, men and children. The campaign however recognizes that women have fewer advantages culturally, socially, politically, sexually and economically and therefore are affected by violence more than any other group. The Tamar campaign uses the story of the woman caught in adultery (John 8) to show how women are discriminated even in the application of laws and customary practices. In this story, the Pharisees and the scribes drag a woman and made her to stand before Jesus. They tell Jesus that she was found committing adultery and that she should be stoned according to the Law of Moses. According to Leviticus 20.10 and Deuteronomy 22.22, the law demanded that the two parties especially if the woman was already betrothed should be stoned to death. May be the question that Jesus asked Himself as they waited for him to justify their demand that she should be stoned or not was where is the man who was committing adultery with her? Jesus did not tell the crowd whether they should stone her or not but challenged whoever had never sinned to be the first one to throw the first stone. The whole crowd, realizing that none of them was completely sinless left Jesus and the woman alone. Jesus then set the woman free but after warning her not to sin again. The community members should learn not to apply the law discriminatively as we find in this case (Nishimuko, 2008).

The story in Genesis 19 exposes the type of paradox that exists in the way men treat women. In one way, men consider women to be indispensable for their livelihood. They are born of women, raised by women and depend on women in catering for their physical, psychological and even spiritual needs. On the other hand, men use their muscular, economic, political and religious advantage to demean and deny women their rightful opportunities. The story of Lot preferring to sacrifice his own daughters to be defiled by the village men so as to protect men strangers represent the shocking things that men do to women even in today’s world. Tamar campaign
seeks to expose those bad practices. Community members should participate in condemning those evils done against women (Mombo, 2003; Taryn, 2007)

Apathy and hush tones regarding matters of Gender-Based Violence (GBV) within the family; the church and other institutions in the society only encourage violence against women and children. A combination of the spiritual, legal, psychological, and health support goes a long way in aiding the holistic healing of a violated survivor. ‘Faith’ is well placed to cause positive changes in any society, due to its ability to reach a varying spectrum of people, that is, the young and the old. According to UNIFEM, “…religious institutions … play key roles in gender socialization, and can act as agents of transformation…. In religious institutions, spiritual leaders can act as role models who value compassion and community building over more constraining gender roles.”

Faith-based organizations and places of worship are increasingly becoming places of solace. According to Amnesty International, “for countless women home is not a refuge but a place of terror.” In this respect the church has become a place of refuge and a place of healing. However, the church has kept silent about gender-based violence. Yet some members of the congregation are victims of violence who may be hurting and in need of support. Places of worship need to create an atmosphere of openness and acceptance, as people need a place where they can be comfortable in sharing their pain. The openness of this can only be achieved if the leaders will break the silence against gender-based violence.

In one of the Tamar Bible study avenues, a pastor shared how when he included in his prayers; a prayer for survivors of GBV, he always found three or four people going to his office to share their story, to tell him how affirmed they were to know that he recognized that they were existing and that he was willing to walk through the pain with them”, (Jan Pettit). The silence and apathy
towards gender based violence has largely been caused by the fact that many religious leaders are ignorant about where to send the survivors who may share their experience with them for further assistance either legally, in matters of health or otherwise. Yet, these are essential services that a woman or a child who has undergone any form of violence needs to ensure that holistic healing has taken place.

This then forms the basis of the Tamar Campaign facilitated by Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa (FECCCLAHA). The campaign acknowledges the existence of Gender-Based Violence in the society, with particular focus on sexual and domestic violence and seeks to challenge and equip the Church to break the silence around this vice. Breaking the silence around gender based violence, then breaks the cycle of violence and reduces incidences of violence. Therefore, the Tamar Campaign is the bridge linking the churches with the advocates of gender-based violence issues. In addition to this, Tamar Campaign aims at being a resource center for the church leaders equipping them to handle the topic on gender based violence Biblically.

The Tamar Campaign acknowledges that, “…to adequately respond to the needs of battered women and rape survivors, it is imperative that the clergy learn about violence against women and reach out to secular advocates and services. Likewise, it is imperative that the secular advocates and counsellors appreciate the importance of women’s religious backgrounds and reach out to clergy and religious groups to find resources to meet the needs of victims” (Rev. Fortune and Enger, 2005).

The Campaign was launched in 2005 February, when it became increasingly evident that FECCCLAHA could not continue to work in the area of peace building in the Great Lakes and the
Horn of Africa without seeking to address more specifically Gender-Based Violence (GBV). This was an issue that was gravely affecting a huge portion of the population, mainly women and children in this region. Tamar Campaign in Kenya adopted the model from Ujamaa Center in South Africa where contextual Bible Study/theological reflection has been adopted as a methodology of dealing with gender based violence. FECCLAHA in collaboration with St. Paul’s United Theological College and World Council of Churches (WCC) then launched the Tamar Campaign. The Campaign’s vision is a continent, free from sexual and domestic violence, in which men and women relate as equal partners made in God’s image. In addition, the Campaign’s mission is to demonstrate God’s compassion and justice to women and children who suffer indignity and violation through sexual and domestic violence.

What makes the Tamar Campaign faith-based is use of the scriptures; the guiding principles of the faith to react to the high numbers of human rights violations experienced. The Tamar Campaign is developed from a story in the Bible of the incestuous rape of Tamar (2 Samuel 13:1-22), the text is a hair-rising narrative that describes only too accurately much of the dynamics of sexual violence experienced by women across the world. This is not only a text about gender violence; it is also a text about the failure of family and governmental structures to protect women and about the effects of gender violence on other aspects of life. An issue that stands out in the story of Tamar is silence of the survivor and the impunity…. The survivor is denied justice by the systems that be – this same pattern is replicated in many conflict, post-conflict and even countries in peaceful situations.

Churches and faith based organizations comprehensively addressing GBV will publicly speak out against GBV and engage governments in combating GBV, they will put in place polices against
GBV and other forms of violence, develop programs with a GBV focus and make the link between GBV & HIV and AIDS within these programs. The use of scripture to address issues of GBV and particularly the incestuous rape of Tamar enables readers to engage with issues such as the silencing of women who have been raped, the cultural determinants of sexual violence within communities and the impunity that surrounds sexual violence. The Tamar narrative also helps participants to study African cultures and religion alongside the Bible which have been used negatively but if well articulated have liberating Messages just like the Bible.

The Church and indeed the religious institutions are uniquely placed to play a decisive role in the prevention and elimination of the different forms of violence against women and children. They have the clout and the capacity to minister to the needs of those who have been abused as well as those who are perpetrators. The Church and these other religious institutions can provide opportunities for healing of the victims for example by providing emotional and spiritual support, counseling and shelter. This would complement the efforts of hospitals, civil society organizations and the police. They can also provide sanctions and deterrent measures for perpetrators for example by holding them accountable for their deeds. The faith institutions can play a pro-active role through its preaching and teaching about the evil of Gender-Based violence, thereby setting standards for societal values that protect the well-being of women and children.

The write-up is based on Judy Waruhiu (FECCLAHA)’s presentation during the IFAPA Eastern Africa Women workshop in Nairobi. Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa (FECLALHA) is one of IFAPA’s partners and gender-based violence is a shared concern within the two organizations and they both, in different ways, continue to sensitize the religious leadership to make use of the opportunities they have to address this vice
which affects members of their constituencies. All over Africa gender-based violence remains a challenge and IFAPA is ready to work with willing partners to help curb the vice. Already some of the IFAPA network members such as Rev. Boissa and Mama Marie Francoise Lutala in DRC continue to take care of affected women and girls. The IFAPA Women Desk invites willing partners to work together on projects to address this challenge which is a big problem for women in Africa today.

2.12 THE MUSLIM ADVOCACY NETWORK AGAINST DOMESTIC VIOLENCE (MANADV)

The Muslim Advocacy Network against Domestic Violence (MANADV) is a National network comprised of predominantly Muslim advocates addressing domestic violence in Muslim communities through diverse faith-based and mainstream approaches and agencies.

The aim of MANADV is to bring together a national network of advocates, service providers, legal and health care professionals, activists, researchers, scholars, and community based organizations to strengthen culturally appropriate advocacy, encourage dialogue and collaboration, develop models and analyses, and disseminate resources (MANADV newsletter 2012).

This network was formed with the understanding that, though many communities have organized to provide services for Muslim survivors, there is an urgent need to diminish the isolation many advocates experience, and to build a national network where advocates share resources, exchange information, build alliances, and strategize about intervention and prevention. This network is a coordinated effort to empower survivors, deepen advocacy, strengthen families, and organize communities. (Ibid)
The network is a collaborative endeavour consisting of a working group led by the Peaceful Families Project (PFP) and the Asian & Pacific Islander Institute on Domestic Violence (API Institute). Combining their expertise in technical assistance, community outreach, training, resource development, research, and technology, PFP and APIIDV provide the infrastructure and support to facilitate the Muslim Advocacy Network’s goals.

Quantitative and qualitative interviews conducted with the executive directors of 9 domestic violence organizations serving significant numbers of Muslim women found that of the 1,962 total Muslim women served annually, the average age was 32 years, and 85% were of immigrant background. The women experienced various forms of domestic violence including 82% emotional or verbal abuse, 65% financial abuse, 49% spiritual abuse, 74% physical abuse, and 30% sexual abuse. A study of 57 closed-case files from an American Muslim women’s shelter revealed that 37% had experienced multiple types of abuse, 23% experienced physical abuse, and 12% experienced emotional abuse.(Ibid)

2.13 AMANI COMMUNITIES AFRICA

Amani Communities Africa (Formerly Family Mediation & Conciliation FAMEC) was founded in 2001 by a group of women lawyers in a quest for peace, justice and equity. It was born out of the need to impact positive conflict resolution skills in families, churches, and local communities as well as empowers women and girls to know and enjoy their rights. Amani Communities Africa is premised on the belief that only people who can freely and abundantly enjoy their human rights can achieve or experience sustainable peace(ACA newsletter 2010). That equality, peace and development are inextricably linked. There can be no lasting peace without development and no sustainable development without full equality between men and women. Women have human rights that are peculiar and distinct from those of men, mainly due to their biological as well as
gender differences and roles. Moreover, we view full respect for women's human rights, the release of their creative potentials in all aspects of life, their equal participation in decision and policy making, equal access to educational and other opportunities, the promotion of equality between men and women are prerequisites to attaining a culture of peace (Ibid).

Amani Community Africa (ACA) has been working on the program of involving women and men to support and work for women’s empowerment and gender equality. ACA leaders have seen the big impact when they involve men in their empowerment programs. When men are not involved, they feel threatened and do their best to bring the work down. ACA uses the methodologies of training workshops, exchange and exposure visits, resource material development and distribution, monitoring and evaluation. This program has strengthened men and women capacities in empowering women and thus furthering the attainment of the millennium development goal number three. The empowerment will increase access to justice and protection and promotion of women’s rights, thus improve the well-being and contribution of women to development and empowerment hence enable combatting gender based violence (Ibid).

In conjunction with Technical initiatives in poverty alleviation (STIPA) and development Education services for community Empowerment (DESECE), ACA conducted test training for twenty human rights activists from Kibera informal settlement of Nairobi. The group then drafted a comprehensive curriculum called, “gender and human rights in sustainable development” merging three of their organizations core themes of gender, human rights and community development. Two more organizations, solidarity for the advancement of womens agenda (SAWA) and ChemiChemiyaUkweli also network with ACA in their empowerment programs. (Ibid)
ACA recognized the main human rights and legal issues facing the women in Meru including land and property rights, GBV and severe discrimination and suppression of women based on patriarchal beliefs and practices. ACA has helped the women in Meru to create community based organizations that work at reducing these discrimination and GBV. Over the years, ACA has continued supporting these organizations such that these groups have been conducting extensive awareness rising and advocacy activities. They have also educated women on their rights. Their space for their participation in decision making from family to national levels has also significantly expanded (Ferris, 2005).

Amani Communities main role is to contribute towards a peaceful, just and equitable society. It is dedicated to promoting a culture of peace and non-violence and respect for legal and human rights in society through capacity building programs. Amani communities operate under four thematic programs namely:

i. **Women peace and Human rights program (WPHRP)**
   This program is premised on the belief that women, like other members of the human family are entitled to freely and abundantly enjoy their human rights in order to achieve sustainable development and peace in society.

ii. **Mediation and Conflict Transformation Program**
   This program is premised on the belief that conflict is an inevitable human experience. However, the way a conflict is handled determines whether it will lead to violence, loss and destruction or growth, development and strengthened relationships.

iii. **Legal Empowerment Program (LEP)**
   This program is premised on the acknowledgement that law is a vital tool to the
attainment of justice and peace. AmaniTherefore, offer legal awareness, advice, representation and referral services.

iv. **Resource Documentation and Administration program**

This program aims to ensure coordinated development, implementation and documentation of programs through activities such as leadership, research, staff development and strategic planning.

**Key strategies**

i. Training and education

ii. Seminars and education

iii. Legal advice and representation

iv. Research and documentation

v. Lobbying and advocacy

vi. Internship and mentoring

vii. Staff and capacity building

viii. Networking
Program Priorities:


II. Skills building in mediation and conflict transformation

III. Action research

IV. Young women leadership, mentoring and internship

2.13.1 ACHIEVEMENTS

In 2005, FAMEC (Family Mediation and Conciliation), a Kenyan NGO engaged in peace and human rights work, received a grant of 29 000 € from KIOS for a Maasai women’s empowerment project. With the support of KIOS, FAMEC published the Bringing women’s rights home training manual in Kiswahili, and organised human rights and conflict resolution courses for 120 Maasai women in Kajiado district. FAMEC’s grassroots partner organisation identified influential Maasai women as participants for the course; social workers, business women, teachers, farmers and housewives. The women’s families were consulted in order to reach a mutual understanding on the importance of their participation. The course gave women knowledge on human rights, particularly the rights of women, and tools with which to encounter human rights abuse and conflict situations. Special emphasis was given to methods with which to share human rights knowledge and conflict transformation skills with other members of the women’s communities.

The women who partook in the course went on to form small local groups in different parts of Kajiado district. The groups advise women in situations of rights abuse, and support conflict
resolution in families and communities. Some of the local groups have focused on organising human rights training for other Maasai women, most of whom are illiterate, using mediums such as music and drama. At the end of the project the trained women gathered together for a one-day-seminar to share experiences and plan future activities. Empowered by the tools they had received during the training programme, women had been able to prevent a number of young girls from being forced into marriage. Their common experience was that genital mutilation was becoming less common in their communities, as mothers were more aware and able to protect their children. Women spoke of how increased human rights awareness had increased the respect shown to women, and caused women to become more active in different ways. In some villages, women had started small business and formed contacts with microfinance organisations; one woman had been the first in the community’s history to be asked to speak in a community meeting; and three women were planning to run for candidacy in the 2007 elections.

ACA has continued to train more Maasai women in the human rights, peace training and leadership programs. Maasai teenage girls were trained on health and human rights program. These programs empowers the maasai teenage girls to recognize and reject negative cultural practices like FGM/C and child marriages. They also enable the teenage girls to make informed choices on how to live their lives other than blindly following negative traditional practices.

ACA is instrumental in helping Maasai women to establish income generating programs that has empowered them economically. These activities include bee keeping, bead work and tree nurseries (ACA publications, 2010). These empowerd women work together in rescuing girls from FGM/C, early marriages etc. They also organized programs where why publicly shame men who beat their wives.
ACA is also involved in empowering men and bringing them on board in the women empowerment programs. This intervention is instrumental in aiding men to understand and shed the negative perception on women empowerment programs. Instead, women empowerment was demonstrated as being designed to transform the women folk into better wives, mothers, communicators and influencers of positive change in the society. These ideas was well embraced by the maasai men and offered the men the platform to interrogate themselves as well as their culture (ACA publications, 2010).

The Maasai women share their knowledge and experiences with their neighbours and other women who are less empowered than themselves. For example, the Kajiado groups hosted and shared their knowledge with the Loita groups. The men involved became key allies to women’s quest for equality and human rights. Through these efforts, more women groups were born and the network is continuing. According to ACA director, Joy Mbaabu, ACA’s work is bearing good fruits and reducing gender based violence in a big way (ACA publications, 2010).

2.13.2 NONVIOLENCE FOR UNIVERSITY STUDENTS

This project usually target university students in Kenya as key allies in embracing nonviolence as a way of life and using nonviolent principles and practices in dealing with conflicts to reduce violence. It stirs students’ leaders and administration officials towards a paradigm shift into partners in addressing conflicts and leading positive change (ACA publications: 2010). This program has contributed in capacity building through training workshops and consultation forum, provision of resource and visibility materials and ongoing follow up support to ensure eventual incorporation of the program in the university programs. The intervarsity peace and nonviolence
initiative formed as a result of the intervention spearheads this sustainability model (ACA publications, 2010)

2.13.3 WOMEN PEACE AND SECURITY

ACA is one of the working groups steered by the gender commission, UNWOMEN/UNIFEM and embassy of Finland to develop national action plan for the implementation of UNSCR1325 in Kenya. This is an international framework that seeks to enhance the participation of women in decision making. It is premised on the persuasion that women are key actors not only in conflict but more so in sustainable conflict resolution. The resolution urges governments and other actors to use the four pillars of participation, protection, prevention and promotion to enhance women’s role. (ACA Publications, 2010)

2.13.4 HUMAN RIGHTS AND ACCESS TO JUSTICE

ACA has been working on the program of involving women and men to support and work for women’s empowerment and gender equality. ACA leaders have seen the big impact when they involve men in their empowerment programs. When men are not involved, they feel threatened and do their best in making the work to fail. ACA uses the methodologies of training workshops, exchange and exposure visits, resource material development and distribution, monitoring and evaluation. This program has strengthened men and women capacities in empowering women and thus furthering the attainment of the millennium development goal number three. The empowerment will increase access to justice and protection and promotion of women’s rights, thus improve the well being and contribution of women to development.
2.13.5 GENDER AND HUMAN RIGHT TRAINING

In conjunction with Technical initiatives in poverty alleviation (STIPA) and development Education services for community Empowerment (DESECE), ACA conducted test training for twenty human rights activists from Kibera informal settlement of Nairobi. The group then drafted a comprehensive curriculum called, “gender and human rights in sustainable development” merging three of their organizations core themes of gender, human rights and community development. Two more organizations, solidarity for the advancement of womensagenda (SAWA) and chemiChemiyaUkweli also network with ACA in their empowerment programs. (ACA PUBLICATIONS, 2010)

2.13.6 MERU WOMEN EMPOWERMENT PROGRAM

ACA recognized the main human rights and legal issues facing the women in meru include land and property rights, GBV and severe discrimination and suppression of women based on patriarchal beliefs and practices. ACA has helped the women in meru to create community based organizations that work at reducing these discrimination and GBV. Over the years, ACA has continued supporting these organizations such that these groups have been conducting extensive awareness raising and advocacy activities. They have also educated women on their rights. Their space for their participation in decision making from family to national levels has also significantly expanded. (ACA Publications, 2010)
2.14 ROLE OF FBOS IN CURBING GENDER BASED VIOLENCE

2.14.1 THE ROLE OF FAITH BASED ORGANIZATION IN BEHAVIOR CHANGE
Religion’s role in curbing GBV is controversial, yet improvements in the GBV depend on the necessity of changing behaviours, and in this respect religious leaders and faith-based organizations can play a significant role (Haynes, 2007). The reality of GBV challenges humanity to change its attitude towards sexuality (Masicame, 2005). Men and women are called upon to openly talk about gender-based violence. This in turn can be considered as the perfect way of living according to most religious teaching. However, religious organizations need to reach out to those who have not lived up to this. Changing attitude is not an easy thing and the religious communities are required to make it a process of constant teaching (Ibid). Appropriate theological reflection, public awareness campaigns and openly talking about the GBV is required. For FBOs to be involved as agents of behaviour change they must be willing to offer education that includes GBV related issues openly and constantly (Ibid).

However, combating gender based violence is not simple or easy since it demands complete discipline from an individual point, as Messers noted, Curbing GBV requires behavioural change that is difficult and demanding since these are very complex psychological and physical issues (Messers, 2007). Using appropriate language can be a practical manifestation of a changed behaviour since words can comfort, annoy, heal or hurt, make us feel included or excluded; what comes out of our mouth reflects our own thinking and can easily influence the action and attitude of others. Changing behaviour can as well mean staying out of the way if we cannot provide a message of hope, a gift of loving care, or theology of life (Ibid 2007).

Since some religious communities still accept such norms influenced by the socio-, cultural and religious norms, it is appropriate for FBOs to be in the fore-front to influence behaviour change
and to help the congregants understand risk behaviour that fuels GBV within the society. For instance women have been seen as vulnerable to the gender-based violence epidemic by the fact that they are not very much involved in decision making within the homesteads and this includes sexual matters (Phiri, 2003).

FBOs should educate people in the dangers of gender based violence if not well executed, they need to take responsibility. The most effective but also demanding way to combat gender-based violence in the society is to empower individuals so that they can refrain from self-destructive choices (Knox-Seith, 2005). This can be achieved by the church and other FBOs by being part of an education program that aims at behavioural change (Kerimere 2010, Messers 2007).

For proper implementation of behaviour change, communication that reaches the general population and key targets, FBO leaders who are influential in the community in which they serve, need to make it a patriotic duty to spread the word. Spreading the word involves not just information and education but also fundamental behaviour change approach in communication and motivation (Ibid).

Faith based organizations can influence behaviour change to promote prevention through a variety of ways ranging from the reactive passive, like inviting or allowing GBV educators to address congregations, to be more active, like using the prestigious moral authority of religion to advocate behaviour (Green, 2003). Green argues that based on research conducted in countries like Uganda and Senegal, FBOs have a natural ability to promote behaviour change because issues attached to gender-based violence are central to the values of virtually all religions (Ibid).

Addressing GBV requires a multi-faceted approach and requires interventions along the prevention-treatment continuum. First, interventions aimed at primary prevention are those
concerned with preventing the incidence of GBV itself. Secondly prevention is concerned with identifying victims of GBV as early as possible and averting the physical, mental, and social sequel associated with having experienced GBV. Tertiary prevention, or healing, aims to arrest the negative consequences of GBV and promote recovery.

In one GBV conference, all the papers reviewed identified gender-based and sexual violence as abhorrent, and some rejected the notion that violence of this kind is an inevitable feature of conflict (Beasley et al., 2010). However, only one paper described an intervention aimed at the primary prevention of GBV (Beasley et al., 2010). A second paper discussed a single intervention for both the primary prevention of violence and the secondary prevention of its sequel (Beleli et al., 2007). The remaining papers described interventions for the secondary prevention of the physical, mental, social or economic consequences of having been exposed to gender-based or sexual violence, as well as strategies for healing (Bryant-Davis et al., 2011; Hill, 2005; McMullen et al., 2013; Parsitau, 2011).
2.14.2 EDUCATION AS PRIMARY AND SECONDARY PREVENTION

Beleli (2007) describe Education as formal schooling while Bryant-Davis (2011) describe it as informal community-based or opportunistic teaching. In conflict and other settings, FBOs can play an essential role in the delivery of formal education and in some contexts may be involved in its administration (Ibid). Beleli et al. note that in Colombia, the Church is a main strategic ally for the Ministry of Education because of its vast outreach, transparency, credibility and acceptance among community members. Likewise, Beasley et al. (Ibid) describes how the Church holds a significant position in society and through its teachings and activities, it plays a powerful role in forming opinions and perceptions, and in shaping the social acceptability of different behaviors. Beasley et al. (Ibid) describes how school environments can either empower pupils to live free of violence or instead tacitly permit harmful behaviors on the part of authority figures, like teachers, who might use their position to sexually exploit children.

Beasley et al. (Ibid) used faith-based education to stimulate dialogue, to increase awareness of the impact of violence on children, to change attitudes and to stimulate action against sexual violence amongst church-school leaders and staff. In contrast, Beleli (Ibid) conceptualized education as a protective space during conflict, where psychosocial support can be provided and life-saving messages or skills can be taught. In addition, Beleli (Ibid) posit that education’s role in the prevention of violence is less an opportunity for action or transformation, but one of providing refuge.

Beleli (Ibid) also contend that education decreases psychosocial stress for children traumatized by experiences of violence, by providing a sense of normalcy in their lives. Furthermore, they suggest that education can serve as a mechanism through which to address health and social issues faced by communities post-conflict and can be a platform for addressing the causes of
conflict and for promoting change. In these ways, education is shown to be a strategy for the secondary prevention of SIGBV.

Bryant-Davis et al. (2011) and Hill (2005) also emphasized the importance of education for secondary prevention. Hill (2005) describes how education can promote the acquisition of social, cognitive, emotional and physical skills among children affected by violence. The author also articulates the importance of education in contributing to trauma healing by building resiliency. Similarly, Bryant-Davis argues that education is very important in women’s recovery following sexual violence. Scholars are in agreement that religious teachings restored a sense of positivity and hope among women and girls who had experienced rape. They also remark that providing opportunities for education is an important strategy for enabling women to move on with their lives after conflict.

2.14.3 HUMAN RIGHTS AND JUSTICE

Beleli, (2007) argue that educational programs that emphasize the rights of children reinforce their value and also contribute to their psychosocial wellbeing and strengthen their ability to help them heal from psychological trauma. In addition to complying with and promoting the rights of the child, the authors also describe the inclusion of teaching on human rights in educational interventions themselves. For example, one of the aims of a primary school curriculum in Sudan was to produce an educated population, conscious of its rights and aware of its civic responsibilities (Ibid). This was similar to the findings of Bryant-Davis et al., which suggest that teaching women about their sexual and reproductive rights may, when coupled with other supports, help them to recover following experiences of sexual violence (Ibid).

In contrast, Beasley et al. (Ibid) suggest that human rights-approaches are of limited relevance to people who have been subject to human rights violations without impunity. The authors recognize
that corruption in the local legal system makes finding justice for victims difficult. In response, the authors used passages in the bible to stimulate dialogue amongst participants about ways to promote justice for victims at the community level, within the church-school environment (Beasley, 2010). For Beasley, (Ibid), justice meant upholding policies for child protection and encouraging those in positions of authority to speak out against sexual violence. The role of justice was described as facilitating healing following experiences of gender-based or sexual violence.

Bryant-Davis et al. (2011) point to the need to treat the mental health issues facing women and children victims of violence. In addition, McMullen et al. (2013) found that former child soldiers who received trauma-focused cognitive behavioral therapy had highly significant reductions in symptoms of post-traumatic stress, depression and anxiety and suffered less psychosocial distress, compared to a control group of former child soldiers. Though the provision of mental health services may be challenging in conflict settings, Parsitau (2011) describes how FBOs including churches were able to address inadequate access to mental health care and the stigma associated with it, following the outbreak of violence in Kenya.

While most of the papers articulate the value of spiritual well being, only Bryant-Davis et al. (Ibid) and Parsitau (Ibid) purport specifically that spirituality itself should not be overlooked in trauma healing (Bryant-Davis et al., 2011; Parsitau, 2011). Bryant-Davis et al. (2011) suggest that the means of healing the spirit will vary by practitioner, by participant and by spiritual practice. Parsitau (Ibid) describes faith as a resource for overcoming post--conflict trauma and a cushion between women and their harsh emotional, psychological and social realities. She found that internally displaced survivors of sexual violence used religious imagery and texts to make sense of their experiences and to build self-esteem and self-worth. For them,
having faith in God provided hope from which they could draw strength. Though Parsitau (Ibid) described the assistance provided by FBOs during the violent conflict in Kenya, she also emphasized how women used personal and communal faith, spiritual capital and resources like religious texts and prayer to cope with post-conflict trauma.

2.14.4 GROUP-BASED APPROACHES
A common feature of the papers reviewed was the use of group-based activities or interventions. In some settings, group interventions may be the only feasible method of program delivery because of scarce resources and excess demand (McMullen et al., 2013). However, group interventions can have ancillary benefits such as increasing dialogue, collaboration, and arrival at solutions to shared problems (Ibid).

Delivering interventions in a group format was found by McMullen (Ibid) to reduce stigma, to normalize symptoms and to promote understanding. Moreover, group based interventions have been found to foster friendships, community support and a sense of social and emotional safety. Anecdotally, peer support may last beyond the end of the intervention (Ibid)

Providing support in group formats like workshops or church gatherings has the benefit of providing social and community support for people who have experienced sexual or gender-based violence (Ibid). Indeed, prayer groups and fellowships may serve as settings in which people can share their fears, hopes, desires and personal experiences. To the extent that group members listen to and support one another, these groups can become safe spaces of relief and refuge (Parsitau, 2011).
2.14.5 FBOS AS AGENT OF DEVELOPMENT

There cannot be any meaningful development as long as GBV exist. The willingness of development institutions and donors to engage FBOs as agents of development in recent times has been remarkable (Amirkhanyan, 2009; Bano, 2009; James, 2009; Lunn, 2009; Nishimuko, 2008). Perhaps, the most significant involvement of these organizations in development discourse is the role played towards the formation of the United Nation, through lobbying and advocacy activities (Ferris, 2005). Some other outstanding accounts echo the involvement of FBOs in various other advocacy activities that transformed human development around the world (Berger, 2003; Ferris, 2005).

In Mozambique and Zimbabwe, FBOs were among the prominent organizations that supported the liberation struggles. In Latin America, FBOs played active and laudable roles in the development of liberation theology (Hanlon, 1991). Regardless of these contributions, faith has been neglected within development arena probably due to the influence of the modernization thesis, rooted in the secularization ideology which advocated for the replacement of traditional values with modern ways (Giddens, 2006). This has had a significant influence on the acceptance of faith in development discourse considering that faith is akin to tradition with its conservative approaches to life issues.

Many scholars argue that FBOs have long played a vital role in development through the delivery of social services and has largely been indicated (Ferguson, 2006). However, a number of other scholars have critiqued the so much rhetoric about the effectiveness of FBOs' participation in development, arguing that such false value is quite ‘faith-based’ without substance, due to the lack of a comprehensive framework on which to judge their phenomenal success in social service delivery, over their secular counterparts (Amirkhanyan, 2009). Their opinion based on a comparative study of faith-based and secular nursing homes, by measuring quality of service, as
well as its accessibility. Although their interpretation fails to prove that FBOs perform better than their secular counterparts in social service delivery, in the context of nursing homes, based on the outcome of their regression analysis. However, most of the references mentioned in their research noted excellent quality and accessibility of FBOs social services relative to secular providers (Ragan, 2004; Weisbrod and Schlesinger, 1986; Desmond and Maddux, 1981; Wuthnow, 2004; Detroit, Eisinger, 2002; Reingold 2007). The limitation with Amirkhanyan study is the difference in methodology, scope of research and homogeneity of data referenced in the study. Lipsky (2011) had advocated the need to develop a framework on which to evaluate the effectiveness of FBOs in social service delivery, especially with the increasing interest in faith and development interface by the international communities and development practitioners.

A Comparative study of faith-based programs serving homeless and street-living youths in Los Angeles showed that FBOs have unique capabilities in providing social services to vulnerable population. An assertion acknowledged by Compassion Capital Fund (CCF), managed by the US Department of Health and Human Services' Administration for Children and Families which has led to increased funding of FBOs for social service provision (Ferguson et al., 2006).

The increasing participation of FBOs in development issues across the globe in recent times, is an acknowledgement that they make a distinctive contribution to social service delivery and play a vital role in grassroots mobilization as well as in other aspects of development, “including conflict resolution and reconciliation; humanitarian assistance and disaster relief; environmental protection and conservation; politics and social movements; and social welfare and development” (Lunn, 2009).

However, this enthusiastic endorsement of FBOs as agents of development is threatened by scepticism and mixed reactions due to past donor experiences working with some FBOs which
emanate from the, “paternalistic and welfare-oriented approach to development” adopted by most FBOs (James, 2011). There are also fears that aid funds meant for GBV campaigns might be used for other purposes (Joseph, 1991) In his book; “Mozambique: who calls the shots, Joseph cited a case of large FBOs who gave priority treatment to their members, supported irrigation projects only in places were church members are given preference as well as supporting religious activities and doctrine with aid funds, “they bring in missionaries under the guise of aid staff, distribute bibles, build churches, and give out food and clothing at the end of church services” (Joseph, 1991).

The conservative culture of most faith traditions promotes inequalities, women subordination, and various other forms of social injustices. For example, the Christian religious text (bible) depicts a stereotype gender role for women, which legitimizes the Patriarchy social system by directing women to be subordinate to their husbands (Ephesians 5, vs. 22-24; Peter 3, vs. 1; Colossians 3, vs. 18) in a way akin to negating gender equality. In the Jewish faith tradition, morning prayers, which epitomize the height of gender inequality, are used to reinforce man’s superiority over woman, in which the man blesses God for not creating him a woman (Andersen, 2006). Although, Islam condemns the oppression of women; it supports the patriarchy system viewed by feminist theology as oppression of women (Legenhausen, 2008). Islamic faith tradition also supports the traditional gender role which is anchored on the concept of wife and motherhood as the primary role of the woman ‘after that of servant of God’ (Legenhausen, 2008). Nasrin (2002) argues that the level of cruelty with which Islamic religion treats Muslim women is shocking and asserts that coupled with the denial of human rights reinforced by various cases of human right abuses of Muslim women around the world. For example, the various cases of women sentenced to death under the Sharia law, by stoning for alleged indulgence in illicit sexual
relationships, while their male counterparts are not brought to justice (Robinson, 2002). This has led some modernist Muslims to claim that, the exclusion, domination and subordination of women reinforces the stereotypes of women as silenced victims (King, 2009). The implication of this is the derailment of any development programme aimed at gender equality as well as poverty reduction initiatives particularly those affecting women.

Although religion contributes to gender inequality and social injustices, it has been an invaluable source of power to feminist theology and other socio-political ideologies that helped in understanding liberation (Andersen, 2006; Berger, 2003; Ferris 2005; Hanlon, 1991). FBOs are also remarkable for providing opportunities for education, leadership and organisational development skills for women. The divergence of interpretation of religious texts of the various faith traditions has led to the perception that religious beliefs legitimize gender inequality (Gilkes, 2000).

In the trying times of GBV, FBOs have been accused of being a sleeping watchdog, a paper umbrella in the rain; they have been accused of blocking attempts by secular organizations towards GBV preventions, and they have been accused of harsh judgments on victims who have been abused based in some cases on misinterpretation of the scripture (Chitando, 2007). As a result, our religious institutions have been converted into places of exclusion instead of places of refuge and solace where love and encouragement take centre stage. While in some cases these accusations have been regrettably justified, it has not been so always and everywhere. FBOs have always been in constant communication with their people on matters of gender-based violence.

According to World Council of Churches, the very relevance of the churches will be determined by their response, and it is a challenge for the church to re-examine the human condition that promote the GBV pandemic and to sharpen their awareness of peoples’ humanity, broken relationships and unjust structures and their own compliancy and complicity (WCC, 1997). Through this lens GBV has become a sign of the times, calling all faith-based organizations to a
fresh resolve to address the challenges directly. Faith in God has and continues to play an important role in the lives of so many people worldwide. Most people in the world identify themselves as members of one faith community or another and such faith communities are very significant in influencing people’s behaviors and attitudes.

According to Jeff Levind, all religions promote belief systems known as doctrines.

Gender--based violence is an extremely complex phenomenon with deep roots in power imbalances between men and women, gender-role expectations, self-esteem and social institutions. As such, it cannot be addressed without confronting the underlying cultural beliefs and social structures that perpetuate violence against women. In many societies women are defined as inferior and the right to dominate them is considered the essence of maleness itself. Confronting violence thus requires re-defining what it means to be male and what it means to be female (Pliilltps-Barrasso, 2009). The passage of the Convention of the Elimination of all forms of Discrimination against Women (CEDAW) in 1979 revolutionized advocacy for women's rights in global, national and local spaces. Subsequent global conferences on women, especially those convened by the United Nations, squarely put women's rights issues on national agendas. Specifically, the naming of violence against women a human rights violation to be considered as a moral and legal crime by CEDAW, the Vienna Declaration and the Beijing Platform for Action reinvigorated local activism against gender based violence (Ward, 2005).

Research from the United States indicates that certain individual factors can increase the likelihood of violence on the part of any particular man including excessive alcohol use, a history of physical or sexual abuse within his own childhood, witnessing parental violence as a child and unemployment. None of these factors accounts for why women are so
systematically the targets. Only the pervasive existence of cultural, economic, and social systems that subordinate women can explain the overall pattern of abuse.

According to Tamale (2001) any response to violence must meet the immediate needs of victims while working to combat the attitudes, beliefs and social structures that encourage gender-based abuse. There is need to reform laws that discriminate against women in addition to expanding legal, medical, psychological, and advocacy services for victims (Rumbold and Keesbury 2008). There is also need to enact and enforce laws against battering, rape, and sexual abuse. Training professionals in how to identify and respond to abuse and expanding the availability of shelters and safe home networks have been suggested as ways of addressing with the impact of GBV. Incorporating gender awareness training, parenting skills, and non-violent conflict resolution into family life curricula; eliminating gratuitous violence from the media; and ensuring alternatives for women by expanding access to low income housing, credit, child care, and divorce (Judith, 2004).

Experience has shown that strategic intervention on the part of the community, women's organizations, and the state, can save lives, reduce injury, and lessen the long term effects of victimization on women and their children. Kabira and Nzioki (2003) indicate that women in Kenya have formed women groups popularly known as chamaas. These chamaas were found to play a pivotal role in disseminating information on GBV and also empowering women across all social classes in the Kenyan society to stand up and speak out on GBV.
Kithaka (2008) describes sexual offences legislations cropping up in the region in the last two decades as intended to prevent and protect people from harmful and unlawful gender violence acts. Armed with these International Human Rights instruments, women human rights activists around the world campaigned for legal reform to bring local laws up to universal standards. In Kenya the Sexual Offences Bill despite it watering down in parliament is a strong deterrent and a firm step by the policymakers to address the issue of GBV against women and girls in Kenya.

According to Borwankar (2008) approaches towards GBV often do not recognize or quantify the costs of gender-based violence to a society. Bennet, (2005) note that given that GBV has serious consequences not only for health, but also for unemployment, productivity and overall economic development, a cost-based analysis of gender inequality and GBV might encourage stronger leadership of the issue, which is urgently needed to develop a multi-sectoral approach towards combating GBV. National planners must determine how they are to rectify the weak or insufficient policy response to GBV, by addressing legal inequality for women and increasing legal access and education. Leaders must also recognize the nexus between high levels of gender-based violence, gender inequality, and HIV/AIDS, and 'develop overt measures to tackle all three issues in different sectors of society (Machera, 2004)). Rumbold and Keesbury (2008) argued that gender-based violence is fundamentally a governance issue, and it requires African leadership and engagement on this issue like we have never seen before.
2.15 CONCEPTUAL FRAMEWORK

The study will be guided by Theory of Reasoned Action and Gender Schema Theory.

2.15.1 THEORY OF REASONED ACTION

The Theory of Reasoned Action was first introduced in 1967 by Fishben in an effort to understand the relationship between beliefs, attitudes, intentions and behaviour. According to this theory, human beings are usually quite rational and make systematic use of information available to them (Ajzen and Fishbein 1980). This theory like any theory based on behaviour change holds more promise of offering some cumulative guide to the development of effective behavioural interventions for GBV (Terry, 1993).

The theory of Reasoned Action has the premise that GBV can be managed by controlling human voluntary action. The theory tries to point out ways to encourage behaviours that reduce gender-based violence and discourage behaviours that have high probability of committing the violence. According to the Theory of Reasoned Action, a person’s intentions are a function of two basic determinants, one personal in nature and the other reflecting social influence (Terry, 1993). The personal factor refers to the person’s judgement that performing behaviour is good or bad. The second determinant of intention is the person’s perception of the social pressure put on him to perform or not perform the behaviour in question (Ajzen and Fishbein, 1980). Based on this argument, a person’s attitude toward behaviour is determined by the set of salient beliefs he holds about performing the behaviour and which makes it critical for faith-based leaders to influence the attitude of their followers’ beliefs about GBV.
Since GBV is propelled by behavioural factors, theories about how individuals change the behaviours have provided the basis for most preventive efforts, even the nature of faith-based organizations at the grassroots levels in all parts of the society, religious leaders exert influence over and receive trust from their followers (Guiney, 2012). This research will be guided by the theory of reasoned action arguing that due to their influence, religious leaders have the capacity to change behaviours of their followers by not only changing perceptions of GBV but stamping out the problem by exposing the survivors of gender-based violence to persuasive communication in the hope that they will be influenced by the information (Ajzen&Fishbein, 1980).

2.15.2 GENDER SCHEMA THEORY

Gender schema theory was developed by Sandra Bem in 1981 as a cognitive theory to explain how individuals become gendered in society, and how sex-linked characteristics are maintained and transmitted to other members of a culture. Gender-associated information is predominantly transmuted through society by way of schemata, or networks of information that allow for some information to be more easily assimilated than others (Ibid). There are individual differences in the degree to which people hold these gender schemata. These differences are manifested via the degree to which individuals are sex-typed.

Core gender identity is tied up in the sex typing that an individual undergoes (Ibid). This typing can be heavily influenced by child rearing, media, school, and other forms of cultural transmission. Bem refers to four categories in which an individual may fall: sex-typed, cross-sex-typed androgynous, and undifferentiated. Sex-typed individuals process and integrate information that is in line with their gender. Cross-sex-typed individuals process and integrate information that is in line with the opposite gender. Androgynous individuals process and integrate traits and
information from both genders. Finally, undifferentiated individuals do not show efficient processing of sex-typed information (Ibid).

Admitting that gender schema theory is a theory of process and not content, this theory can help explain some of the processes by which gender stereotypes become so psychologically ingrained in our society (Ibid). Specifically, having strong gender schemata provides a filter through which we process incoming stimuli in the environment. This leads to an easier ability to assimilate information that is stereotype congruent, hence further solidifying the existence of gender stereotypes. Within adolescent development, Bem hypothesizes that children must choose among a plethora of dimensions, but that gender schemas lead to the regulation of behaviors that conform to the cultural definition of what it means to be male or female (Ibid). Additionally, Bem asserts that there is also a heterosexuality subschema, which likely encouraged the development of gender schemas. Most societies treat exclusive heterosexuality as the benchmark for proper masculinity and femininity—that is, heterosexuality is the norm. Furthermore, the heterosexuality subschema asserts that men and women are supposed to be different from one another. It is hypothesized that this is why cross-sexed interactions are likely to be coded sexually. Sex-typed individuals have a general readiness to invoke the heterosexuality subschema in social interactions, behaving differently towards individuals of the opposite sex that they find attractive versus unattractive. Some of the early tests of gender schema theory came in the form of memory and other cognitive tasks designed to assess facilitated processing of sex-typed information (Bem, 2012).

This research found that younger participants remembered more traits associated with their sex, as well as processed sex-type congruent information more efficiently, suggesting that the gender
schemata possessed by sex-typed individuals help to assimilate sex-associated information into one’s self-concept. Bem showed that when given the option of clustering words by either semantic meaning or gender, sex-typed individuals are more likely to use the gender clustering system, followed by undifferentiated individuals. Cross-typed individuals had the lowest percentage of words clustered by gender. In the same vein, sex-typed individuals are faster than non-sex-typed individuals when processing information to make schema consistent judgments. Sex-typed individuals are also slower when processing information for schema inconsistent judgments. Later, it was shown that sex-typed and cross-sex-typed individuals confuse members of the opposite sex more often than androgynous or undifferentiated (Frable, Bem, 1985). Further evidence comes from (Martin, Halverson, 1983) who demonstrated that gender schemas are used and occasionally modified to fit stereotypes.

A strong source of sex-typing comes from the rearing practices of parents. Bem offers strong suggestions for preventing the sex-typing of children, including the prevention of access to media that promotes sex-typing, altering media and stories to eliminate sex-typing information, and modeling equal roles for mothers and fathers in the household. For example, Bem edited the books that her children read to create a more androgynous view. This included, for example, drawing long hair and feminine body characteristics on male figures (Bem, 2012).

Ultimately, however, this is somewhat limited because children will become exposed to some of this sex-typing information, particularly when they begin attending school. Therefore, Bem suggests teaching alternative schemata to children so that they are less likely to build and maintain a gender schema. Some examples include an individual differences schema, where children learn to process information on a person-by-person basis rather than make wide
assumptions about groups based on information from individuals. Also, providing children with a sexism schema, where children learn to process sex-typed information through a filter that promotes moral outrage when sexist information is being promoted, can assist in providing children with the resources to not only keep from becoming sex-typed but also promote positive social change (Martin, Halverson, 1983). Bem wished to raise consciousness that the male/female dichotomy is used as an organizing framework, often unnecessarily, especially in the school curriculum. She stressed that the Omni relevance of gender has a negative impact on society, and that the gender schema should be more limited in scope. Within the feminist lens, androgyny is not radical enough, because androgyny means that “masculine” and “feminine” still exist. Rather, society should decrease the use of the gender dichotomy as a functional unit, and be a schematic (Martin, Halverson, 1983).

Gender schema theory is useful in this study because it recognizes that gender is a social construction. The roles society gives to women and men are human made not divinely assigned. The beliefs and practices that we have concerning male and female are also human made and can be changed especially the negative beliefs that encourage gender based violence. The type of socialization the society gives to her members determines how her members behave. If the society educate her members that both female and male are important and that each should be treated with respect and allowed to exploit their potential, then gender based violence will be highly reduced.
2.8 CONCEPTUAL FRAMEWORK

Gender-based violence will be reduced when agents of social change like faith-based organizations work with other players like Non-Government organizations to campaign against gender-based violence which will help people to change their attitude and behaviour and work towards reducing gender-based violence.

2.16 SUMMARY

The review of the literature has shown that some studies on the issue of gender--based violence have been undertaken and reveal that GBV does exist in Kenya and that it is an issue that needs to be addressed if women who are the most affected have to participate in national development and also enjoy their human rights. Literature has also revealed that gender based violence is experienced at three levels, which are the family, the community and the state. These three levels are mutually reinforcing. The review has also shown that at the root of the problem of gender--based violence, lay the gendered nature of society, where society places a higher value on males
than females. In addition the unequal relations of power make women and girls vulnerable to violence.
CHAPTER THREE– RESEARCH METHODOLOGY

3.1 INTRODUCTION

This chapter presents the research methodology that was used in conducting the study. It begins with a discussion on the research design followed by the sampling design. The researcher later describes the study population and the procedures employed in the process of collecting the research data. The chapter further documents how data was processed and analyzed. The chapter ends with a discussion of ethical issues that were observed in the course of study.

3.2 RESEARCH DESIGN

This study adopted an exploratory and descriptive survey research design. Exploratory research design involved the analysis and review of literature relevant to the field of study. Exploratory research design was selected on the basis that it allowed for the use of both quantitative and qualitative techniques. It also allowed the use of both primary and secondary data. While secondary data gave more impetus as propounded by other scholars, the primary data gave first-hand information on the key issues under the study. Descriptive survey design is a method of collecting information by interviewing or administering a questionnaire to a sample of individuals (Orodho, 2003). The main feature of survey research design is to describe specific characteristics of a large group of persons, objects or institutions, through questionnaires (Jaeger, 1988). Besides, the design was used because of its descriptive nature in order to assist the researcher in collecting data from members of the sample for the purpose of estimating the population parameters and getting the opinions of the respondents on the roles of Faith Based organizations in curbing gender based violence.
3.3 STUDY AREA

The study was conducted in Nairobi county Kenya. Nairobi is the capital and largest city of Kenya. It is famous for having the Nairobi National Park, the world’s only game reserve found within a major city. The city and its surrounding area form Nairobi County, whose current governor is Evans Kidero. The name "Nairobi" comes from the Maasai phrase Enkare Nairobi, which translates to "cool water". The phrase is also the Maasai name of the Nairobi river, which in turn lent its name to the city. However, it is popularly known as the "Green City in the Sun", and is surrounded by several expanding villa suburbs.(Nairobi county website)

Nairobi was founded in 1899 by the colonial authorities in British East Africa, as a rail depot on the Uganda Railway. The town quickly grew to replace Machakos as the capital of Kenya in 1907. After independence in 1963, Nairobi became the capital of the Republic of Kenya. During Kenya's colonial period, the city became a centre for the colony's coffee, tea and sisal industry. The city lies on the River Athi in the southern part of the country, and has an elevation of 1,795 meters (5,889 feet) above sea level(Nairobi County website).

With a population of about 3.36 million estimated in 2011, Nairobi is the second-largest city by population in the African Great Lakes region after Darussalam, Tanzania. According to the 2009 census, in the administrative area of Nairobi, 3,138,295 inhabitants lived within 696 km² (269 sq mi).

3.3.1 WHY NAIROBI COUNTY

Nairobi is the 14th-largest city in Africa, including the population of its suburbs. Nairobi is one of the most prominent cities in Africa, both politically and financially. Home to thousands of Kenyan businesses and over one hundred major international companies and organizations,
including the United Nations Environment Programme (UNEP) and the United Nations Office at Nairobi (UNON), Nairobi is an established hub for business and culture. The Nairobi Securities Exchange (NSE) is one of the largest in Africa and the second-oldest exchange on the continent. It is Africa's fourth-largest exchange in terms of trading volume, capable of making 10 million trades a day (Nairobi County website).

Nairobi County is a multi-cultural, multi-religious, multi-racial place. All the 42 tribes in Kenya are represented. It is also a place where you will find the richest people in Kenya but also find the poorest people in Kenya. It is also a place where you will find the most religious people in Kenya but also find those who refer themselves as atheists. It is in Nairobi County where you find the most recent sects but also find the oldest church building in Kenya for example all saints cathedral Nairobi. It is the home of most of the major FBOs and other government and non-government organizations. Nairobi County is so diversified and hence a very good research field because it represent the face of Kenya.
Figure 3.1: Map showing Nairobi County

3.4 STUDY POPULATION

3.4.1 FELLOWSHIPS OF CHRISTIAN COUNCILS AND CHURCHES IN THE GREAT LAKES AND HORN OF AFRICA (FECLLAHA)

The Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa (FECLLAHA) is a regional ecumenical body consisting of councils and churches reaching about 1000 members in Nairobi county (FECLLAHA Publications 2012-2015). It provides a platform for members to share perspectives on issues of common concern, particularly with regard to peace building and conflict transformation and to foster strong ecumenical cooperation in taking ownership and responsibility for problems in the region and proactively seek solution to them. It aims at building equitable and peaceful communities where individuals live in harmony and justice within the Great Lakes and Horn of Africa. Their main office in Nairobi county is at the Nairobi Baptist Church compound, Off Ngong Road (FECLLAHA website).

3.4.2 AMANI COMMUNITIES AFRICA

Amani Communities Africa (Formerly Family Mediation & Conciliation FAMEC) was founded in 2001 by a group of women lawyers in a quest for peace, justice and equity. It was born out of the need to impact positive conflict resolution skills in families, churches, and local communities as well as empowers women and girls to know and enjoy their rights. Amani Communities Africa is premised on the belief that only people who can freely and abundantly enjoy their human rights can achieve or experience sustainable peace. That equality, peace and development are inextricably linked. The organization is based in Nairobi Kilimani area and in Ngong town and has about 500 active members in Nairobi region (ACA publications, 2010–2015).
3.4.3 THE CIRCLE OF CONCERNED AFRICAN WOMEN THEOLOGIANS

The circle of concerned African women theologians is a fellowship of African Women who do research on women, religion and culture and try to empower women through their publications. It was started in 1989 at Accra, Ghana and has chapters in Kenyatta University, St. Paul’s University, Moi University, Nairobi University, and All Saints Cathedral Diocese Nairobi among others. It has about 500 members in Nairobi region most of them serving in churches and others teaching in both public and private universities around Nairobi(Circle website, 2015) Most of the circle work is coordinated from St. Paul’s University and Kenyatta University.

3.4.4—MUSLIM ADVOCACY NETWORK AGAINST DOMESTIC VIOLENCE

The Muslim Advocacy Network Against Domestic Violence (MANADV) is a national network comprised of predominantly Muslim advocates addressing domestic violence in Muslim communities through diverse faith-based and mainstream approaches and agencies.

The aim of MANADV is to bring together a national network of advocates, service providers, legal and health care professionals, activists, researchers, scholars, and community based organizations to strengthen culturally appropriate advocacy, encourage dialogue and collaboration, develop models and analyses, and disseminate resources. It reaches about 500 members in Nairobi county(MANADV publications 2013-2015)

3.5 TARGET POPULATION

Population is a group of individuals, objects or items from which samples are taken for measurement (Kombo, Tromp (2006). It is an entire group of persons, or elements that have at least one thing in common. The target population in this study were 2500 respondents who are
members of the four major FBOs that is FECCLAHA, AMANI, THE CIRCLE and MANADV dealing with gender and violence in Nairobi county. (FBOs websites and leaders information)

3.6 SAMPLE SIZE

This section describes the sample population and the sampling methods used in the process of undertaking the study. Mugenda and Mugenda(2003) define sampling as a process of selecting a number of individuals for a study. Usually such selected individuals represent the larger group or the entire population. Cooper and schindler(2007) have argued that the basic idea of sampling is that it allows inference to be drawn about the entire population. According to gay(1987) the minimum acceptable sample size for a descriptive and explorative research is 10% of the population.

The sample size of this research was two hundred and fifty (250) respondents out of the total population of 2500 members of Faith based organizations dealing with GBV in Nairobi County. These included leaders and members of these FBOs, some security officers and victims of GBV. According to Nachmias and Nachmias(1996) the entire set or relevant unit of analysis or data is called the population. The complete enumeration popularly known as census may not be feasible either due to non availability of time or due to the high cost involved Srivastava(2007). The sample size then was drawn from the target population based on the principle of 10% rule according to Mugenda and Mugenda (2003). Out of the 250 respondents taken, 50 were MANADV leaders and Members, 150 were leaders and members of FECCLAHA, AMA and the CIRCLE and were issued with the questionnaires while 50 were survivors of gender-based violence and provincial administration officials. Purposeful sampling was used to select members to ensure that there is gender balance and all age brackets are represented.
Table 3.1: Sampling Frame

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Population (Frequency)</th>
<th>Percentage</th>
<th>Sample Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>MANADV Members and leaders</td>
<td>500</td>
<td>10%</td>
<td>50</td>
</tr>
<tr>
<td>FECCLAHA, AMA, the CIRCLE Members and leaders</td>
<td>1500</td>
<td>10%</td>
<td>150</td>
</tr>
<tr>
<td>Survivors of gender-based violence and provincial administration officials</td>
<td>500</td>
<td>10%</td>
<td>50</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2500</strong></td>
<td><strong>10%</strong></td>
<td><strong>250</strong></td>
</tr>
</tbody>
</table>

Source: Data (2015)

3.7 SAMPLING TECHNIQUES

Sampling is defined as a process of selecting representative units like people, organizations from an entire population of interest (Trochim MK William, 2008) This allows for fair generalization using the sample. To achieve its objectives, the study employed different techniques.

Purposeful sampling was used to identify the four faith based organizations. Three of them were based on Christian faith while one of them, the MANADV is based on Muslim faith. Although majority of Nairobi population are Christians, the few people who confess Islam faith should not be ignored.
Simple random sampling was used to identify leaders and members of the faith based organizations to be interviewed. According to Nachmias and Nachmias (1996) simple random sampling is a procedure that gives each of the total sampling units of the population an equal and known probability of being selected. The researcher consulted the leaders and members of the four faith based organizations and either requested them to fill the questionnaires or have an oral interview.

Purposeful sampling was used to identify survivors of gender based violence and provincial administration officials. Mugenda and Mugenda (2003) argues that purposeful sampling allows a researcher to use cases with required information with respect to the objectives of the study. This sampling technique was therefore selected basing on the fact that it allowed the researcher target persons and institutions that have the information that the study sought to obtain. Gender and age was also considered in selecting this target group.

3.8 RECRUITMENT AND TRAINING OF RESEARCH TEAM

Research team was objectively recruited with a minimum qualification of undergraduate degrees. The team comprised of 4 Research Assistants who were responsible for obtaining consent from participants and administration of questionnaires, recording participants during focused group discussions. The research assistants helped the researcher in data collection and coding.

They were trained for 3 days on the purpose of the study, consent acquisition, administration of questionnaire, data collection, focused group discussion and data entry. The training helped in minimizing biasness which may be associated with Data Collection, data processing and even consenting.
3.9 DATA COLLECTION METHODS AND TECHNIQUES

This section presents a discussion on the mode of data collection used in the study. Nachmias and Nachmias (1996) have pointed out that data are obtained by investigators or other records through observations about the phenomenon under study and isolates four general forms of data collection. These include observation method, survey research incorporating personal interviews and administering questionnaires and content analysis.

The researcher used both primary and secondary data in the study. Questionnaires and an interview schedule were used to collect primary data. A questionnaire was designed to elicit responses of general information on the role of faith based organizations in curbing gender based violence. Open and closed ended questions were used to get opinions and facts to enhance objectivity of the respondents.

Questionnaire was considered suitable tools for this study because it enabled the researcher collect information from the large sample. Burns (2000) has noted that questionnaire is a useful method of gathering data on descriptive or current events, conditions or attributes of a population. In addition, they give respondents more time to give their thoughts, opinions as well as they are unbiased and less time consuming to administer.

The interviews were used as an exploratory tool to identify possible variables and relationships to validate unexpected results revealed by data from the questionnaires. Interviews with key informants helped the researcher clarify and illustrate the role of faith based organizations in curbing gender based violence. Both formal and informal interviews were used. Informal interviews were conducted whenever the researcher encountered targeted respondents. Formal interviews were conducted after a formal approach had been initiated especially with leaders of faith based organizations and provincial administration officials. The interview schedule was used.
to elicit information from the targeted respondents. Interviews assisted the researcher to gather supplementary data as well as verify some points that emanated from the questionnaires.

3.9.1 PRIMARY DATA

i. Field research

Data was collected through actual field research using questionnaires and interview guides in order for the study to capture specific and detailed information from the respondents’ narrations, suggestions, opinions, views and comments on the role of faith Based Organizations in combating gender based violence. The interviews were structured in a way that a list of issues that is investigated was prior to the interview. This data constituted the main source of information for the study. 40 leaders of faith-- based organizations and 10 members of provincial administration were interviewed.

ii. The questionnaire

150 questionnaire were administered to some members of faith based organizations. Closed-ended questions were used to give a choice of answers, some questions were required, for example, a ‘yes’ or ‘no’ response. Structured questions were used in order to allow for an easy comparison and quantification of the results. On the other hand, open-ended questions were used in order to leave respondents free to express their answers as they wished. This method was used because there is need for more specific and detailed information in order to facilitate comparison of the reactions of different participants.

3.9.2 FOCUS GROUP DISCUSSION

Focus group discussions were held to elicit information from survivors of gender--based violence that was selected randomly. The group of 10 participants per group was guided by both the
researcher and a moderator (research assistant) who introduced the topics for discussion and helped the group to participate in lively discussions. There was a written focus group discussion guide. The members of the five groups were allowed to participate fairly and give their contributions especially on questions relating to the effects and Successes of Faith-- Based Organizations in trying to eliminate--Gender Based Violence in the Kenya. The Focus group discussion was used so as to get diverse information relating to the study topic (Krueger, 1988).

3.10 SECONDARY DATA
The researcher used secondary data from relevant books, Government and NGO’s reports, Church reports, journals, newspapers, internet materials and any other materials that was relevant to the research.

3.11 VALIDITY OF RESEARCH INSTRUMENTS
Validity is the extent to which research results can be accurately interpreted and generalized to other populations. It is the extent to which research instruments measure what they are intended to measure (Oso and Onen, 2008) on the other hand; reliability is the measure of how consistent the results from a test are. A pilot test was conducted in order to test for reliability and validity of the data collection instruments. Pre-testing is considered important in this study because comments and suggestions by respondents during pre-testing help to improve the quality of the research instruments (Mugenda and Mugenda, 2003). Pre-testing was meant to reveal deficiencies in the instruments. For example, unclear instructions, insufficient writing space, vague questions and wrong numbering may be revealed and corrected, thus improving the instrument. The content validity of the research instrument was evaluated through the actual administration of the pilot group. The study used both face and content validity to ascertain the validity of the
questionnaires. Face validity is actually validity at face value. As a check on face validity, test/survey items were sent to the pilot group to obtain suggestions for modification (Lacity and Jansen, 1994). Content validity draws an inference from test scores to a large domain of items similar to those on the test (Polkinghorne, 1988). Content validity is concerned with sample-population representativeness i.e. the knowledge and skills covered by the test items should be representative to the larger domain of knowledge and skills (Cronbach, 1971). Internal validity was maximized by collecting filled up questionnaires immediately after completion to prevent alteration of responses by respondents.

3.12 RELIABILITY OF RESEARCH INSTRUMENTS

Reliability is the consistency of a measurement, or the degree to which an instrument measures the same way each time it is used under the same conditions with the same subjects. In short, it is the repeatability of measurement (Golafshani, 2003). Kerlinger (1964, pp.430,) as cited by Glyn (2000) defines reliability as ‘Accuracy or precision of a measuring instrument’.

The questionnaires were administered twice at two different times in time during pre-test. This was used to assess the consistency of a test across time. For reliability analysis Cronbach’s alpha were calculated by application of SPSS. The value of the alpha coefficient ranges from 0 to 1 and may be used to describe the reliability of factors extracted from dichotomous (that is, questions with two possible answers) and/or multi-point formatted questionnaires or scales (that is., rating scale: 1 = poor, 4 = excellent). A higher value shows a more reliable generated scale. Cooper & Schindler (2008) indicated 0.7 to be an acceptable reliability coefficient.
3.13 DATA ANALYSIS AND PRESENTATION

The term analysis refers to the computation of certain measures along with searching for patterns of relationship that exist among data groups Kothari (2004). In this study the research data was coded and analyzed using the procedure detailed below.

All the returned questionnaires and written answers to interviews were checked for accuracy, completeness, uniformity and serialization. This allowed the researcher to seek out any responses that had errors and organize the collected data in a systematic manner. After editing, the information and data collected was categorized to determine the various categories of data that facilitated analysis. Closed ended questions were a category by themselves while open ended questions were quantified to give them numerical values before they were processed. Statistical package for social sciences (SPSS) was used to analyse the coded data.

Quantitative and qualitative data was collected from the field. Data obtained from the interviews, observations, FGDs and questionnaire was organized, edited and coded according to the research objectives and research questions of the study. Quantitative data was analysed using the statistical package of data analysis (SPSS) version 22.0. Qualitative data was categorized into themes basing on research objectives. The quantitative data were presented in percentages and frequencies in the form of charts and graphs for interpretation and clarity of meaning. Through description, comparison and interpretation, conclusions from data was presented in form of chapters as per the specific objectives. The processed data was summarized using tables and figures and presented in frequencies and percentages. The presentation was based on the following thematic areas which are based on the research objectives. Qualitative data approach on the other hand was used to present data which was collected using interview method. The information from the interviews was grouped according to their respective themes. The themes fell under the respective research
area which was informed by research objectives. The key responses based on respective themes was cited in verbatim or reported. These, along with quantitative data, formed the basis of drawing conclusions and recommendations.

3.14 PILOT TEST RESULTS

To establish validity, the research instrument was given to two experts who were experienced in the role of faith-based organizations in curbing gender based violence in Nairobi county Kenya to evaluate the relevance of each item in the instrument in relation to the objectives. The same were rated on the scale of 1 (very relevant) to 4 (not very relevant). Validity was determined by use of content validity index (CVI). CVI was obtained by adding up the items rated 3 and 4 by the experts and dividing this sum by the total number of items in the questionnaire. A CVI of 0.747 was obtained. Oso and Onen (2009), state that a validity coefficient of at least 0.70 is acceptable as a valid research hence the adoption of the research instrument as valid for this study.

The questionnaires used had Likert scale items that were to be responded to. For reliability analysis Cronbach’s alpha was calculated by application of SPSS. The value of the alpha coefficient ranges from 0 to 1 and may be used to describe the reliability of factors extracted from dichotomous (that is, questions with two possible answers) and/or multi-point formatted questionnaires or scales (i.e., rating scale: 1 = poor, 5 = excellent).

A higher value shows a more reliable generated scale. Cooper & Schindler (2008) indicated 0.7 to be an acceptable reliability coefficient. The study involved questionnaires from 7 respondents, who were selected to participate in the pilot study. Since, the alpha coefficients were all greater than 0.7, a conclusion was drawn that the instruments had an acceptable reliability coefficient and were appropriate for the study.
3.15 ETHICAL CONSIDERATIONS

Ethical issues were considered when conducting this research. DeVos (1998) defines ethics as a set of widely accepted moral principles that offer rules for, and behavior expectations of the most correct conduct towards experimental subjects and respondents, sponsors, other researchers, assistants and learners. As Babbie (1990) suggests, participants were informed about the potential impact of the investigation.

As such, the standard ethical procedure for conducting research was strictly adhered to. Furthermore, permission to conduct the study was sought and research permit obtained from NACOSTI. Following that, written letters of informed consent was given to all participants. Afterwards, participants were thoroughly informed about the nature and motivation of the study and what were expected of them. This was done in order to allow participants to voluntarily make the choice to participate. Confidentiality and anonymity was thoroughly assured to all participants. All participants were informed of their right to withdraw from the participating at any given time should some form of discomfort emerge. The study was strictly voluntary with no financial rewards or benefits. Participants were allowed to withdraw at any stage if they so wish and no coercion or force was used against them. There was no harm or injury that was inflicted on the participants. Utmost care was taken to ensure that all work borrowed from other scholars was acknowledged both as citations and also as in the references.
CHAPTER FOUR -
THE NATURE OF GENDER-- BASED VIOLENCE IN NAIROBI COUNTY

4.1 INTRODUCTION

This chapter discusses the interpretation and presentation of the findings of research objective one, the nature of gender based violence in Nairobi County. It starts by presenting the background information of the participants and then the findings of the analysis of research objective one. Descriptive statistics have been used to discuss the findings of the study.

4.2 RESPONSE RATE

The targeted sample size was 250 participants who comprised of the MANADV Members and leaders, FECCLAHA, AMA, the CIRCLE Members and leaders, Survivors of gender-based violence and provincial administration officials including the police and administration officials. Those filled and returned questionnaires, interview guide and focus group forms were 225 respondents making a response rate of 90%. According to Mugenda and Mugenda (1999), a response rate of 50% is adequate for analysis and reporting; a rate of 60% is good and a response rate of 70% and over is excellent. This means that the response rate for this study which was established to be 90% was excellent and therefore enough for data analysis and interpretation.
Table 4.1: Response Rate

<table>
<thead>
<tr>
<th>Questionnaires</th>
<th>Frequency</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Response</td>
<td>225</td>
<td>90%</td>
</tr>
<tr>
<td>Non-response</td>
<td>25</td>
<td>10%</td>
</tr>
<tr>
<td>Total</td>
<td>250</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

*Source: Data, 2015*
Table 4.2: Reliability Results

<table>
<thead>
<tr>
<th>Variable</th>
<th>Cronbach’s Alpha</th>
<th>Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encouragement and non-violent</td>
<td>.71</td>
<td>2</td>
</tr>
<tr>
<td>Increasing awareness</td>
<td>.73</td>
<td>1</td>
</tr>
<tr>
<td>Agents of social change</td>
<td>.75</td>
<td>2</td>
</tr>
<tr>
<td>Changing attitude and behaviour</td>
<td>.77</td>
<td>1</td>
</tr>
</tbody>
</table>

*Source: Data, 2015*

4.3 Background Data

The respondents were asked to indicate their age, gender, the FBO the respondents got their assistance from, their highest level of education and their religion. The results were as shown below.
4.3.1 RESPONDENT'S AGE

The respondents were asked to indicate their age. The results were as shown in table 4.3.

Table 4.3: Respondent’s Age

<table>
<thead>
<tr>
<th>Age bracket</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-25</td>
<td>35</td>
<td>15</td>
</tr>
<tr>
<td>26-35</td>
<td>38</td>
<td>17</td>
</tr>
<tr>
<td>36-45</td>
<td>55</td>
<td>24</td>
</tr>
<tr>
<td>46-55</td>
<td>37</td>
<td>16</td>
</tr>
<tr>
<td>56 and above</td>
<td>65</td>
<td>28</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>225</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Data, 2015

From the study findings, 28% , 63 of the respondents indicated that they were aged 56 years and above, 24% , 54 of them indicated that they were aged between 36 and 45 years, 17% , 38 of the respondents indicated that they were aged between 26 and 35 years, 16% , 36 of them were aged between 46 and 55 years and 15% i.e. 33 of the respondents indicated that they were aged between 15 and 25 years. The study above shows that most of the respondents were aged 56 and above years as indicated by 28% , 63 of the respondents. However, other age brackets were well represented to carry the study out.

Majority of the respondents, 72% , 162 respondents were below 56 years while the rest 28% were above 56 years. Since most of the Kenyan population is below 40 years, it is important to consider the views of the young people and in the study, they were well represented. The views of the older people were also represented and therefore making the study balanced.
4.3.2 Gender of the Respondent

The respondents were asked to indicate their gender. The results were as shown in figure 4.1.

Figure 4.1: Gender of the Respondent

Source: Data, 2015

According to figure 4.1, 55% of the respondents were male while 45%, 101 respondents were female. This implies that most of the respondents were male. The researcher would have wished to get equal numbers of male and female respondents but the male respondents were slightly more. However, the views of both the male and the female were well represented in the study. From the response, the researcher established that both male and female members of the society were concerned about issues of gender based violence.

4.3.3 EDUCATION LEVEL

The respondents were asked to indicate their education level. The results were as shown in table 4.4.
Table 4.4: Education level

<table>
<thead>
<tr>
<th>Education level</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>42</td>
<td>18</td>
</tr>
<tr>
<td>Primary</td>
<td>69</td>
<td>30</td>
</tr>
<tr>
<td>Secondary</td>
<td>71</td>
<td>31</td>
</tr>
<tr>
<td>College</td>
<td>33</td>
<td>15</td>
</tr>
<tr>
<td>University</td>
<td>10</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>225</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Data

From the findings of the results, 31%, 69 of the respondents indicated that they had reached secondary level, 30%, 67 of the respondents indicated that they had reached primary level, 18%, 40 of them indicated that they had none of listed education background, 15%, 33 of the respondents indicated that they had reached college level and 4%, 9 of the respondents indicate that they had reached university level. From the study, it is apparent that majority of the respondents had primary and secondary education. However, those who had no education forced the researcher to explain the content of the questionnaire to amicably capture their response.
Figure 4.2---educational level of the respondents

Source: Data, 2015
4.3.4 RELIGION

The respondents were asked to indicate their religion. The results were as shown in table 4.5.

Table 4.5: Religion

<table>
<thead>
<tr>
<th>Religion</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christianity</td>
<td>97</td>
<td>43</td>
</tr>
<tr>
<td>Muslim</td>
<td>64</td>
<td>28</td>
</tr>
<tr>
<td>Buddhist</td>
<td>9</td>
<td>4</td>
</tr>
<tr>
<td>Hindus</td>
<td>24</td>
<td>10</td>
</tr>
<tr>
<td>Traditionalist</td>
<td>31</td>
<td>14</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>225</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Data, 2015

According to the findings, 43%, 96 of the respondents indicated that they were Christians, 28%, 63 of them indicated that they were Muslims, 14%, 31 of the respondents indicated that they were traditionalist, 10%, 22 indicated that were Hindus and 4% i.e. 9 of the respondents indicated that they were Buddhist. The study above shows that majority of the respondents were Christians as indicated by 43%, 96 of the respondents. However, other religions were well represented and their views held in importance for the study.

NB. Traditionalists included former Christians or Muslims who are now more affiliated to traditional religions. They prefer to be referred as traditionalists.
4.4 NATURE OF GENDER BASED VIOLENCE IN NAIROBI COUNTY

4.4.1. KNOWLEDGE AND AWARENESS OF GBV IN NAIROBI COUNTY
Knowledge and awareness of GBV as an indicator of existence of GBV in Nairobi County was measured by the respondents’ descriptions based on their own understanding of what constituted gender based violence. The most common description was bodily harm inflicted by a man on a woman which was reported by 73.8%, 166 female and 68.9%, 155 male respondents as shown in Figure 4.4 below. The other descriptions of GBV were given as harmful traditional practice inflicted to women, physical assault, psychological harm inflicted by man on a woman and any other forms of abuse like overworking or discriminating against women. The study showed that Gender-- based violence exist and respondents were aware of it.
Respondents Who Consider GBV as Bodily Harm

![Bar chart showing percentage of respondents considering GBV as bodily harm by gender.](chart)

Source: Data, 2015

These views agree with the UNHCR (2000) and UNFPA (2003) that GBV takes form in a variety of behaviour including physical, mental, social and sexual abuse. In the UN general assembly of 1993 (UN-GA, 1993) partial list of GBV were given which included physical, sexual and psychological violence within the family. These included child sexual abuse, dowry related violence, marital rape, female genital mutilation/cut, sexual harassment, rape, women and girls trafficking, forced prostitution etc. in the face of these types of violence, World health organization (WHO, 2005) observes that violence is a leading cause for injury and disability as well as a risk factor for other physical, mental, sexual and reproductive health problems.

Grace Wangeci of gender recovery centre (GVRC), Nairobi who interacts with survivors of GBV asserts that survivors of GBV were aware that they were being abused. However, as UNHCR
report(2000) and Kenya Demographic Health Survey(KDHS, 2010) shows, survivors of GBV have no choice to refuse or pursue other options without severe social, physical or psychological consequences owing to the fact that it is rooted in a society’s social structure that is the society’s nerve centre or its systems of norms, values beliefs.

In one focus group discussions, one member explained why she could not leave her abusive husband. “I can’t walk out of him because he pays for the school fees of our four children and also pay the house rent and once in a while buy food for us”. Mercy Oduyoye (2003) summarises this situation when she says that women knows that they are being mistreated but since one cannot bite the hand that feeds them, then they prefer to remain in the abusive relationships. This is supported by FIDA study (2011) who carried their research in Kibera and kawangware in Nairobi county and found that most of the women who remain in abusive relationships high light economic challenges as the reason why they remain in abusive relationships.

These findings also agree with prof.Mombo’s argument that Individuals and communities are aware of the existence of GBV but they choose to either ignore it or adopt what she describe as Vumilia Theology where one suffers silently (Mombo, 2003). Among the kikuyu community, the term interpreted woman, means one who keeps quite. In one focus discussion group, a member explained that people going through gender-- based violence prefer to suffer silently other than expose the perpetrators of these acts to protect the family name. Many community members are concerned about the good name of their families than their physical and mental health. This explains why some women are killed by their husbands without raising any alarm. They cannot scream for help for fear of putting their husbands to public ridicule. The researcher agrees with JNK Mugambi (2011) theology of reconstruction that the community need to challenge some of these norms that add no value to the individuals and community.
4.4.2. COMMON FORMS OF GENDER--BASED VIOLENCE

Respondents were asked in an open-ended question to indicate the main forms of GBV in their community or areas. (Results are indicated in figure 4.5 below) 25.0%, 56 respondents reported that it was inflicting bodily harm (expressed as hitting/battering/beating) which was reported by 74.1%, 166 female and 68.1%, 153 male respondents. Domestic conflict (which is a general term that can include both bodily harm and verbal abuse) followed and was indicated by 51.5%, 115 female and 58.3 i.e. 131 male respondents; verbal abuse/abusive language was next (reported by 44.6%, 99 female and 49.1% 110 male respondents); and then rape which was reported by 43.7%, 98 female and 38.7%, 87 male respondents. Broadly, most of the forms of GBV identified fall into: bodily harm (battering, murder), verbal abuse, sexual violence (marital and non-marital rape, defilement), psychological harm (humiliation, frustration), economic deprivation, human trafficking, harmful traditional practices (forceful and early marriages, forceful circumcision/initiation) and restricted association and movement of women. Significant gender differences were indicated by more female (74.1%), 166 than male (68.1%), 153 respondents identifying bodily harm as the main form of GBV, which indicates a cultural gender difference whereby men are more likely to underestimate violence against women and/or women are more likely to overestimate violence against them.
As seen above, most of the respondents considered gender based violence to be mainly physical acts of violence like bodily harm inflicted by man, Sexual assaults on women and children and Harmful traditional practice on woman like female genital mutilation/cut. Discrimination on women, insubordination of men by women, overworking women, verbal abuse were judged as minor form of gender based violence. From the above findings, there was low level perception of abuses on children as GBV seems to indicate that respondents generally considered GBV only in relation to adult to adult behaviour rather than parent child behaviour. According to female respondents, common descriptions (in this case, those reported by at least 25%, 56 respondents) included sexual assault on women and children, verbal abuse, bodily harm and deprivation such as in economic and sexual terms. From this perspective, it is notable that about a quarter of the female respondents (24.3%), 54 people viewed harmful traditional practices on women such as
female circumcision and early marriage as GBV. There were a low number of women reporting psychological harm inflicted by men to women. This is probably due to lack of awareness about psychological forms of violence. The common descriptions of GBV by men included bodily harm inflicted by men to women, sexual assaults on women and children, verbal abuse and harmful traditional practices on women. There was a statistically significant difference between the views given by men and women. Most of the women argued that GBV is a bodily harm inflicted by men to women. This reflects a gender bias in which women trivialize the experience of men as well as a cultural change in which men admit being victimized by women. More women than men reported deprivation as GBV. This reflects women’s challenge to a cultural value that allows or justifies men’s dominance over women in social, cultural, economic and political relations.

The findings on forms of GBV are clearly highlighted by Key Informants in the study: one of the public administration officer commented “Cases of GBV in Nairobi are increasing by the day; rarely does a day end without someone coming to report some physical or sexual abuse” This was echoed by some leaders of faith based organizations who shared with the researcher on the type of GBV which is reported to their offices. One of the faith based organizations leaders stated that most of the cases reported to us is on Domestic violence. Another faith based organizations leader argued that rape cases are reported to her probably because she is able to link rape victims to Nairobi Women hospital where they are treated and counselled and then to FIDA lawyers who help them seek justice. The above statements of Key Informants confirm that different forms of GBV occur in Nairobi County and efforts must therefore be put in place to profile and address them.

These findings are supported by the Waki report(2008) whose findings indicated that approximately 524 or 80% of survivors of GBV treated at Nairobi women’s hospital alone
suffered from rape and defilement while 10%, 65 were cases of Domestic violence and the remaining 10% consisted of other types of physical and sexual assault. The findings are supported by Mutua(2009) and Njenga(2011) who reported that GBV in Kenya is so rampant and also by world health Organization(WHO,2003) who reported that apart from the physical violence that women go through, an estimated 100 to 140 million women worldwide are currently living with the consequences of Female genital mutilation/cut. These consequences include reduced sexual libido, complicated child birth process, low self-esteem among others. KDHS(2010) added that although most of the survivors of GBV were women, 3% of women had perpetrated physical violence to their husbands(ICF MACRO, 2010)
4.4.3 CURRENT EXPERIENCE OF GENDER-- BASED VIOLENCE

The respondents were asked whether any of them had ever experienced any acts of GBV and whether it was in the last 12 months. (Results are indicated in figure 4.6 below) 38.0%, 85 female and 20.9%, 47 male respondents have ever experienced acts of GBV. Of those who have ever experienced GBV, 37.7%, 84 female and 48.6%, 109 male respondents had experienced acts of GBV in the last 12 months. The lifetime prevalence of 38.0%, 85 people is lower, though only to a small extent, than 45.0% rate reported for women ages 15 – 49 years by the KDHS 2008/09 report (KNBS and ICF Macro, 2010). In the report, only 3% of women reported to have perpetrated violence against their spouses or partners. While the above data reiterate the vulnerability of women to GBV, they also in a significant way demonstrate the vulnerability of men as well. It is especially curious that the percentage of men reporting current prevalence is higher than that of women which (disregarding the fact that the men's sample was small) suggests increasing men's vulnerability overtime. Whether this is a fundamental change in society does require further study.

These findings are in agreement with WHO (2011) and UNPFA(2003) findings that although both female and male members of the community experience gender based violence, it is the female members who are affected by gender based violence. UNICEP(2015) agrees that while men and boys are affected by some types of GBV especially sexual violence like sodomy, more women are affected by GBV. MwendwaNjoka, (the chairperson of maendeleoyawanaume in Kenya) in a radio interview (2015) disagree that more women than men are affected by GBV arguing that more men are abused but they prefer to remain silent other than being thought weak. According to the national crime research centre report (2016), GBV involves a wide variety of agents from intimate partners, family members, teachers, pastors, office managers, public administrators etc.
according to this report, majority of the survivors chooses to remain silent unless the survivors life is threatened.
**4.4.4 NATURE OF GENDER BASED VIOLENCE EXPERIENCED**

Respondents who had experienced acts of GBV in the last 12 months were asked to state what had happened to them. (Results are indicated in figure 4.7) These results showed marked differences which simply relate to physiological attributes between men and women. For women, the commonest experiences as indicated by at least 25.0%, 56 respondents were: slapped or thrown something that could hurt (reported by 62.2%, 139 female and 47.1%, 105 male respondents); kicked, dragged and beaten (reported by 52.2%, 117 females and 5.9%, 13 males;
pushed or shoved which was reported by 42.2%, 94 females and 29.4%, 66 males; hit with a fist or something that could hurt (reported by 30.0%, 66 females and 5.9%, 13 males. According to the above findings, for men, the corresponding commonest experiences were: slapping or throwing something at someone and pushed or shoved. Statistical differences between men and women were indicted by more women than men being kicked and shoved and hit with fist or something else that could hurt. Although not statistically significant, the only act experienced by more men (23.5%, 52) than women (14.6%, 32) was being threatened or actually hurt with a panga, knife or other weapon. This indicates that while men use their muscular strength, women are likely to use weapons to compensate for their muscular limitations. Indeed, although it did not come out clearly in this study (that is, none of the men reported being burnt even though in a subsequent question a few men reported having burn injuries), it is generally reported that women do scald their victims with hot water. Still, media reports do also indicate that men use weapons against women (Note that in a survey it is not often possible for interviewers to keep tab of responses and when an inconsistent occurs they go back in the questionnaire and ask for clarification). In any case, in administering a questionnaire the respondent has right not to answer any question. Informed analysis, for instance, referring to other data sources like key informants and secondary data can assist in clarifying data and making conclusions.
According to Anderson and Anderson (2008) violence is used as a mechanism for the social control of the less powerful and serves to maintain male dominance and female subordination. Pratto (1996) agrees that violence is a by-product of motivation to maintain status and control of economic resources. Anderson and Anderson (2008) argues that males attempt to maintain their advantageous, unequal status and resources by coercing other males and females.

4.4.5. NATURE OF BODILY HARM

Experience of Sexual Violence from an intimate partner in the Last 12 Months indicate that among the women, physical force to have sexual intercourse against one’s will in the last 12 months was the most common form of sexual violence. Sexual violence causes harm to human
beings and violates their fundamental sense of self-worth. While this is held to be the case for women, it may also be the same for men. The study (Figure 4.8) shows that 15.2%, 34 female and 7.4%, 16 male respondents had ever experienced sexual violence demonstrating that sexual violence is indeed a common occurrence. The results confirmed that women carry the greater burden of sexual violence with the difference being statistically significant. The most common form of sexual violence highlighted was physical force to have sex against one’s will, reported by 90.9%, 204 female and 63.6%, 143 of the male respondents. More women (18.2%, 40) than men (7.1%, 15) were forced to perform a sexual act they found degrading and humiliating.
Figure 4.8--Victims of Sexual abuse

Nature of Sexual Abuse

Source
The United Nations Population fund report (2008) indicated that 19% of women aged 15-49 experience sexual violence. These sexual violence include sexual defilement, date rape, rape, forms of sexual harassment etc. According to Kosi (1993) date rape occurs out of the assumption that when a man has spent some money on a woman, that gives him a right to have sex with him. It also happens out of the assumption that most of the women are not clear on whether they want to have sex or not. According to one of the faith based organizations leaders, Tamar campaign aims at giving women voices so that they can clearly indicate what they want or not want and especially in issues of sexuality. The Tamar campaign empowers women to live their own lives in the way they choose without allowing other people to decide for them (in the words of one FBOs leader, “nothing for women without them”)

UNFPA (2008) reports that rape cases are more rampant in war situations. They give an example of Democratic republic of Congo where 15,996 cases of sexual violence was reported during the war in 2008. The same report showed that 42 women out of the 1575 women surveyed in Burudi during the war had been raped.

4.4.6 KNOWLEDGE ON PERPETRATORS OF GENDER BASED VIOLENCE

Asked whether they knew or recognized the perpetrators of sexual assault, both women and men reported that it was someone known to them but were not willing to disclose their identity. This in part shows respondents ‘unwillingness to disclose the perpetrator. A large proportion of female respondents (32.6%, 73) indicated the perpetrators were neighbours, boy friends, family friends and to some extent relatives. This is supported by World health organization report(2003) that indicated that most forms of GBV is performed by a husband or male partner. Saltzman, fanslow, McMahon and Shelley(1999)described this violence as invisible since it happens behind closed
door and effectively when legal systems and cultural norms do not treat it as a crime but rather as a private matter. Ndung’u (2005) argues that most of the women in Kenya did not know that husband battering is a crime until 1995 Beijing conference when GBV issues became more publicized.

4.5. CAUSES OF GENDER-BASED VIOLENCE

4.5.1. PHYSICAL CAUSES
Focus group members were also asked to state on the Common Causes of GBV in Nairobi County. Main causes as given by respondents were Alcohol and drug abuse (reported by 65.0%, 146 female and 69.8%, 157 male respondents; poverty/stress reported by 53.8%, 121 female and 55.6%, 125 male respondents and interpersonal conflict reported by 48.5%, 109 female and 50.0%, 112 male respondents. Patriarchy (male dominance), which would be expected to be reported as a cause of GBV in Kenya because of the prevalence of patriarchal norms, was reported by 19.3%, 43 female and 18.5%, 41 male respondents. The only statistically significant gender difference was in more male (22.2%, 49 than female (12.6%, 28) respondents reporting cultural rites to be a cause of GBV. Although reported by few respondents, it is instructive that respondents reported other causes of GBV to include dowry payment, peer pressure and societal encouragement of violence all of which reflect the critical role of cultural norms in the perpetration of GBV.

The National Crime Research Centre report (2016) agrees that alcohol and drug abuse is the leading cause of GBV in Nairobi County. However, Grace Wangeci of Gender violence recovery centre Nairobi is convinced that cultural beliefs and practices are the motivating factor of GBV since alcohol and drugs act as a catalyst to enable people to do what they wanted to do in the first place. Some men still subscribe to out-dated beliefs that a man has a right to beat his wife. One of
the FBOs leader observed that in places where women know their human rights and report any type of assault to the police, cases of GBV is completely reduced whether there is alcohol or not. This means that it is not alcohol that makes people to be violent but the beliefs that one can beat their spouses and get out of it scot free. These calls for good socialization where both boys and girls will learn to respect each other and also learn to resolve issues amicably not through violence.
4.5.2 PSYCHOLOGICAL CAUSES

Focus group discussion members indicated that verbal abuse was the main form of psychological abuse given by 58.3%, 131 female respondents and 52.4%, 117 male respondents. The study showed that acts of GBV had mainly psychological/emotional and physical consequences on the individual victim (and the community by extension). Other forms of psychological violence were humiliation, neglect, desertion, threats, discrimination, exclusion and confinement. This form of violence is so rampant because many people do not know that it is a crime. Many individuals who go through this violence respond by ignoring it or tolerating it for lack of alternative. Part of the complications in reporting psychological violence is lack of evidence as in the case of physical violence like assault where the evidence is visible. Kenyan justice system need to be adjusted so that victims of psychological violence will find justice.

Source: Data, 2015
Both NjokiNdung’u(2011) and Musoga( 2008) highlighted the complications that GBV victims experience when reporting psychological abuse. In most cases, the victims are not able to prove such abuse as sexual harassment because usually it is the word of the victim against the perpetrator of the abuse. When sexual cases are tried in public courts, the victims are so embarrassed by the questions they receive from perpetrators that they are unable to carry on the case. The researcher agrees with NjokiNdung’u that special court rooms should be provided where issues of sexual and psychological abuse should be tried in.

**Figure 4.10--Psychological/Emotional Violence**

Source: Data, 2015

GBV has adverse social and economic effects at the community level. Some of these effects could be: increased criminality which is indicated by the existence of GBV itself. Physical and psycho-
social ill-health which ultimately compromises social stability and economic production. This may be aggravated especially where the victim of rape is infected with HIV or any other devastating disease like hepatitis B. Economic costs implied in investigating, prosecuting and rehabilitating offenders as well as medical treatment of victims.

4.5.3. SOCIAL CAUSES AND GENDER ROLE EXPECTATIONS
The study asked the respondents to indicate their level of agreement to the statement below relating to the aspects influencing gender based violence. The responses were rated on a five point Likert scale indicating to what extent respondents agree to the statements, where: 1-strongly disagree, 2-disagree, 3-neutral, 4-agree, 5-strongly agree. The mean and standard deviations were generated from SPSS and are as illustrated in table below
Table 4.6 Gender Role Expectations and Gender Based Violence

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>STDev</th>
</tr>
</thead>
<tbody>
<tr>
<td>The social dominance of men in the culturally sanctioned gender</td>
<td>4.3</td>
<td>0.5</td>
</tr>
<tr>
<td>hierarchy is threatened by gender based violence.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Empowerment of women has been contributory to the loss of</td>
<td>4.0</td>
<td>0.5</td>
</tr>
<tr>
<td>men’s self-esteem, leading to increased male violence.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Traditional male-dominated roles have contributed to men’s</td>
<td>3.9</td>
<td>1.6</td>
</tr>
<tr>
<td>feelings of entitlement to abuse women.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is the expectation that women should be submissive to their</td>
<td>4.1</td>
<td>1.2</td>
</tr>
<tr>
<td>husbands, while husbands are the decision-makers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Due to the responsibilities expected from men compared to women,</td>
<td>3.8</td>
<td>1.5</td>
</tr>
<tr>
<td>a man believes that a woman should obey him without questions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender role expectations provide structures relating to the</td>
<td>4.3</td>
<td>0.8</td>
</tr>
<tr>
<td>transition period which tend to be enforced with abusive tactics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>such as bullying and gender-based harassments in schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender role expectations play a strong role in shaping the</td>
<td>3.8</td>
<td>0.7</td>
</tr>
<tr>
<td>perception of the boy child as he fits in or while he is being</td>
<td></td>
<td></td>
</tr>
<tr>
<td>accepted in to the society</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Data, 2015

From the study findings in Table 4.6, majority of the respondents strongly agreed that the social dominance of men in the culturally sanctioned gender hierarchy is threatened by gender based violence; gender role expectations provide structures relating to the transition period which tend
to be enforced through abusive tactics such as bullying and gender-based harassments in schools; there is the expectation that women should be submissive to their husbands. Whereas husbands are the decision-makers, the empowerment of women has partly contributed to the loss of men’s self-esteem; this has led to increased male violence towards women and children as indicated by the mean scores of 4.29, 4.27, 4.10 and 4.00 respectively. On the other hand, most of the respondents agreed that traditional male-dominated roles have contributed to men’s feelings of entitlement to abuse women; gender role expectations play a strong role in shaping the perception of the boy child, while he is fitting in or being accepted into the society. Due to the responsibilities expected from men compared to women, a man believes that a woman should obey him without questions as indicated by the mean scores of 3.88, 3.83 and 3.76 respectively. According to Morrell (2001) the gender order expresses male domination that translates into men’s power over women. In a situation where masculinity is at a crisis for some men, they may be forced to use violence against their partners as a way of establishing their authority (Koss, 1999)

The study examined the association between various demographic variables and lifetime and current experience of GBV among intimate partners. Focusing on the common household statuses of household head, spouse and offspring, lifetime experience of GBV was highest among additional wife (57.1%, 128) compared to where the woman was the household head (50.0%, 112) or the first wife (23.5%, 52). In the last 12 months, additional wife was still more vulnerable than the other categories. Across marital status, for women, the most vulnerable categories in lifetime experience were the divorced/separated (76.4%, 171) and widowed (52.7%, 118) compared with married (35.1%, 78) and single (26.1%, 58). For current
experience, women’s greatest vulnerability was among the married (49.3%, 110) followed by the divorced and separated (39.0%, 87).

**Figure 4.11--GBV in Relation to the kind of family Percentage**

<table>
<thead>
<tr>
<th>Additional wife</th>
<th>Household head(woman)</th>
<th>Firstwife</th>
</tr>
</thead>
<tbody>
<tr>
<td>57.5</td>
<td>50</td>
<td>23.5</td>
</tr>
</tbody>
</table>

**Source: Data, 2015**
Figure 4.12--GBV in Relation to Marital Status Percentage

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>26.1</td>
</tr>
<tr>
<td>Married</td>
<td>35.1</td>
</tr>
<tr>
<td>Widowed</td>
<td>52.7</td>
</tr>
<tr>
<td>Divorced/Separated</td>
<td>76.4</td>
</tr>
</tbody>
</table>

Source: Data, 2015
Vulnerability to GBV increased with age especially for women. The difference between the younger and the older women age groups was statistically significant but not so for the men age groups. The implication of these findings is that deliberate counter-GBV measures need to be put in place to protect and assist divorced/separated and widowed women. Couples experiencing marital problems need to be encouraged to seek guidance and counselling services rather than resort to GBV. These results call for measures towards reducing GBV vulnerability of aged members of the community and especially the women. Common Beliefs about GBV Ajzen (1991) theory of planned behaviour states that beliefs such as espoused in attitudes, are the greatest predictor of behaviour.

Source: Data, 2015
4.5.4 SOCIAL CULTURAL NORMS AND GENDER BASED VIOLENCE

The study asked the respondents to indicate their level of agreement to the statement below relating to social cultural norms influencing gender based violence. The responses were rated on a five point Likert scale indicating to what extent respondents agree to the statements, where: 1-strongly disagree, 2-disagree, 3-neutral, 4-agree, 5-strongly agree. The mean and standard deviations were generated from SPSS and are as illustrated in table below.
Table 4.7 Social Cultural Norms and Gender Based Violence

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>STDev</th>
</tr>
</thead>
<tbody>
<tr>
<td>The church and other religious or spiritual institutions have</td>
<td></td>
<td></td>
</tr>
<tr>
<td>also contributed to the reinforcement of dominant gender</td>
<td>4.2</td>
<td>0.7</td>
</tr>
<tr>
<td>roles, further condoning the spousal abuse of women</td>
<td></td>
<td></td>
</tr>
<tr>
<td>New culture through education has led to the</td>
<td>4.0</td>
<td>0.7</td>
</tr>
<tr>
<td>insubordination of women in a male dominated culture</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Power struggles existing between men and women appear</td>
<td>4.2</td>
<td>0.3</td>
</tr>
<tr>
<td>to be significant in the perpetration of GBV in homes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status of women and children is undermined as a result of</td>
<td>4.2</td>
<td>0.7</td>
</tr>
<tr>
<td>entrenching economic inequality, which further exacerbates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>patriarchal violence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Societies with stronger ideologies of male dominance have</td>
<td>4.4</td>
<td>0.7</td>
</tr>
<tr>
<td>more intimate partner violence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The patriarchal head dominated the family, with the wife or</td>
<td>4.0</td>
<td>0.3</td>
</tr>
<tr>
<td>mother being restricted to a domestic role</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A clear division of labor along gender lines is adhered to,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>meaning that men are allowed better access to education</td>
<td>3.5</td>
<td>1.0</td>
</tr>
<tr>
<td>and enjoyed exclusive political leadership</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men with a tendency towards abusive behavior have been</td>
<td>3.8</td>
<td>0.7</td>
</tr>
<tr>
<td>reported to have grown up in traditional models of the</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
family where the father is the breadwinner and the mother is
the home maker

Dowry/bride price is part of the patriarchal establishment in
the society which breeds inequality between women and men, further placing women in a subordinate position

Source: Data, 2015

From the study findings in Table 4.8 majority of the respondents strongly agreed that dowry is part of the patriarchal establishment in the society which breeds inequality between women and men, further placing women in a subordinate position; In the words of one FBOs leaders, “when a man pays dowry for a woman, he gets the feeling that the wife is one of his properties and hence has a right to control her” This explains why some men kill their wives when the wife is involved in extra marital affairs. The man’s possession of the wife leads him to such violent acts.

Societies with stronger ideologies of male dominance have more intimate partner violence; power struggles existing between men and women appear to be significant in the perpetration of GBV in homes; the status of women and children is undermined as a result of entrenching economic inequality, which further exacerbates patriarchal violence and the patriarchal head dominated the family, with the wife or mother being restricted to a domestic role as shown by the mean scores of 4.63, 4.23, 4.21, 4.17 and 4.02 respectively.

On the other hand, most of the respondents agreed that new culture has led to insubordination of women in a male dominated culture; 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 and a clear division of labor along gender lines is adhered to,
meaning that men are allowed better access to education and enjoyed exclusive political leadership as shown by the mean scores of 3.95, 3.84 and 3.48 respectively.

The findings of this study conforms to Kim and Motsei (2002) findings that there are some harmful cultural values and norms which condone and enforce abuse against women. Bride price payment can be said to be such a norm which is highly abused among most of the families which instead of serving the original purpose of bonding and thanksgiving between the families concerned; has been transformed to be a way of economic gain and social classification or deprivation.

While some FBOs are busy working to end GBV, there are still some religious teachings, both Christianity and Islam that still purport patriarchal principles (James, 2011) he is supported by Andersen(2006) who asserts that the conservative nature of some FBOs promote inequalities and women insubordination. Legenhausen (2008) argues that Islamic faith traditions still support the traditional gender role which is anchored on the concept of wife and motherhood as the primary role of the woman. Nasrin(2002) point out that the level in which Islamic religion treat women is shocking and argue that a lot of teaching is needed and especially to the Muslim religious leaders. However, when we compare Nasrin’s views with those interviewed from MANADV, we realize that Islamic leaders and scholars are working harder at combating GBV than past time.

4.5.5 FAMILY RELATIONS AND GENDER BASED VIOLENCE

The study asked the respondents to indicate their level of agreement to the statements below relating to family relations and influence on gender based violence. The responses were rated on a five point Likert scale indicating to what extent respondents agreed to the statements where: 1- strongly disagree, 2-disagree, 3-neutral, 4
-agree, 5-strongly agree. The mean and standard deviations were generated from SPSS and are as illustrated in table below
Table 4.8 Family Relations and Gender Based Violence

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean</th>
<th>STDev</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most of the students have reported to being involved in conflict management in the context of GBV in their homes</td>
<td>4.2</td>
<td>1.1</td>
</tr>
<tr>
<td>There is violent behavior among adolescents and/or children from violent homes at school</td>
<td>3.8</td>
<td>0.9</td>
</tr>
<tr>
<td>Patriarchal culture and practices socialize children into accepting sexually differentiated roles</td>
<td>3.7</td>
<td>0.9</td>
</tr>
<tr>
<td>Most of drunk parents have a tendency of engaging in violent activities in front of their children</td>
<td>3.6</td>
<td>0.3</td>
</tr>
<tr>
<td>Violent behavior caused by social factors during adolescence and childhood such as being victims of violence are manifested by student in the school through their behavior</td>
<td>3.6</td>
<td>1.1</td>
</tr>
<tr>
<td>Perpetrators of violence in homes are mostly abusive men who as children witnessed parental violence or experienced child abuse</td>
<td>4.6</td>
<td>0.8</td>
</tr>
</tbody>
</table>

Source: Data, 2015

From the study findings in Table 4.12, majority of the respondents strongly agreed that most of the students have reported to being involved in conflict management in the context of GBV in their homes; perpetrators of violence in homes are mostly abusive men who as children witnessed parental violence or experienced child abuse. The family plays a fundamental part in promoting
violent behavior as shown by the mean scores of 4.63, 4.56 and 4.23 respectively. Most of the respondents further agreed that there is violent behavior among adolescents and/or children from violent homes at school; patriarchal culture and practices socialize children into accepting sexually differentiated roles; most of drunken parents have a tendency of engaging in violent activities in front of their children and violent behavior caused by social factors during adolescence and childhood such as being victims of violence are manifested by student in the school through their behavior as shown by the mean scores of 3.84, 3.67, 3.63 and 3.62 respectively. Jamaica and Barbados (1995) identified the family as being the primary location of violence.

This implies that most perpetrators of violence are abusive men who as children may have witnessed parental violence as well as having experienced child abuse which may lead them to later having conflicts in relationship with their spouses. Bem(1993) discusses how gender stereotypes are constructed through socialization process. She believes that children learn gender roles from their surroundings and later becomes the product of their socialization. She observes that girls tend to emulate their mothers and borrows heavily from their mothers while boys tend to emulate their fathers more. A boy who grow up in an abusive environment then think that that is how men should behave. Bem(1993) recommends both boys and girls should be brought up in an environment where they will learn to respect each other, learn that each of them can take any profession as long as one is prepared properly for it. She recommends that text books for young children should be revised with an aim of showing the children that each of them has strong mental capabilities. For example, text books should not always portrays a doctor with a male picture and a nurse with a female picture but they should show that both female and male are
capable of becoming doctors by portraying the picture of a doctor using both female and male pictures.

**4.5.5.1 CAUSE OF DIVORCE OR SEPARATION**
The study sought to find out the cause of divorce/separation of the parents. Figure 4.14 shows the findings. According to the findings majority (54%, 121) of the respondents indicated that the cause of the divorce/separation was drunkenness, 32%, 72 indicated that the cause was constant fighting while 9%, 20 and 6%, 13 indicated that the cause was the man’s absenteeism from home and/or his irresponsibility respectively. This implies that majority of the divorce/separation cases were caused by drunkenness. Because of drunkenness, men especially becomes irresponsible and are not able to provide for their families further resulting into the drinking habit as a way of hiding from the reality. Many women were not able to put up with this habit resulting into divorce or separation.

Fitzgerald, Goodman,Browne, keita and Russo(1993) describe describe this situation as sex role stress. This stress comes when a man feel that he is not adequately meeting the prescribed masculine gender roles and he begin feeling insecure and unwanted and as a way of proving that he is still incharge, he becomes aggressive and results to physical or verbal abuse. The 21st century men will need to be educated on positive masculinity which affirms men’s worth primarily because they are created in the image and likeness of God not necessarily because of what they can offer. This will reduce GBV arising from men feeling threatened either by their wives achievement or anything else.
4.5.5.2 Cause of Constant Fighting Between Parents

The study in this section sought to find out the cause of constant fighting between parents. From the findings, (figure 4.15) majority, (56%, 126) of the respondents agreed that constant fighting of their parents was caused by desperation and poverty, (39%, 87) was constant quarrels while (5%, 11) indicated that the cause was the parent taking long hours at work. This illustrates that poverty is the major cause of the parents’ drunkenness and constant fighting in homes.

These findings seem to suggest that poverty as a category can affect marriage relationships negatively. This can be challenged by the fact that although 49% of Kenyans live below the UN determined poverty line, the divorce and separation rate among Kenyans is less than 40%. This means that there is some deeper cause of fighting among spouses than poverty. The researcher believes that the deeper cause of these fighting is lack of mutual understanding between spouses. For example, men are socialized to hide their income from their spouses. Most of them do not
reveal their actual salary, investment or any other income to their spouses. The misunderstanding comes when the spouse want a certain kind of living standards, the other spouse cannot afford it but is not willing to explain to the spouse about his economic struggles. The wife then start suspecting that the husband is either misusing money or is having an extra marital affair with other women. This calls for transparency on the usage of money on both sides because this will resolve some of those marital misunderstanding.
4.5.5.3 CONFLICTS BETWEEN PARENTS

The study sought to establish who normally started the quarrel and/or conflict at home. From the findings, (figure 4.16) majority, (88%, 198) of the respondents indicated that the quarrel and/or conflicts at home were started by the father while 12%, 27 respondents indicated that the mother started the quarrel and/or conflict. This has a direct impact on the boy child on one hand; it makes him think that violence is the best way of solving conflicts at home and those who see the mother as the source of conflict develop a sense of being threatened by their wives later in life and think that GBV is legitimate.

Source: Data, 2015
The researcher requested the respondents to indicate the reason why their parents were not staying together. From the findings (figure 4.17) most, (43%, 96 respondents) indicated that their parents separated due to domestic violence, (36%, 81) indicated that the cause of not staying together was divorce caused by domestic violence while (6%, 13) and (9%, 20) indicated that they were not staying together due to death and never got married respectively. This implies that majority of those parents not staying together were either separated or divorced as a result of gender based violence. The reasons being that either, the father was not responsible or was violent because of lost self-esteem as a result of the wife being more empowered.
### 4.6 SUBSTANCE ABUSE AND GENDER--BASED VIOLENCE

The study asked the respondents to indicate their level of agreement to the statement below relating to substance abuse and influence on gender-based violence. The responses were rated on a five-point Likert scale indicating to what extent respondents agree to the statements, where: 1—strongly disagree, 2—disagree, 3—neutral, 4—agree, 5—strongly agree. The mean and standard deviations were generated from SPSS and are as illustrated in table below.

![Bar Chart](image.png)

Source: Data, 2015
### Table 4.9 Substance Abuse and Gender Based Violence

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean</th>
<th>STDev</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance abuse is associated with GBV in homes</td>
<td>4.2</td>
<td>0.5</td>
</tr>
<tr>
<td>Drug abuse results to impaired judgments among the abusers</td>
<td>4.7</td>
<td>0.5</td>
</tr>
<tr>
<td>Most of the drunk persons do not feel shy to engage in violence in the presence of their children or public</td>
<td>4.1</td>
<td>0.6</td>
</tr>
<tr>
<td>Most of the drunk persons who have been reported to have HIV/AIDS perpetrate gender based violence through Sex</td>
<td>4.5</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Source: Data, 2015

From the study findings in Table 4.9 majority of the respondents strongly agreed that drug abuse results to impaired judgments among the abusers where most of the drunk persons who have been reported to have HIV/AIDS perpetrate gender based violence through sex. Most of the drunk persons do not feel shy to engage in violence in the presence of their children or public; it further showed that substance abuse is associated with GBV in homes as shown by mean scores of 4.65, 4.52, 4.21 and 4.09 respectively. USAID (2011) report indicated that drug and substance abuse use such as heavy consumption of alcohol is a major contributor of GBV. This is because alcohol is powerful catalyst for both interpersonal and sexual violence as well as high-risk sexual behavior as it leads to impaired or unsound judgments, including the ability to interpret social cues. At most times the perpetrator usually realized what she or he has done after the damage has already been done.
4.7 COMMON BELIEFS ABOUT GENDER-BASED VIOLENCE

Common beliefs about GBV were measured by asking respondents to state with yes or no on the existence in their community of predetermined assumptions that suggested men’s dominance over women. Both male and female respondents reported existence of beliefs indicating men’s dominance over women. A total of 58.3%, 131 male and 52.4%, 117 of female respondents reported that in their community it is believed that disciplining a woman is a man’s traditional right. The significance of the commonness of this belief is that it is usually the justification for wife beating in some cultures in Kenya. Another belief is the assumption that the boy child is regarded as more important than the girl child, which was reported by 49.2%, 110 female and 47.9%, 107 of male respondents.
Figure 4.18—Disciplining of women by men

Source: Data, 2015
Key informants representing the Criminal Justice System, Provincial Administration and Children’s Department reported that in the communities they served, GBV was regarded with mixed reactions. That is, GBV was seen as a human rights violation and as a cultural practice. The Police, Judiciary, Provincial Administration and Probation Officers mentioned that the most important indicator of GBV as considered being a human rights issue in the community was increased reporting of GBV cases to authorities. These key informants noted that the root cause of the prevalence of GBV was the cultural beliefs that regarded GBV as a private matter (for example early marriages, FGM, wife beating) and therefore did not require intervention by outsiders. One member of the provincial administration asserted, “GBV is against the laws of this
country because it violates the rights of the victim yet many people treat it like a private matter which calls for out of court settlement even when the damage is so serious” The unfortunate thing is that some people are still holding onto cultures which are out dated such as wife beating and this require community sensitization for it is not very easy to get rid of those harmful beliefs and practices.

The focus group discussion findings indicated that both male (90.7%, 204 respondents) and female (95.7%, 215) respondents generally agreed that religious teachings prohibit violence against any human being and that women should not be exposed to GBV (reported by 94.5%, 212 female and 90.1%, 202 male respondents. About one-third of the respondents from both genders however disagreed that women have equal rights as men. This is a significant challenge because the belief by both men and women, that women have lesser rights than men is a foundation for men perpetrating GBV on women and the same women subjugating to the belief. Statistical gender differences were indicated by more female respondents agreeing that the religious books prohibit violence and that women have rights and should not be exposed to GBV. This shows that the change of attitude is required more among men compared to women. This calls for religious leaders especially in communities which place women and children in one category of less value to use the pulpit and sensitize them to change such attitudes. In the word of one faith based organization leaders, “we will never win the war on GBV until and unless we involve men in fighting against it”. When faith based organizations and other Non-Government organizations empower the girl child and women leaving the boy child and men behind, this create more misunderstanding and leads to more cases of GBV.
4.8 INDIVIDUAL AND INSTITUTIONAL RESPONSES TO GBV

Individual and institutional responses to GBV are important in understanding, prevention and control of GBV. If victims report and other actors take action, there is a greater likelihood for necessary counter-GBV action to be taken such as offenders to be punished, deterred and/or rehabilitated. To gauge individual and institutional responses, the study focused on: the action of reporting of GBV by the victim; the services the victim of GBV had received and the actions of those the victim reported to. Of the 99 female and 12 male respondents who had ever been sexually violated by intimate partners, only 15 of these female and 2 of these male respondents had reported their experience or had their experience reported by someone else. This meant that only 15.2% of female and 16.7% of male respondents who had ever been sexually violated had reported or had someone else report the act of sexual violence. Analysis on the basis of the types of sexual violence showed that only (22.2%) of the 9 male and 15 (13.5%) of the female respondents who had ever experienced the different types of sexual violence from an intimate partner reported or had the incident reported by someone else. None of the 5 male respondents who had ever experienced the different types of sexual violence from a non-intimate partner had reported or had the incident reported by someone else. However, 16 (33.3%) of the 48 female respondents who had ever experienced the different types of sexual violence from a non-intimate partner reported or had the incident reported by someone else.
Figure 4.20--GBV Reporting by Victim

Source: Data, 2015
The above findings imply that women are more at ease reporting sexual violence perpetrated by non-intimate partners than that orchestrated by their intimate partners. The reluctance to report intimate partners contributes to increased acts of GBV by the same intimate partners. Men are known to be more reserved than women when dealing with personal issues and hence the probable reason their reporting rate of sexual violence by intimate and non-intimate partners was low. With regard to reporting of physical and/or sexual violence committed against the respondent or anyone else in the last 12 months, the results indicated that only 15.7% of the female and 14.4% of the male respondents had reported. The results are almost the same as those which showed that 15.2% of female and 16.7% of male respondents who had ever been sexually violated had reported or had someone else report the act of sexual violence perpetrated against them. Conclusively, the results of this study demonstrate low levels of GBV reporting, which is
consistent with common anecdotal evidence. It is, for instance, believed that women victims of sexual violence are very unlikely to report their experience to authorities that are dominated by men such as the police and family. This owes to the fact that men are likely to blame women (including their children or spouses) of having predisposed themselves for any sexual assault.
With regard to victims who had ever experienced sexual violence from an intimate partner, the main services received by women were psycho-social counselling (33.3%) and HIV counselling and testing (26.7%). The corresponding figures for men were too few to make any meaningful descriptions. With regard to victims who had ever experienced sexual violence from a non-intimate partner, women reported the services received to be emergency contraception (19.4%), HIV counselling and testing (19.4%) and STI screening and treatment (17.1%). For men, the only service they had received was HIV counselling and testing (16.7%). These results clearly indicate lack of initiative or support for victims of sexual violence of both genders.

Source: Data, 2015
Figure 4.23--Services Offered to Victims of Sexual Violence from an Intimate Partner

Source: Data, 2015

Services Offered to Victims of Sexual Violence from an Intimate Partner to Women

Emergency contraception 19.4
HIV counselling 19.4
STI Screening/Treatment 17.1
4.9. INDIVIDUALS AND AGENCIES TO WHOM GBV IS REPORTED

For the respondents who reported physical and/or sexual violence, they were asked to whom they reported the incident. As shown in Table 3.24 below, the commonest recipients for both women and men were the Police and local Provincial Administrators. This indicates the need to strengthen the Police and Provincial Administration in GBV interventions. Only a few of the respondents reported GBV to parents or religious leaders, which raise a serious concern since these are the closest in providing immediate intervention. The role played by these actors also requires more dedicated analysis. The question that begs is: Is the low reportage to parents and religious leaders an effect of the inability to discuss sexuality that is so common in Kenyan cultures?

Source: Data, 2015

**Services Offered to Victims of Sexual Violence from an Intimate Partner to Men(%)**

<table>
<thead>
<tr>
<th>Percentage(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>19.4</td>
</tr>
</tbody>
</table>

**HIV counselling**

Source: Data, 2015
The National Crime Research Centre report (2016) indicate that the greatest barrier to the prevention and control of GBV is failure to report GBV cases and lack of cooperation by witnesses. The report recommends that different stake holders need to roll out programs aimed at encouraging increased reporting of GBV to relevant authorities and supporting prosecution of perpetrators by providing witness evidence.

**Figure 4.24--Reporting of GBV to provincial administration**

<table>
<thead>
<tr>
<th>Action Taken</th>
<th>Action not taken</th>
<th>Do not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>Male</td>
<td></td>
</tr>
<tr>
<td>13.9%</td>
<td>29.4%</td>
<td>8.9%</td>
</tr>
<tr>
<td>29.1%</td>
<td>29.4%</td>
<td>11.8%</td>
</tr>
</tbody>
</table>

Source: Data, 2015

Respondents who had reported GBV experience were asked if they knew what action was taken against perpetrators. Only 13.9%, 13 female and 29.4%, 29 male respondents reported that the perpetrator was arrested, prosecuted, and convicted. Another 29.1%, 28 female and an almost similar proportion of male (29.4%, 29) respondents reported that no action was taken and 11.8%, 11 male and 8.9% i.e. 8 female respondents did not know what action was taken. These results
demonstrate very low levels of institutional response and public knowledge of the action taken. Such finding implies a serious difficult in the public gaining confidence to report acts of GBV either as victims or witnesses. In the prevention of GBV, the Police’s single most important intervention emerged as patrolling areas where GBV was known to be prevalent. According to the Police, the greatest barrier to prevention and control of GBV was failure to report cases and lack of cooperation by witnesses. These challenges were quite evident where the perpetrator was a family member or relative. In the words of one administration officer, “it is very discouraging when you have gathered evidence and taken the sexual assault case to court and on the day of the hearing, the victim tells the court that they are withdrawing the case” The police loses zeal over these cases because most of these cases are usually withdrawn. This shows the need for community education and witness protection mechanisms. These findings from Key Informants drawn from the National Police Service are articulated in the words of a senior Police Officer who said, “Families of victims of GBV acts perpetrated by intimate partners are many a time reluctant to report such cases to us. Even when GBV acts are reported by a third party, the witnesses will be unwilling to testify because of community ridicule and threats from the perpetrators. Our Judicial System would not allow a case to proceed without witnesses and water-tight evidence”

4.10 CONSEQUENCES OF GENDER-- BASED VIOLENCE

Respondents were asked to indicate the consequences of GBV in Nairobi County. 76.4 %, 171 respondents highlighted the physical consequences like death, paralysis, sexually transmitted diseases including HIV/AIDS and hepatitis B while 23.7%, 53 respondents highlighted psychological consequences like depression, low self-esteem, divorce etc.

These findings are supported by the NCRC (2016) findings that GBV has adverse effects on the person’s functioning which ultimately affects the community, country and the world at large.
UNFPA (2008) agrees that GBV kills and disables more women aged 15-44 years than does cancer, malaria or even traffic accident. UNFPA explains that immediate effects of GBV include poor health, lowered social participation and economic productivity among others.

Physical abuse may lead to pregnancy complications like miscarriage, placental abruption, premature delivery, low birth weight and fatal or infant death (UNFPA 2008). NCRC(2016) agrees that the consequences of sexual abuse on reproductive health includes sexually transmitted diseases and infections including HIV/AIDS, unwanted pregnancy, unsafe abortion, pelvic inflammatory disease, infertility and genital injuries including obstetric fistula. The report shows that when a woman is not able to seek proper health care in the period surrounding pregnancy or after physical abuse, the consequences can be fatal. The CREAW report (2008) gives the psychological consequences of GBV as post-traumatic stress syndrome, depression, anxiety and low self-esteem which can lead to alcohol and drug abuse, risky sexual behaviour and victimisation.

According to CREAW (2008) these outcomes are evident in Kenya where women who suffered during the post-election violence are still enduring similar symptoms. Children who were affected by the post-election violence were also found to suffer from some form of anxiety compared with children who grew in peaceful environment (CREAW, 2008). Morrison and Orlando (1999) adds that GBV undermines livelihood strategies and economic alternatives and this impoverishes the family. Morrison and Orlando(1999) argues that this has been evidenced in studies elsewhere such as Nicaragua where violence limits women’s ability to maintain a job.

Gender based violence at community level can be regarded as a new form of subjugating the population and limiting freedom of movement through the use of terror in particular in relation to
women and such impedes progress in participation and peace building (Morrison and Orlando, 1999). Carrillo (1992) agrees that a lasting consequences of the internal armed conflict has been the dissolution of social capital and community network as these have been replaced by mistrust and pervasiveness at local and national levels. He argues that in this regard, affected women and their families become isolated as violence hinders their participation in their community’s social, political and economic life. Carrillo concludes that GBV exerts considerable economic impacts and therefore takes its toll on the state.

In 2005, according to conservative estimates, violence cost the state the equivalent of 7.3% of GNP based on costs incurred in the health sector and the justice system as well as lost investment and material loss (WHO, 2005). Taking into account the death toll of victims in 2005, UNDP estimated a substantial loss of potential production which represent significant economic costs (WHO, 2005).

According to Carrillo (1992) GBV is felt in all sectors. It burdens the health and security systems diverting funds from the National budget allocation to primary health and education. In terms of macro-level economic production, GBV erodes human capital and accounts for a loss of productivity from both paid and unpaid work as well as foregone value of life times earning on the part of women who have died. Carrillo continue to argue that GBV further undermines and destabilizes democracy building, good governance and promotion and defence of human rights. He shows that at institutional level, it destabilizes the state, reducing citizens’ confidence in government authorities and institutions. It renders it more difficult for government to build a truly democratic and legitimate state and accomplish one of the main duties that is protecting the life and development of citizens.
WHO(2005) and Carrillo(1992) agree that development is clearly under threat when women are excluded from participating in, contributing to and benefiting from development initiatives and from political decision making at micro and macro levels since their participation is crucial to promote lasting change.

According to the United Nations report (2006) GBV undermines the eradication of extreme poverty and hunger, achievement of universal primary education, promotion of gender equality and empowerment of women, reduction of child mortality rates, improvement of maternal health, combating HIV/AIDS, ensuring environmental sustainability and developing global partnerships for development all of which require the active participation of all members of the society.

The National Crime Research Centre report(2016) argues that GBV will hinder the Kenya’s vision 2030. Vision 2030 is a long term development blue print that seeks to transform Kenya into a newly industrializing middle income country providing a high quality of life to all its citizens in a clean and secure environment. The plan is anchored on three pillars, economic, social and political governance. The economic pillar aims to achieve an economic growth rate of 10% per annum and sustaining the same till 2030 in order to generate more resources to address development goals. The social pillar seeks to create just, cohesive and equitable social development in a clean and secure environment. The political pillar aims to realize an issue based, people centred, result oriented and accountable democratic system. These aims cannot be efficiently achieved in an insecure social economic environment epitomised by GBV (GOK, 2011, IASC,2005). Thus GBV need to be prevented and controlled. Where it has already occurred, survivors need to be rehabilitated and restored and perpetrators punished and corrected.
4.11 COMBATING GENDER--BASED VIOLENCE

The respondents showed their concern about GBV and recommended that GBV should be eradicated. On who should be assigned the task of combating GBV, the respondents were divided with 50%, 112 respondents assigning the work to the church which include FBOs, Non-Governmental organizations and other volunteer bodies willing to assist in GBV eradication, 45%, 101 respondents giving the task to the government organs and the remaining 5%, 11 respondents arguing that it is the task of every individual to stop GBV.

Several institutions including USAID have been on the forefront of fighting GBV in Kenya and have come up with programs which are committed to prevent this type of violence by working towards increasing access to justice and integrated support services and creating public awareness about GBV. According to NCRC(2016) two types of interventions are needed to combat GBV. The primary intervention which seeks to prevent GBV occurrence by targeting social norms or through educational outreach. These programs focus on societal and situational factors. Secondary intervention is used to address GBV once it has occurred. It include barterer intervention program, couples therapy, programs to increase help seeking behaviour by targets, civil protective orders, criminal sanctions etc

According to Black and Weiss(2008) the exaggeration of gender roles by youth and adolescents is hypothesised to increase the risk of dating violence and therefore should inform the design of primary interventions in schools. These could be a school based intervention program targeting every adolescent. They argue that other curricula could target adolescent attitudes, specifically those that may justify use of aggression. These views are supported by Cascadi and Cano(1997) who argue that by changing perceptions of norms of masculinity, the program hopes to encourage more gender equitable behaviour and attitude among participants. These interventions
uses social modelling techniques to communicate gender equitable social norms and to transfer relationship skills in peer to peer educational sessions.

Ajzen (1991) argue that in some settings, programs also target men outside these small sessions using media campaigns such as radio transmissions and billboards. Such programs target potentials targets of violence seeking to help them avoid future violence. According to Brecklin (2008) primary preventive strategy is to reduce rape and sexual assault among adults in the country. Palluck (2009) adds that social norms affect behaviour change more dramatically than personal attitude. Social norms can sustain GBV rooted in community customs including FGM/C. He shows that even when families oppose FGM/C, they may have their daughters go through it because they perceive that other community members view it as normal or desirable or because they believe their daughters chances of marrying will be reduced by foregoing FGM/C.

Palluck (2009) argues that media’s power to influence gender norms has been demonstrated in studies examining instances in which media depicted widespread adoption of different gender roles and responses to GBV. Scheepers (2001) agrees that viewing TV programs that depict neighbours and family members rejecting domestic violence was correlated with a decreased likelihood that survey respondents defend or approve of domestic abuse. Edutainment (integration of educational messaging with popular entertainment) is a common form of social norms marketing. Jensen and Oster (2009) agrees that edutainment is one of the best ways of reducing GBV.

Legal methods can also be used to combat GBV in Nairobi County Kenya. GBV is a crime and a moral indignation as provided and envisioned in the Kenyan legal system (KLRC, 2010). GBV violates the penal code and is a violation of the constitutional rights of a person. The legal and
policy instruments addressing GBV in Kenya are essentially the constitution of Kenya 2010, the sexual offences acts 2006, the penal code and the United nations committee on the Elimination of Discrimination against Women(CEDAW,1979). Other relevant instruments include prohibition of FGM/C act 2011 and gender policy 2011(KLRC, 2010)

Chapter four of the constitution consists of the bill of rights and has the following important provisions in regard to GBV. Section 27(1) indicate that every person is equal before the law and has the right to equal protection and benefit of law. Section 27(2) indicate that equality includes the full and equal enjoyment of all rights and fundamental freedoms. Section 28 indicate that every person has inherent dignity and the right to have that dignity respected and protected. Section 30(1) indicate that a person shall not be held in slavery or servitude and 30(2) indicate that a person shall not be required to perform forced labour.

According to Ndung’u(2011) the sexual offence of 2006 is a comprehensive law that criminalizes a wide range of behaviors including rape, sexual assault, defilement, compelled and induced indecent acts with child imbeciles or adults, gang rape, child pornography, child trafficking, sex tourism, child prostitution, exploitation, incest by male or female, sexual harassment, deliberate transmission of HIV/AIDS, stupefying with sexual intent, forced sexual acts for cultural or religious reasons among others. The act also has orders for medical treatment for victims including free HIV phylaxis, emergency pregnancy pill and counselling.

The act provide stiff penalties in which most of the crimes attract minimum of ten years imprisonment which can be enhanced to life imprisonment (NCRC,2016). Considering the wide range of behaviour covered and the stiff penalties, the act is definitely an important tool in combating sexual offences. According to KLRC (2011) the gender policy 2011 seeks to promote
interventions for the reduction of sexual and gender based violence and to promote the generation of sex disaggregated data to guide interventions. The foregoing shows the need for vigilance by all stakeholders in enforcement of laws and policies for effective management of GBV.
CHAPTER FIVE

ROLES PLAYED BY FAITH-- BASED ORGANIZATIONS IN CURBING GENDER BASED VIOLENCE

5.0 INTRODUCTION

The preceding section has response on the research objective 2, the roles played by faith-based organizations in curbing gender based violence. On whether the respondents had been involved in any form of gender based violence, 38%, 85 female and 20.1%, 47 male admitted to have been involved in GBV. A total of 58.1 %, 132 respondents had been involved in GBV as opposed to 41.9%, 92 respondents who reported not to have been involved in GBV.

Further the researcher inquired whether they reported to a faith based leader. The response indicated that 40%, 90 respondents agreed while majority who were 60%, 135 respondents disagreed to the same idea. However, those who reported got a positive answer from their church leaders who at some point summoned the aggressor and counselled them.

From these findings, majority of the people do not report gender based violence to faith based organizations. These views are supported by national crime research centre report (2016) which showed that majority of GBV survivors did not report to their parents or religious leaders as would be expected but a few reported to the public administration officers, as indicated above, a few to FBOs leaders and some reported to nobody. One respondent explained the reason people do not report GBV to anybody and said that past records have shown that, the perpetrators are usually set free by the police. She also explained that some church leaders usually treat the survivor suspiciously especially when one report sexually related abuse. This agrees with James(2011) who argue that some FBOs are so paternalistic to be of any help and Anderson(2006) who show that the conservative nature of some FBOs promote inequalities and women subordination and hence are of no use to survivors of GBV. As Mombo (2003) says,
most of the religious leaders will need to be sensitized on issues of GBV so that they could be of some use in combating GBV.

5.1 ACTION BY THE FBOS IN REDUCING GENDER-- BASED VIOLENCE

The researcher sough to establish what the faith based organizations did in reducing gender based violence. The responses were rated on a five point Likert scale indicating to what extent respondents agree to the statements, where: 1-strongly disagree, 2-disagree, 3-neutral, 4-agree, 5-strongly agree. The mean and standard deviations were generated from SPSS and are as illustrated in table below.

**Table 5.1 Action by the faith-- based organizations in reducing gender-based violence**

<table>
<thead>
<tr>
<th>Statements</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working to end marginalization</td>
<td>4.253</td>
<td>0.874</td>
</tr>
<tr>
<td>Moral Education</td>
<td>4.045</td>
<td>0.541</td>
</tr>
<tr>
<td>Advocacy</td>
<td>3.985</td>
<td>0.461</td>
</tr>
<tr>
<td>Construction and rehabilitation</td>
<td>3.487</td>
<td>0.823</td>
</tr>
<tr>
<td>Providing services in an open and transparent manner</td>
<td>4.254</td>
<td>0.451</td>
</tr>
<tr>
<td>Refraining from attempts to discredit or undermine evidence-informed practices of other actors in the GBV response</td>
<td>4.124</td>
<td>0.652</td>
</tr>
<tr>
<td>Providing services based on evidence-informed practices consistent with the FBO’s own faith and values</td>
<td>3.846</td>
<td>0.354</td>
</tr>
</tbody>
</table>

Source: Data, 2015
The results above indicated that Faith based organizations are working to end marginalisation with a mean of 4.253 and standard deviation of .874. The respondents further agreed that the faith based organizations were involved in moral education with a mean of 4.045 and standard deviation of .541. On advocacy, the mean of 3.985 and standard deviation of .461. Moreover on whether the FBOs were involved in construction and rehabilitation, the respondents agreed with a mean of 3.487 and standard deviation of .823. They agreed that providing services in an open and transparent manner with a mean of 4.254 and standard deviation of .451. Further on refraining from attempts to discredit or undermine evidence-informed practices of other actors in the GBV response had a mean of 4.124 and standard deviation of .652. Finally, respondents agreed that the faith based organization was involved in providing services based on evidence-informed practices consistent with the FBO’s own faith and values with a mean of 3.846 and standard deviation of .354.

In the word of one respondents, ‘faith based organizations are very good at campaigning against gender based violence, I have attended a number of workshops organised by FBOs for this purpose” another respondent explained how her world view was changed after attending a six week course on women empowerment and democracy organised by one faith based organization. In her own words,” I did not believe in women ordination until after attending the course which opened my eyes and today im an Anglican clergy woman.

These findings agrees with Lunn ( 2009) who argues that FBOs offers a distinctive contributions to social service delivery and pray a vital role in grassroots mobilization as well as other aspects of development including conflict resolution, humanitarian assistance and disaster relief, environment protection and conservation, politics and social movement and social welfare.
In discussing the contributions of FECCLAHA, one of the leaders shared with the researcher the FECCLAHA publications containing the report of their work in 2014 and 2015. The report contained successful Tamar campaign where women and men were sensitized to reject all form of GBV but also how FECCLAHA brought warring community leaders together and helped the warring leaders to sign peace agreement.

The Amani Communities Africa was mainly involved in sensitizing the communities about harmful cultural practices like FGM/C, wife inheritance, ritual cleansing etc. In conjunction with UNICEP and UNFPA, they help develop alternative rites of passage but also give shelter to girls and women running away from the harmful cultural practices. The MANADV organization are involved mainly in fighting domestic violence and other GBV while the CIRCLE reduces GBV by doing research and publishing books, journals etc on religion, culture and violence. Through their efforts, gender studies are compulsory in some universities like St. Paul’s university. All the pastors who go through St. Pauls are thoroughly equipped on gender issues and GBV and how to prevent it or eradicate it. Despite the challenges, we can agree with Furguson(2006) that FBOs plays a vital role in combating GBV.

5.2 EXTENT TO WHICH FBO AID IN COMBATING GBV

The respondents were asked to indicate the level of extent to which Faith Based Organizations aid to combating gender based violence in Nairobi County. The results were as shown in figure 5.1
From the findings, 42%, 94 of the respondents indicated that Faith Based Organizations aid in combating gender based violence to a very great extent, 25%, 56 of the respondents indicated FBOs aid to a great extent, 12%, 27 of the respondents indicated neutral extent, 11% i.e. 24 of the respondents indicated to a less extent and 10%, 22 of the respondents indicated that FBOs do not aid in combating Gender Based Violence at all. The study above therefore clearly shows that majority of the respondents agreed to a very great extent that faith-based organisation aid to combating gender based violence.

The respondents who argued that FBOs work at reducing gender based violence to a great and very great extent gave examples of FECCLAHA who have taken their campaign down to the local congregations and have targeted the grassroots people by introducing Bible studies aimed at recognizing and saying no to gender based violence. A few churches have also included gender based violence themes in their preaching. In the words of one respondent, “my church usually
organize a monthly ladies fellowship where we discuss about women leadership and empowerment, we have greatly gained from these fellowships” another respondent highlighted the work of Circle of concerned African women theologians and argued that the CIRCLE has helped to create awareness on Gender based violence by researching and writing academic books on religion and gender based violence. By introducing feminist theology and African Women Theologies in Theological colleges where future pastors are trained, both women and men are equipped to recognize and fight gender based violence.

These findings are supported by Green(2003) who argue that FBOs succeed in combating GBV because they are able to address congregations every Sunday or other worship day and are also able to use the prestigious moral authority of religion to advocate good behaviour. Green(2003) continue to argue that based on research conducted in countries like Uganda and Senegal, FBOs have a natural ability to promote behaviour change. Haynes(2007) also agree that improvement in the GBV depend on the necessity of changing behaviour and in this respect religious leaders and FBOs leaders plays a significant role. According to Knox-Seith(2005) the most effective way of combating GBV is to empower individuals so that they can refrain from self-destructive behaviour. Beleli(2007) agree that FBOs plays an essential role in the delivery of formal and informal education in the churches.
5.3 RATING CONTRIBUTION OF FBOS IN REDUCING GENDER BASED VIOLENCE

The study further sought to establish the contribution of these FBOs in reducing gender-based violence as indicated in figure 5.2 below for interpretation purposes.

**Figure 5.2 Rating Contribution of FBOs in Reducing Gender Based Violence**

Source: Data, 2015

According to the findings, 48% i.e. 108 of the respondents indicated that the contribution of these FBOs in reducing gender-based violence was excellent, 36%, 81 of the respondents indicated that the contribution was very good, 10%, 22 indicated the contribution as good and 6%, 13 of the respondents indicated to be poor. This depicts that most of the respondents rated the contribution of FBOs in reducing gender based violence as excellent.

Respondents who rated faith based organizations effort in reducing gender based violence highlighted advocacy work, social education and networking with other non-governmental organizations in helping victims of gender based violence. Amani Communities Africa was
commended for her effort in giving shelter to girls who ran away from harmful cultural practices like FGM/C.

Respondents who rated FBOs effort in reducing gender based violence as poor argued that most of the churches are still patriarchal in setting. They gave examples of church leadership and showed that there are very few women leaders in the church leadership organs. One respondent wondered why we do not have women bishops in the main stream churches in Kenya.

These findings are supported by Beleli (2007) who highlight the positive contributions of FBOs. He argues that in Columbia, the church and FBOs is the main strategic ally for the ministry of education because of its vast outreach, transparency, credibility and acceptance among community members. Beasley (2010) also agrees that FBOs holds a significant position in society and through its teaching and activities, it plays a powerful role in forming opinions. Beasley(2010) gives an example of how Faith based education to stimulate dialogue on peace and also increase awareness of the impact of violence on children, to change attitudes and to stimulate action against sexual violence amongst church-school leaders and staff. Beleli(2007) gives the importance of Faith based organizations social education arguing that education decreases psychosocial stress for children traumatized by experiences of violence by providing a sense of normalcy in their lives.

Bryant(2011) also described the importance of education in cases of women recovering from sexual abuse. According to Bryant, religious teachings restored a sense of positivity and hope among women and girls who had been raped. McMullen (2013) agrees with him and gives an example of how child soldiers who received trauma focussed cognitive behavioural therapy had highly significant reductions in symptoms of post-traumatic stress, depression and anxiety and suffered less psychosocial distress compared with those who did not receive any therapy.
Persitau(2011) describe how FBOs in conjunction with Non-governmental organizations like red Cross helped the survivors of post-election violence 2007-2008 in Kenya. He says that religious spirituality should not be overlooked in trauma healing for it is a resource for overcoming post-conflict trauma and a cushion between women and their harsh emotional, psychological and social realities. Persitau(2011) argues that internally displaced survivors of sexual violence used religious imagery and texts to make sense of their experiences and to build self-esteem and self-worth. These examples show why FBOs were rated so high in their efforts to combat GBV.

5.4 COMMUNICATION STRATEGIES USED TO PASS MESSAGES OF GBV

The respondents were asked to indicate the communication strategies used to pass messages of gender based violence. The results were as recorded in table 5.2 below for interpretation purposes.

Table 5.2 Communication Strategies

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer educators</td>
<td>47</td>
<td>20</td>
</tr>
<tr>
<td>Support groups</td>
<td>78</td>
<td>35</td>
</tr>
<tr>
<td>Organizing GBV awareness campaigns</td>
<td>100</td>
<td>45</td>
</tr>
<tr>
<td>Total</td>
<td>225</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Data, 2015

From the results, 45%, 101 of the respondents indicated organizing GBV awareness campaigns as one of the communication strategies used to pass messages of GBV, 35%, 78 of the respondents indicated support groups and 20%, 45 of the respondents indicated peer educators as the other communication strategy used to pass messages of gender based violence.
From these findings, organizing gender based violence awareness campaigns is the leading way of communicating about gender based violence issues. These campaigns are organized by the churches, faith based organizations, non-governmental organizations and lately the government institutions under the ministry of gender and social services. The campaigns may take the form of a one day seminar, three days’ workshop but can also be a six weeks course.

Until very recently, the target group in these campaigns was mainly girls and women. The successes of these campaigns were seen in the more girls pursuing education, many girls rejecting traditional harmful practices, many women pursuing courses in engineering, politics and other areas that were traditionally reserved for men. More women also joined politics and a few of them like Hon. Charity Ngilu, Hon. Martha karua and Hon. Wangari Maathai vied for the office of the president of Kenya, something that was unheard of before. However, it was realized that empowering the girl child alone will create more misunderstanding which may enhance gender based violence.

In the word of one FBOs leader, “our campaigns against FGM/C and marrying off young girls only became successful when we involved community elders who are mainly men” women and men need to be involved in these campaigns for them to be more effective.

**5.5ADEQUACY OF COMMUNICATION STRATEGIES**

The study sought to establish whether the communication strategies used were adequate. The results were as shown in figure 5. 4
Figure 5.4 Adequacy of Communication strategies

The study above shows that 64%, 144 agreed while 36%, 81 disagreed that the communication strategies used are adequate. However, 36% of the respondents that disagreed cited reporting of GBV incidents by the victims due to fear of victimization.

The study sought to establish further on communication strategies. Results revealed that in terms of community mobilization information on gender-based violence is not properly accessed by a large number of women in particular and communities in general, especially in rural areas. As paluck(2009) argues, there is a need for the media to be fully involved at all levels to ensure that information is accessed at community as well as national level. This is supported by Ajzen(1991) who argues that FBOs can also advertise messages on GBV through the radio and even billboards. Scheepers(2001) adds that usage of TV programs can be very helpful in campaigning about GBV as many people will watch TV and Jensen and Oster(2009) believes that usage of Edutainment will be more effective in talking about GBV.
The media personalities should be sufficiently trained in order to sensitize, build capacity, and foster closer collaboration between women’s groups and organizations working with women and children, as well as activities around mobilization of men, since the directorate for gender cannot do it alone. The main purpose for this component is to provide a comprehensive behaviour change communication framework on gender-based violence that will address diverse audience needs in order to eliminate gender-based violence in the country.

5.6 INTERVENTION STRATEGIES EMPLOYED BY FBOS

The study had to establish whether faith-based organizations develop new strategies and resources to support survivors of gender-based violence. The results were recorded in figure 5.5 below for interpretation purposes.

Figure 5.5 New Strategies

Source: Data, 2015

The study above reveals that 72%, 162 of the respondents agreed while 28%, 63 disagreed that faith-based organizations develop new strategies and resources to support survivors of gender-
based violence. It is therefore apparent that majority of the respondents agreed that faith-based organizations develop new strategies and resources to support survivors of gender-based violence with 72%, 162. Respondents cited that key strategy, particularly when targeting boys and youth, is to improve the capacity of those who work with these populations to guide them in identity formation and non-violent relationships. Developing these capacities with individuals who work in socializing institutions; such as schools or the media, is critical given their influence in shaping values and norms around male and female roles, identities and behaviors in society.

Since the young people prefer social media like Facebook, twitter, instagram, whataasapetc, FBOs will need to adopt these digital methods of communication. FBOs will need to train people who can use social media to communicate with young people about GBV since these are the avenues and the language that young people understand most.

5.7 ADEQUACY OF STRATEGIES AND RESOURCES

The study sought to establish the adequacy of these strategies and resources to support survivors of gender based violence as recorded in table 5.3 below for interpretation purposes. The study used the likert scale of 1-5 to the statements, where: 1-strongly disagree, 2-disagree, 3-neutral, 4-agree, 5-strongly agree. The mean and standard deviations were generated from SPSS and are as illustrated in table below.
Table 5.3 Adequacy of Strategies and Resources

<table>
<thead>
<tr>
<th>Statements</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor</td>
<td>2.240</td>
<td>0.270</td>
</tr>
<tr>
<td>Adequate</td>
<td>3.005</td>
<td>0.342</td>
</tr>
<tr>
<td>Good</td>
<td>5.884</td>
<td>0.451</td>
</tr>
<tr>
<td>Excellent</td>
<td>5.580</td>
<td>0.733</td>
</tr>
<tr>
<td>Outstanding</td>
<td>4.244</td>
<td>0.551</td>
</tr>
</tbody>
</table>

Source: Data, 2015

The results from table 5.3 above indicate that respondents were for the idea that the strategies and resources were adequate with those citing as poor having a mean of 2.240 and a standard deviation of 0.270. Those that said the strategies were adequate had a mean of 3.005 and a standard deviation of 0.342. The strategies were good had a mean of 5.884 and a standard deviation of 0.451. They are excellent had a mean of 5.580 and a standard deviation of 0.733. While outstanding had a mean of 4.244 and a standard deviation of 0.551.

The respondents’ views contrasted with FBOs leaders’ views that one of their main challenges in curbing gender based violence was lack of enough resources. Probably, most of the respondents were not aware that FBOs go out of their ways to solicit fund from Non-governmental organizations and other agents.

5.8 EXTENT OF APPLICATION

The researcher had to further establish the extent to which FBOs apply these strategies to combating gender based violence in the community. The results were recorded in figure 5.6.
The study shows that 40%, 90 respondents were for the idea that FBOs apply these strategies to combating gender based violence in the community, 32%, 72 respondents said to a great extent. 20%, 45 respondents were neutral extent while 8%, 18 respondents were for very great extent. This implies that most of the FBOs never applied new strategies in combating gender based violence.

In the word of one respondent, “faith based organizations will become more successful when they adopt new methods of communication and especially to the young generation”. It is not enough to use the traditional methods of communication because the young generation prefer digital mode of communication. Faith based organizations will need to reach the young people through social media and other digital methods.
## 5.9 EXTENT OF STRATEGIES APPLIED

The study further had to establish the extent to which FBOs apply these strategies to combat gender based violence in the community as indicted in table 5.4

### Table 5.4 Extent of Application

<table>
<thead>
<tr>
<th>Statements</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The FBOs publications</td>
<td>2.240</td>
<td>0.270</td>
</tr>
<tr>
<td>The FBOs social education programs</td>
<td>5.015</td>
<td>0.543</td>
</tr>
<tr>
<td>The FBOs advocacy work programs</td>
<td>4.845</td>
<td>0.452</td>
</tr>
</tbody>
</table>

Source: Data, 2015

The study above shows that FBOs applied the FBOs publications had a mean of 2.240 and a standard deviation of .270. FBOs social education programs had a mean of 5.015 and a standard deviation of .543. While FBOs advocacy work programs had a mean of 4.845 and a standard deviation of .452.

Faith based organizations are very good in advocacy work. They advocate for the poor, the oppressed, and the marginalised and those discriminated against. This explains why their advocacy work in the issue of gender based violence issue is visible and appreciated by the respondents who commended them for this work. However, faith based organizations will need to improve on using the print, social media and other digital methods of reaching more people in their education programs on gender based violence.
CHAPTER SIX

CHALLENGES FACED BY FBOs IN CURBING GENDER BASED VIOLENCE IN NAIROBI COUNTY

6.0 INTRODUCTION

The preceding section comprises of the response on research objective 3, the challenges faced by FBOs to combating gender based violence in Nairobi County. The results were as outlined below.

6.1 FUNCTIONING OF FBOS

It was necessary for the researcher to establish whether faith-based associated challenges affect the functioning of FBOs. The results were recorded in figure 6.1 below.

Figure 6.1 Functioning of FBOs

Source: Data, 2015
The study above shows that majority of the respondents (60%, 135 respondents) agreed while (40%, 90 respondents) disagreed that faith-based associated challenges affect the functioning of FBOs.

It is therefore apparent that faith-based associated challenges affect the functioning of FBOs supported by 60%, 90 of the respondents.

According to James (2009) the greatest challenge affecting FBOs is the influx of so many FBOs in Nairobi County. Some of these FBOs are not genuine and only uses the name of religion for registration purposes. Some of these FBOs prefer to keep their belief systems vague and ambiguous. A number of times, some of these fake FBOs have deceived innocent Kenyans and grabbed a lot of money from them. In 2005, a certain group of clergy registered a faith based Sacco and promised Nairobi Christians of the great profit they were to be given within six months if they deposited money with them. Many Christians deposited their money with the fake FBO and after six months, Christians were shocked to find the FBO Sacco offices closed and the clergy gone with all their money. Efforts to find the fake clergy have never borne any fruit. This type of behaviors makes some governments to be suspicious of FBOs. The registration processes becomes very complicated and this affect the genuine FBOs. There is a need to build on and develop some of the initial work undertaken by Sider (2004) and Clarke (2008) in developing useful typologies that differentiate FBOs.

Anderson (2006) doubts the effectiveness of some FBOs in regard to combating GBV highlighting their conservative nature. Some of these FBOs misinterpret some Biblical texts and use them to keep the female gender down. Some of the texts used include 1 Tim 2.12 where Paul denies women permission to teach in the church in the specific church but they do not highlight many other texts like Galatians 3.18, where Paul says that male and female are equal before the
creator God. They do not also consider that both Paul and Jesus allowed some women to be leaders of the believers. Genesis chapter 2 is used to show that women are inferior to men because they were created after men. Genesis chapter 1.16ff where God created both male and female at the same time is ignored. The Jews Levitical code on cleanliness and uncleanness is only used in the issues affecting women and to justify their low positions in the church and community. These conservative teachings have been used to exclude women from senior leadership and decision making positions. Some of these FBOs are influencing some Kenyan churches to stop ordaining women.

Amirkhanyan (2009) questions the effectiveness of FBOs in service delivery due to lack of comprehensive framework on which to judge their phenomenal success in social services. He argues that some FBOs do not have strategic plans from which they can be evaluated. They do not also have books of account on which finance usage can be accounted for. According to Lipsky (2011) FBOs must develop some framework on their effectiveness will be evaluated.

6.2 EXTENT TO WHICH FBOS ASSOCIATED CHALLENGES AFFECTS THE FUNCTIONING OF FBOS

It was necessary for the researcher to establish the extent to which the faith-based associated challenges affect the functioning of FBOs. The results were recorded in figure 6.2.
The study above shows that 8%, 18 respondents agreed to a less extent, 23%, 51 respondents agreed to a great extent, 26%, 58 respondents agreed to a neutral extent while 43%, 96 respondents agreed to a very great extent that faith-based associated challenges affect the functioning of FBOs.

In the word of one FBOs leaders, “These challenges hinders our progress and sometimes, the work just stand still but later we continue from where we left” These findings shows that FBOs would do much better if the challenges they encounter were reduced.

### 6.3 FUNDING CHALLENGES

Respondents could not agree on whether funding was a challenge to the working of faith based organizations in curbing gender based violence in Nairobi County. While 50%, 112 respondents agreed that funding was a challenge, 50%, 112 respondents disagreed. Those who agreed argued that many FBOs in Nairobi county get their funds from international organizations like Tearfund,
UNICEF, Crosslinks etc. according to one leader of FBOs, the local people do not support efforts to curb gender based violence because they do not think it is important. This sad situation was echoed by another FBOs leader who moaned the fact that if donors withdrew their support, these programs would close down. The researcher was given an example of one program in one of the main stream churches that collapsed after the donor withdrew their support.

50%, 112 of the respondents disagreed that lack of funds should be a challenge to FBOs work in Nairobi county. In the words of one respondent, “The problem is not that Kenyans cannot get money to support FBOs in curbing gender based violence, the problem is that Kenyans do not think GBV issues is so important to be given a priority” according to this respondent, even FBOs do not put much effort in soliciting for funds locally because in one way they do not believe that GBV is a very important agenda.

Joseph (1999) asserts that the usage of donor funds is a great challenge to some FBOs. While some FBOs are efficient and very transparent in the way they spend money meant to be used for GBV issues, some of them misuse and misappropriate the same money making the donors to withdraw their funding. One respondent gave an example of how some FBOs leaders take photos of Christians after service and send them to the donors and lie that the people in the photo are the ones who attended a GBV workshop which the donor had funded. They spend the money meant for empowerment campaigns but then send fake photos and reports to the donors. These findings agree with karanja (2005) findings that only 50% of FBOs are able to use the money meant for GBV effectively. However, Karanja explains that FBOs leaders do not necessarily misuse the donor money but use it for other programs in the churches.
6.4 RIGID CULTURAL/ SOCIAL NORMS

The researcher found out that despite the FBOs spending long hours trying to sensitize the community on the importance of getting rid of harmful cultural practices, some Christians still practiced them in secret. Community members have internalized such practices in such a way that they cannot imagine leaving without them (Messers, 2007). In one of the focus group discussions, one member asserted that he does not see any reason why FGM/C should be stopped and it took the group members one hour to convince him on the harmful effect of FGM/C. This explains why some Christians still consult witchdoctors; marry more than one wife in secret because changing community norms take time.

These findings are supported by Messers(2007) when he argue that combating GBV is not simple because it requires complete behavioral change involving complex psychological and social issues. Musicane(2005) adds that the reality of GBV challenges humanity to completely change its attitude towards sexuality. Knox-Seith(2005) asserts that this change cannot happen unless individuals are socialized properly on GBV issues. This is why Hill(2005) emphasis on the importance of education arguing that education will promote the acquisition of social, cognitive, emotional and physical skills.

The social dominance of men in many settings is intensified by their stronger economic position in society, and by fathers’ frequent failure to contribute to the costs of maintenance for children in the care of their mothers. Women’s financial dependence on men exacerbates abuse by discouraging reporting, and also by making it harder for women to leave abusive partners because of their fear of the financial consequences for themselves and their children.

Furthermore, major causes of GBV persist. For example, general social acceptance of violence against women is still high.
According to the Nairobi Demographic and Health Survey (2010) 41% of men and 35% of women believe that a husband is justified in beating his wife in certain circumstances. Such social attitudes encourage perpetrators and hinder efforts to prevent and redress the problem. Some aspects of traditional culture can represent a significant hurdle to eliminating GBV. For example, in some communities masculinity is perceived as entailing ownership and control over women which causes some men to react violently when their wives engage in extra marital relationship or when a romantic relationship ends. At the same time, some Nairobi women are often socialized to believe that they are inferior to men and that male authority figures are justified in disciplining them.

Flowing from such perceptions, the degree of acceptability of violence by husbands against their wives appears to vary by culture: in one region, only 14% of women believed that a husband may be justified in beating his wife, while a staggering 81% of women held this belief in another region. Similarly, male views on acceptability of husbands’ violence against their wives ranged from a low of 12% in one region to a high of 67% in another.

The study also established that another cultural constraint can be seen in the tendency of many rape complainants to withdraw their cases because they prefer to seek compensation under customary law, an understandable choice, but one which does not protect society or deter rape. Elimination of GBV will require intensive engagement with grassroots communities and traditional authorities if attitudes are to evolve towards more effective condemnation of violence. The FBOs should then create comprehensive long term programs to educate members on GBV issues. They should also make sure that the trainers are adequately trained so that they may know how to approach different communities as they teach on some of these traditional practices which are deeply entrenched in people’s hearts and minds. One respondent gave an example of how one
trainer attacked FGM/C practice and the women protested against her. The trainer did not know that some of the women present in the workshop earned their daily bread through performing clitoridectomy and according to those women, she was spoiling their business. The trainers should approach the issues carefully and not force their teaching on people’s throat but lead people to recognizing the truth on their own as the discussions continues.
6.5 KENYAN LAW AND GBV

The study found out that the work of FBOs is frustrated lack of human power to implement laws that are put forward to deal with GBV. FBOs teach that domestic violence is a crime and that one should report assault whether it was carried out by a spouse or someone else. When Christians report assault from their spouse, they are turned away from the police station with an argument that they should resolve the issue outside the court. These findings are supported by NjokiNdungu’s findings (2005) that although the government of Kenya has put up laws against domestic violence, its implementation is very poor. Judith (2004) further explains that in most countries national constitutions provide for the equal rights of women and men but in most cases, there is a disconnect between the existing laws and policies making the implementation of these laws difficult.

But Legal methods must be used to combat GBV in Nairobi County Kenya. GBV is a crime and a moral indignation as provided and envisioned in the Kenyan legal system (KLRC, 2010). GBV violates the penal code and is a violation of the constitutional rights of a person. The legal and policy instruments addressing GBV in Kenya are essentially the constitution of Kenya 2010, the sexual offences acts 2006, the penal code and the United nations committee on the Elimination of Discrimination against Women (CEDAW,1979). Other relevant instruments include prohibition of FGM/C act 2011 and gender policy 2011(KLRC, 2010).

Chapter four of the constitution consists of the bill of rights and has the following important provisions in regard to GBV. Section 27 (1) indicate that every person is equal before the law and has the right to equal protection and benefit of law. Section 27 (2) indicate that equality includes the full and equal enjoyment of all rights and fundamental freedoms. Section 28 indicates that every person has inherent dignity and the right to have that dignity respected and protected.
Section 30 (1) indicate that a person shall not be held in slavery or servitude and 30(2) indicate that a person shall not be required to perform forced labour.

According to Ndung’u(2011) the sexual offence of 2006 is a comprehensive law that criminalizes a wide range of behaviours including rape, sexual assault, defilement, compelled and induced indecent acts with child imbeciles or adults, gang rape, child pornography, child trafficking, sex tourism, child prostitution, exploitation, incest by male or female, sexual harassment, deliberate transmission of HIV/AIDS, stupefying with sexual intent, forced sexual acts for cultural or religious reasons among others. The act also has orders for medical treatment for victims including free HIV phylaxis, emergency pregnancy pill and counselling.

The act provide stiff penalties in which most of the crimes attract minimum of ten years imprisonment which can be enhanced to life imprisonment (NCRC,2016). Considering the wide range of behaviour covered and the stiff penalties, the act is definitely an important tool in combating sexual offences. According to KLRC (2011) the gender policy 2011 seeks to promote interventions for the reduction of sexual and gender based violence and to promote the generation of sex disaggregated data to guide interventions. The foregoing shows the need for vigilance by all stakeholders in enforcement of laws and policies for effective management of GBV.

6.6 INVOLVE MEN INTEGRALLY IN GBV PREVENTION CAMPAIGNS

Most of the respondents agreed that not involving men in GBV campaigns has negative effects. 65%, 146 the respondents argued that involving men in GBV campaigns would make the campaign more successful while 35%, 78 respondents argued that involving men in the campaign would not make much difference. The 65%, 146 respondent argued that when men are not involved, they reason that women empowerment is about overthrowing the position of men in the
society and hence fight against the campaigns. In the word of one respondent, “things have never been the same since they women to Beijing in 1995, we wonder why they don’t like us to know what they are doing in those women empowerment workshop and hence i cannot allow my wife to attend them”. This respondent represents men who feel insecure when women are empowered as a way of reducing GBV.

The study showed that where and when men are involved in GBV campaigns, more successes is recorded. The researcher interviewed some members of FBOs who are also members of men associations fighting GBV. These include, men as partners in GBV, Men to men project, men enough, be a man organizations and found that empowered men are very good at fighting GBV. In the word of one leader of FBOs, “we realized that we were losing the battle when we worked with women and girls alone because men became defenceful and neutralized the work we were doing”. Another respondent gave an example of how UNICEP targeted elders from Samburu and Narok (where FGM/C is still ripe) and called them in a one week workshop where they were taught on the evils of and were also shown videos of the consequences of FGM/C. according to this respondent, these men were shocked because they did not know how FGM/C is done since it is the ladies who carry out clitoridectomy. These elders who are also opinion makers decided to stop FGM/C in their areas. This situation has been witnessed in many places where empowered men become more zealous in combating GBV than women.
CHAPTER SEVEN

SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

7.1 INTRODUCTION

This chapter presents the summary of key data findings, conclusion drawn from the findings highlighted and recommendation, the conclusions and recommendations drawn were focused on addressing the objectives of the study. The objectives of the study was to examine the nature and status of gender based violence in Nairobi County, Kenya, to analyze the role of faith based organizations in curbing gender based violence and to explore the challenges faced by faith based organizations in combating gender based violence in Nairobi County.

7.2 SUMMARY OF THE FINDINGS

The study showed that gender based violence exists in Nairobi County. This was evidenced by respondents who had experienced gender based violence as shown below:

- 34% female and 20.9% of male respondents had ever experienced acts of GBV. Of those who had ever experienced GBV, 37.7% of female and 48.6% of male respondents had experienced acts of GBV in the last 12 months.

Most of the Respondents understand gender based violence in terms of acts that cause physical body harm as expressed by 74.1% respondents. Emotional and psychological violence was expressed by 25.9%.

The respondents explained the type of gender based violence they experienced and For women, the commonest experiences as indicated by at least 25.0% of respondents were: slapped or
thrown something that could hurt (reported by 62.2% of female and 47.1% of male respondents);
kicked, dragged and beaten (reported by 52.2% of females and 5.9% of males; pushed or shoved
which was reported by 42.2% of females and 29.4% of males; hit with a fist or something that
could hurt (reported by 30.0% of females and 5.9% of males. According to the above findings, for
men, the corresponding commonest experiences were: slapping or throwing something at
someone and pushed or shoved. Statistical differences between men and women were indicted by
more women than men being kicked and shoved and hit with fist or something else that could
hurt. Although not statistically significant, the only act experienced by more men (23.5%) than
women (14.6%) was being threatened or actually hurt with a panga, knife or other weapon. This
indicates that while men use their muscular strength, women are likely to use weapons to
compensate for their muscular limitations. Indeed, although it did not come out clearly in this
study (that is, none of the men reported being burnt even though in a subsequent question a few
men reported having burn injuries), it is generally reported that women do scald their victims with
hot water. Still, media reports do also indicate that men use weapons against women (Note that in
a survey it is not often possible for interviewers to keep tab of responses and when an inconsistent
occurs they go back in the questionnaire and ask for clarification). In any case, in administering a
questionnaire the respondent has right not to answer any question. Informed analysis, for instance,
referring to other data sources like key informants and secondary data can assist in clarifying data
and making conclusions.
15.2% of female and 7.4% of male respondents had experienced sexual violence demonstrating that sexual violence is indeed a common occurrence. The results confirmed that women carry the greater burden of sexual violence with the difference being statistically significant. The most common form of sexual violence highlighted was physical force to have sex against one's will, reported by 90.9% of the female and 63.6% of the male respondents. More men (18.2%) than women (7.1%) were forced to perform a sexual act they found degrading and humiliating.

Experience of Sexual Violence from an Intimate Partner in the Last 12 Months indicate that among the women, physical force to have sexual intercourse against one's will in the last 12 months was the most common form of sexual violence. Threats and being forced to do something sexual that one found degrading and humiliating were reported by very few respondents. In addition, the data showed none of the male respondents had experienced sexual violence in the last 12 months.

Respondents indicated that they recognised the perpetrators of sexual assault, both women and men reported that it was someone known to them but were not willing to disclose their identity. This in part shows respondents 'unwillingness to disclose the perpetrator. A large proportion of female respondents (32.6%) indicated the perpetrators were neighbours, boyfriends, family friends and to some extent relatives.

The study also established that the social dominance of men in the culturally sanctioned gender hierarchy is threatened thereby increasing gender based violence. Gender role expectations provide structures relating to the transition period which tend to be enforced through abusive tactics such as bullying and gender-based harassments. There is the expectation that women should be submissive to their husbands; however, while husbands are the decision-makers the
empowerment of women is believed to have highly contributed to the loss of men’s self-esteem, leading to increased male violence towards women and children by men.

On the social cultural norms, the study established that bride price is part of the patriarchal establishment in the society which breeds to more in equality between women and men and therefore further placing women in a subordinate position. Societies with stronger ideologies of male dominance have more intimate partner violence. This is because it encourages power struggles between men and women and hence appears to be significant in the perpetration of GBV in homes. The status of women and children in the society is undermined as a result of entrenching the economic inequality practices that appear to favor men. This has continued to encourage the existence of patriarchal and matriarchal violence in a family where the wife or mother has been restricted to the domestic role.

On family relations, the study found out that most of the students have reported to being involved in conflict management in the context of GBV in their homes; perpetrators of violence in homes are mostly abusive men who as children witnessed parental violence or experienced child abuse. Patriarchal culture and practices socialize children into accepting sexually differentiated roles; most drunk parents have a tendency of engaging in violent activities in front of their children.

Further the researcher inquired whether they reported to a faith based leader. The response indicated that 40% agreed while majority who were 60% disagreed to the same idea. However, those who reported got a positive answer from their church leaders who at some point summoned the aggressor and counselled them.

The results indicated that the church is working to end marginalisation with a mean of 4.253 and standard deviation of .874. The respondents further agreed that the church was involved in moral
education with a mean of 4.045 and standard deviation of .541. On advocacy, had a mean of 3.985 and standard deviation of .461. Moreover on whether the church was involved in construction and rehabilitation, the respondents agreed with a mean of 3.487 and standard deviation of .823. They agreed that providing services in an open and transparent manner with a mean of 4.254 and standard deviation of .451. Further on refraining from attempts to discredit or undermine evidence-informed practices of other actors in the GBV response had a mean of 4.124 and standard deviation of .652. Finally, respondents agreed that the church was involved in providing services based on evidence-informed practices consistent with the FBO’s own faith and values with a mean of 3.846 and standard deviation of .354.

The study showed that majority of the respondents agreed to a very great extent that faith-based organization aid to combating gender based violence with 67% of the respondents agreeing.

The research showed that faith-based organization aid to combat gender based violence with 48% responding that it was excellent, 36% were for very good, 10% were for the idea that it was good while only 6% said it was poor. The study showed that one of the communication strategies used was through peer educators as indicated by 20%, on the other hand, 35% were for support groups while 45% as the majority, said organizing GBV awareness campaigns was one of the major means in which message on GBV was passed across. The study showed that 64% agreed while 36% disagreed that the communication strategies used were adequate. However, 36% of the respondents that disagreed cited reporting of GBV incidents by the victims due to fear of victimization.

The study sought to establish the communication strategies used to communicate messages on GBV and the results revealed that in terms of community mobilization, information on gender-
based violence is not properly accessed by a large number of women in particular and communities in general especially in rural areas. There is a need for the media to be fully involved at all levels to ensure that information is accessed at community as well as national level. The media should be sufficiently trained in order to sensitize, build capacity, and foster closer collaboration between women groups and organizations working with women and children, as well as activities around mobilization of men since the directorate for gender cannot do it alone. The main purpose for this component is to provide a comprehensive behaviour change communication framework on gender-based violence that will address diverse audience needs in order to eliminate gender-based violence in the country.

The study revealed that 72% of the respondents agreed while 28% disagreed that faith-based organization develop new strategies and resources to support survivors of gender-based violence. It is therefore apparent that majority of the respondents agreed that faith-based organization develop new strategies and resources to support survivors of gender-based violence with 72%. Respondents cited that key strategy, particularly when targeting boys and youth, is to improve the capacity of those who work with these populations to guide them in identity formation and non-violent relationships. Developing these capacities with individuals who work in socializing institutions, (such as schools or the media) is critical given their influence in shaping values and norms around male and female roles, identities and behaviours in society.

The results indicated that respondents were for the idea that the strategies and resources were adequate with those citing as poor having a mean of 2.240 and a standard deviation of .270. Those that said the strategies were adequate had a mean of 3.005 and a standard deviation of .342. The strategies were good had a mean of 5.884 and a standard deviation of .451. They are excellent had
a mean of 5.580 and a standard deviation of .733. While outstanding had a mean of 4.244 and a standard deviation of .551.

The researcher had to further establish the extent to which FBOs apply these strategies to combating gender based violence in the community. The study showed that 40% were for the idea that FBOs apply these strategies to combating gender based violence in the community, 32% said to a great extent. 20% were neutral extent while 8% were for very great extent. The study showed that FBOs applied the FBOs publications had a mean of 2.240 and a standard deviation of .270. FBOs social education programs had a mean of 5.015 and a standard deviation of .543. While FBOs advocacy work programs had a mean of 4.845 and a standard deviation of .452.

The study showed that majority of the respondents agreed (60%) while (40%) disagreed that faith-based associated challenges affect the functioning of FBOs. It was therefore apparent that faith-based associated challenges affect the functioning of FBOs supported by 60% of the respondents. This was attributed to the idea that some FBOs themselves prefer to keep their faith identity vague and ambiguous. They downplay their faith to appeal to as wide a funding base as possible; to recruit and retain a diverse staff team; and to work easily in a variety of faith contexts. They fear that clarifying their faith base will alienate, exclude and surface conflict. There are considerable and subtle challenges in managing an FBO where staff and major stakeholders come from a variety of positions on faith (James, 2009).

The resulting lack of clarity can maintain internal tensions. It can also cause problems for outsiders studying, funding and making policies. The failure to recognize varieties of FBOs can lead to misunderstandings and simplistic judgments (such as one word in a mission statement).
There is a need to build on and develop some of the initial work undertaken by Sider (2004) and Clarke (2008) in developing useful typologies that differentiate FBOs.

The study showed that 8% agreed to a less extent, 23% agreed to a great extent, 26% agreed to a neutral extent while 43% agreed to a very great extent that faith-based associated challenges affect the functioning of FBOs. The study indicated that Political factors are threatening the FBO’s fight against GBV. In Zimbabwe, President Robert Mugabe cracked down non-governmental organizations, which he said, in August 2005, were being used as “conduits of foreign interference” in his country. The government then introduced a law that would give it more control over these bodies (Karanja, 2005).
7.3 CONCLUSIONS

The findings above have proved that faith based organizations have great potential in not only educating people about the prevention of GBV, but also in providing care and support to people living with trauma associated with GBV.

The study concludes that Faith based organizations can influence behaviour change to promote prevention through a variety of ways ranging from the reactive passive, like inviting or allowing GBV educators to address congregations, to be more active, like using the prestigious moral authority of religion to advocate behaviour. FBOs have a natural ability to promote behaviour change because issues attached to gender-based violence are central to the values of virtually all religions.

The study showed that faith-based associated challenges affect the functioning of FBOs. Some FBOs themselves prefer to keep their faith identity vague and ambiguous. They downplay their faith to appeal to as wide a funding base as possible; to recruit and retain a diverse staff team; and to work easily in a variety of faith contexts. They fear that clarifying their faith base will alienate, exclude and surface conflict. There are considerable and subtle challenges in managing an FBO where staff and major stakeholders come from a variety of positions on faith.

The study showed that majority of the respondents had been engaged in gender based violence. They indicated that the violence was either sexually, verbally or psychological. The findings indicated that, FBO are working through advocacy to end GBV. Further, the communication strategies used was through peer educators and organizing GBV campaigns. The study showed that peer education and GBV campaigns were the most effective method of educating people on GBV.
Key strategy, particularly when targeting boys and youth, is to improve the capacity of those who work with these populations to guide them in identity formation and non-violent relationships. Developing these capacities with individuals who work in socializing institutions, is critical given their influence in shaping values and norms around male and female roles, identities and behaviours in society.

The study concluded that reversal in the traditional gender roles was compounded by the rigidity to conform to present challenges facing families like poverty and the changing culture by humanity. The rapid empowerment of women through different programs has also been contributory to the loss of men’s self-esteem and therefore leading to increased male violence towards women and children on one hand as a way of exercising control and authority over them. On the other hand, women have to maintain their new found status and liberty which they have acquired through struggle hence have perpetrated GBV against men. By so doing, women seem to be fighting the traditional male-dominated thinking that has contributed to men’s feelings of entitlement to abuse women.

There are some harmful cultural values and norms which condone and enforce abuse against women; the religious institutions for example by not allowing many women leaders have contributed to the reinforcement of dominant gender roles which have further increased GBV. Women especially view the traditional culture as an imprisonment that has led to their subordinate position in the dominantly patriarchal society and which they are determined to change in order achieve their aspirations.

Men with a tendency towards abusive behavior have been reported to have grown up in traditional family models where the father is the breadwinner and whereas the mother is the home maker.
However, while there may be biological predictors of violence for example male masculinity, higher levels of testosterone among men, there is more substantiation for violent behavior caused by social factors during adolescence and childhood such as being victims of violence in schools and at home.

The study further concluded that 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, Africa has one of the highest per capita rates of alcohol consumption. Alcohol use results to impaired judgment, including the ability to interpret social cues and reduces inhibition, which further contributes to higher incidences of GBV.

7.4 RECOMMENDATIONS

Although faith-based organizations may face many challenges if they engage in community development, they also bring distinctive advantages to the field. The degree to which they will be successful community developers depends in large part on their ability to draw on their advantages while managing or overcoming their disadvantages. If they embark on this course, many will need assistance; organizational and technical as well as financial. Even so, many will find traditional community development approaches daunting. For these organizations, new institutional vehicles to channel their contributions may need to be developed.

The field need to explore alternative strategies for congregational involvement. These might include new mechanisms to stimulate and support coalitions or collaborations; links between inner-city and suburban congregations; new shared social investment vehicles suited to small scale and/or shorter term investments; and new mechanisms for groups of clergy and laity to
affect the climate of public discourse and opinion. Differently stated, community development practitioners may find it worthwhile to invent new ways to tap congregations’ strengths; not only their space and volunteer labour, but also their potential for positive, ethical engagement in public dialogue. The fact that faith-based organizations could engage in community development does not necessarily mean that they should. Congregations and other faith-based groups, like other kinds of organizations, have strengths and weaknesses. They work in environments that pose different kinds of problems and offer varying kinds of opportunities. As the huge range of activities they already conduct demonstrate, faith-based organizations have many opportunities to make socially valuable contributions. They should apply their energies in ways that capitalize on their comparative advantages; for many, that will not lead them into community development. As the huge range of activities they already conduct demonstrate, faith-based organizations have many opportunities to make socially valuable contributions. They should apply their energies in ways that capitalize on their comparative advantages; for many, that will not lead them into community development. The study recommends that community sensitization targeting men and boys is vitally important in tackling gender-based violence as a way of changing their attitudes and behavior towards women.

This should start immediately the child join school because it able to shape his thinking and help him have a sound minds from school. This can be done by teachers in childhood classes especially in schools. It can also be done in churches where Sunday school teachers can be used to teach children about relationships. This especially will have a very positive effect on the boy child as opposed to influencing him negatively.

Text Books and other learning materials should be gender balanced because they play a great role in shaping gender roles. The ministry of education, science and technology should ensure that the
books to be used in schools, colleges and universities are gender balanced. For example, they should not use only the male names and use male photographs when they are talking about engineers, professors, pilots etc but should use both male and female to show that both male and female can take any role as long as one is trained for it.

Clear messages for the root causes of GBV should be portrayed for example by use of bill boards in strategic places where community leaders can highlight the vices of gender based violence just like the way HIV/AIDS boards have been displayed. This will help people build some consciousness about gender based violence and know that it is within them so that they can put effort to end it. It can also be put up in public places where people go to rest for everyone to read. In the boards men can be encouraged to take a leadership role in GBV prevention through pictures or writings depicting the effects of GBV in homes and in the society. This will help the boy child to realize that in most cases it is men who are the perpetrators of GBV and therefore will help him want to participate in its fight.

These types of campaigns can help reduce GBV to a great extent just like HIV/AIDS campaigns helped reduce HIV/AIDS cases in Kenya. The campaigns will help those who do not recognize that GBV is both sinful and violation of human rights and also a crime.

It is important for the community to recognize that programs targeted at women have had and may continue having adverse effects on men’s attitudes, unless ways are found to include men in such programs. It is important for community leaders both male and female to initiate inclusive practices for example economic development, social-cultural empowerment programs that are geared towards reducing poverty to include both genders to enhance respect and relationship among them as opposed to competition which breeds to gender inequalities. This will help save
spaces for women to collectively voice their concern as well as have freedom without necessary having to undermine their male counterparts.

Awareness campaign for example street walks for these efforts can be done together in the street as a rallying call. The effect of this on boy child will be that he will want to support the members of the opposite sex in developmental efforts as opposed to seeing them as competitors.

There is also a need to recognize and respond to the socio-cultural barriers which men face in accessing life skills for example through providing appropriate forums and responsive services. This can be done in churches for confidentiality and established programs through community leaders where men can go to express themselves whenever there is a disagreement between them and their wives or female counterparts so that the stigma associated with gender based violence exposure can be dealt with head on.

This will help the boy child have an alternative place where grievances can be sorted out and eventually help in the arbitration whenever there is an issues as opposed to resorting to GBV.

The study also recommends that strengthening of coordination mechanisms between different sectors and programs whenever advocacy against GBV is done there is objectivity to avoid backlash or stereotyping cases should be looked at individually so that communal perception is avoided. This can be spearheaded by NGOs both local and international. There can also be multi-sectoral strategies where there should be free flow of information between for example the police, hospitals and government officers concerned as a way of combating gender based violence and reducing its effect on the boy child. This will send clear message on rule of law and the consequences of engaging to GBV.
The study also recommends that solutions to GBV do not primarily seek to challenge male dominance but rather to involve them in finding the solution through shifting mindsets towards gender equality. GBV can be distilled down to be a social problem caused by a fundamental failure to manage personal and family relationships. Therefore, possible solutions to GBV can be developed around promoting good parenting and working with whole families to build better relationships. It is also critical to specifically focus on redefining masculinity among men and boys, in order to reorient their perception of and relationships with women. It should be noted, however, that work around challenging cultural norms and practices is complex and delicate, and takes it time to begin to see changes. Once-off interventions are therefore not effective and should be discouraged.

GBV programmes should be based on practical issues in the specific community. Therefore, faith based organizations should ensure that they fund evidence-based programmes. Although many corporates do not fund development research, it is important for FBOs implementing GBV programmes to partner with research institutions in order to access current information and knowledge for application in programme management.

Victims of GBV suffer abuse within the family environment. Although victims are the centre of most programmes, family members also suffer, especially children, and they require support to cope with the victimization of a relative or parent. FBOs should therefore support programmes that provide family support, such as family or group counselling to help the family deal with the trauma and challenges associated with witnessing GBV.

One of the underlying causes of GBV is the breakdown of relationships between individuals and families. Building and maintaining good relationships is critical for promoting functional families
and healthy societies. Children raised in a family where GBV is rife and experience abuse at a young age are more likely to be perpetrators as adults. Boys who grow up without positive role models at home and lack the requisite skills to relate to women are also likely to be abusive to their partners. In this regard, parenting becomes very important in supporting and socializing children to grow up to be adults who can create and value relationships with others.

Faith based organizations should encourage and support programmes that focus on promoting parenting skills and building families. The involvement of fathers is especially important in strengthening and stabilizing families, creating a healthy environment for the development of children. The involvement of men through sharing of responsibilities for raising children is also important as it relieves the burden on women and girls, who are often the primary caregivers in most families. Fathering and caregiving roles need to be strengthened and men need to be supported and enabled to achieve this.

GBV is a multi-faceted and highly complex issue. Therefore, addressing GBV requires deeper understanding of the underlying risk factors and drivers of this societal menace. Based on this knowledge, multiple approaches are required in order to bring about sustainable solutions. FBOs should, therefore, contribute towards understanding GBV by supporting professional learning communities where role players from various sectors meet to share new knowledge, analyse trends in GBV and legislation in order to focus these towards initiating systemic change. The learning communities should be coordinated by carefully selected professionals, who are actively engaged in programme development and reviews, implementation and evaluation in order to be effective. They should thus act as a reservoir of knowledge, informing research and promoting sharing of knowledge at various levels within communities, civil society and relevant government departments.
The majority of programmes designed to curb GBV focus on supporting victims and survivors. Despite men being the chief perpetrators of GBV, this scourge has remained a women’s issue. While it is important to provide for the needs of those affected by GBV it is also necessary and, perhaps much more important, to direct more effort and resources towards prevention and early intervention. Such initiatives, if successful, can result in huge societal benefits.

FBOs should also focus on men and boys in order to challenge and negotiate changes concerning the patriarchal nature of our society. Patriarchy, traditional norms and practices, as well as the current perceptions of masculinity can only be challenged and solutions proposed if men and boys are involved in GBV programmes. Redefining masculinity can help socialize young boys into a new paradigm where relationships with women are less influenced by gender and power dynamics and more by the desire to build fulfilling relationships, and sustainable families and communities.

In order to curb GBV within families and communities, programmes must also target the perpetrators of such violence as part of the solution. The justice system alone cannot prevent perpetrators from engaging in acts of violence against women. When perpetrators return to their communities there is often fear among victims and survivors and chances of reoffending are also high. It is, therefore, imperative for civil society to engage in programmes that focus on rehabilitation and reintegration of perpetrators. This includes offering psychosocial counselling and support to both victims and perpetrators.

In general, the workplace leadership structure is still dominated by men despite the legislation for equal opportunities for all. With respect to GBV in the workplace, women are still more vulnerable than men and much more likely to experience some form of violence than men. The
costs of GBV are also felt in the workplace through reduced productivity owing to prolonged absenteeism and staff turnover.

FBOs should also encourage the development and implementation of workplace GBV programmes. While GBV may in most cases not occur in the workplace, GBV in the home often manifests in the workplace. Workplace GBV programmes essentially complement community programmes and further provide an opportunity to target and include men in search of sustainable solutions.

Addressing GBV requires exploring and addressing social and cultural norms that guide relationship building. These issues are complex and take a long time to understand and influence change. Indeed, it takes time to change mindsets and social systems in communities. It is, therefore, important for FBOs to consider and understand these issues when funding interventions to curb GBV. Multi-year funding ensures that implementing partners can sustain their interventions in communities long enough to effect initial response and long-term impact. However, where donors are interested in funding micro-level activities, these should be supported within the context of a broader context of effecting systemic change.

Implementing development programmes such as GBV requires significant financial and human resources. The commitment of such resources is often based on perceived social and economic gains to society. Given this commitment, systems should be put in place to ensure that the targeted gains are achieved. FBOs should demand that programmes be benchmarked against good practice from experiences locally and elsewhere. All programmes should be implemented based upon a baseline survey and progress tracked through periodic monitoring and evaluation of activities.
Despite the obvious importance of monitoring and evaluation, it is acknowledged that evaluating social programmes is a daunting task. It is fairly easy to determine the numbers of victims and types of services. It is much more difficult to qualitatively evaluate the impact of services such as GBV awareness raising, psychosocial counselling and victim empowerment. However, when GBV programmes are developed, these should be accompanied by practical and detailed outcome and impact indicators to provide guidance during the evaluation of programmes.

7.5 RECOMMENDATIONS FOR FURTHER STUDIES

The study suggests the following areas where further research should be conducted; Further studies should be conducted in other counties across the country to assess the effect of GBV on women and girls as this would enable a cross country comparison and observation of the trends in sexual violence. Further studies could also be conducted on one of the aspects of women lives such as health or economical aspect to bring out the clearer picture of the adverse effects of GBV. Studies should also be conducted to find out the impact and challenges being faced by the on-going interventions aimed at checking GBV in Nairobi county Kenya.
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APPENDIX I: QUESTIONNAIRE FOR THE RESPONDENTS

COVER LETTER

Dear Respondent,

My name is Catherine WambuiNjagi of Reg No: CPC/H/55/10. I am currently a Doctor of Philosophy (PhD) student at MasindeMuliro University of Science and Technology. As part of my course requirements, I am expected to conduct a research and present it as a dissertation. My topic is The Role Of Faith-Based Organisation in Combating Gender-Based Violence in Nairobi County, Kenya. I hereby request you to find time to respond to a set of questions aimed at achieving the study objectives. Kindly note that your participation is voluntary and your personal information will be treated with strict confidentiality.

SECTION A: BACKGROUND DATA

A 1. Age

15-25 [ ] 26-35 [ ] 36-45 [ ] 46-55 [ ] 56 and above [ ]

A 2. Gender

Male [ ] Female [ ]

A 3. Which FBO do you get your assistance from?

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A 4. What is the highest level of education you have completed?

None [ ] Primary [ ] Secondary [ ]
A 5. What is your religion, if any?

Catholic [ ] 
Protestant [ ] 
Muslim [ ] 
Buddhist [ ]

Hindu [ ] 
Atheist [ ] 
Traditionalist [ ]

Other (Specify)……………………………………………………………………

SECTION B: ROLES PLAYED BY FAITH-BASED ORGANISATION

B 6. In your own view, does faith-based organization help in combating gender based violence?

Yes [ ] No [ ]

B 7. In your own view, what are some of the roles of faith based organization?

Working to end marginalization [ ]

Moral Education [ ]

Advocacy [ ]

Construction and rehabilitation

Providing services in an open and transparent manner [ ]

Refraining from attempts to discredit or undermine evidence-informed practices of other actors in the GBV response [ ]

Providing services based on evidence-informed practices consistent with the FBO’s own faith and values [ ]

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B 8. To what level of extent does faith-based organization aid to combating gender based violence?

- No extent at all [  ] Less extent [  ] Neutral extent [  ]
- Great extent [  ] Very great extent [  ]

B 9. How would you rate the contribution of these FBOs in reducing gender-based violence?

- Excellent [  ] Very good [  ] Good [  ] Poor [  ]

SECTION C: COMMUNICATION STRATEGIES

C 10. What communication strategies used to pass messages of GBV?

- Peer educators [  ]
- Support groups [  ]
- Organizing GBV awareness campaigns [  ]

C 11. Do you think the communication strategies used are adequate?

- Yes [  ]
- No [  ]

C 12. If no in question 10, what are the areas that you feel need improvement, in order to achieve better communication on gender based violence

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C 13. What feedback do you receive from survivors during the campaigns of gender-based violence?
C 14. In your own view, what can you suggest for improvement of the communication strategies?

SECTION D: INTERVENTION STRATEGIES EMPLOYED BY FBOS

D 15. Does faith-based organisation develop new strategies and resources to support survivors of gender-based violence?
   Yes [ ]
   No [ ]

D 16. If yes in (8) above, how adequate are these strategies and resources to support survivors of gender based violence?
   Poor [ ]
   Adequate [ ]
   Good [ ]
   Excellent [ ]
   Outstanding [ ]

D 17. To what extent does FBOs apply these strategies to combating gender based violence in the community?
   Less extent [ ]
   Great extent [ ]
   Neutral extent [ ]
   Very great extent [ ]

D 17. To what extent does FBOs apply these strategies to combating gender based violence in the community?

The FBOs publications
The FBOs social education programs
The FBOs advocacy work programs

SECTION E: CHALLENGES FACED BY FBOS TO COMBATING GENDER BASED VIOLENCE IN KENYA

D 18. In your view, do faith-based associated challenges affect the functioning of FBOs?

Yes [ ]
No [ ]

D 19. If yes in 17 above, to what extent do those challenges affect the functioning of FBOs?

Less extent [ ] Great extent [ ]
Neutral extent [ ] Very great extent [ ]

D 20. Kindly indicate some of the current challenges affecting the functioning of FBOs

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D 21. What ways would you recommend to curb the challenges affecting FBOs in Kenya?

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D 22. What advantages do you think FBOs have over secular organizations as far as GBV Concerned?

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THANK YOU FOR YOUR RESPONSES.
APPENDIX II: INTERVIEW GUIDE FOR THE FBOs LEADERS

A. Introduction

• Introduce yourself

• Assure respondent of confidentiality by stating that the information provided will be used for research purposes only and personal details will not be divulged

B. Interviewer's Details

Name of interviewer:

Date of interview _

C. Respondent's Details

Name of respondent

Place of work

Phone/ Mobile no.

Today, I would like us to talk about gender based violence (GBV). But perhaps to start the discussion, you could tell me a little bit about yourself & office

D. Yourself & Office

How long have you been an administrator in this area?

What services does your office offer the people?

F. Forms of GBV

What form/nature of GBV is reported to your office?
Which are the most common?

G. Causes of GBV in the area

In your opinion, what are the causes of the mentioned GBV cases?

G. Effects of GBV

What are the effects of these abuses on girls and women?

H. Conclusion

Do you have any comments or suggestions on what we have just discussed?

THANK YOU FOR YOUR RESPONSES.
Appendix III: QUESTIONNAIRE FOR THE FOCUS GROUP MEMBERS

Please tick the appropriate box or write your answer for the questions below on the spaces provided.

PART ONE: General Information

1. Name (optional)...........................................................................................................

2. Name of your school (optional)..............................................................................

3. Education qualifications?
   Diploma [ ]
   Degree [ ]
   Masters [ ]

4. Kindly indicate your level of agreement to the statement below relating to the aspect influencing gender based violence. Use a scale of 1-5, where 1-strongly disagree, 2-disagree, 3-neutral, 4-agree, 5-strongly agree.
**Gender role expectations and Gender based violence**

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<tbody>
<tr>
<td>The social dominance of men in the culturally sanctioned gender hierarchy is threatened by gender based violence.</td>
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<tr>
<td>Empowerment of women has been contributory to the loss of men’s self-esteem, leading to increased male violence.</td>
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<tr>
<td>Traditional male-dominated roles have contributed to men’s feelings of entitlement to abuse women.</td>
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<tr>
<td>There is the expectation that women should be submissive to their husbands, while husbands are the decision-makers</td>
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<tr>
<td>Due to the responsibilities expected from men compared to women, a man believes that a woman should obey him without questions</td>
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<tr>
<td>Gender role expectations provide structures relating to the transition period which tend to be enforced with abusive tactics such as bullying and gender-based harassments in schools</td>
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<tr>
<td>Gender role expectations play a strong role in shaping the perception of the boy child as he fits in or while he is being accepted in to the society</td>
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<td>The church and other religious or spiritual institutions have</td>
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<td>also contributed to the reinforcement of dominant gender</td>
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<tr>
<td>roles, further condoning the spousal abuse of women</td>
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<td>New culture through education has led to the insubordination</td>
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<tr>
<td>of women in a male dominated culture</td>
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<tr>
<td>Power struggles existing between men and women appear to be</td>
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<td>significant in the perpetration of GBV in homes</td>
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<tr>
<td>Status of women and children is undermined as a result of</td>
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<td>entrenching economic inequality, which further exacerbates</td>
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<tr>
<td>patriarchal violence</td>
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<tr>
<td>Societies with stronger ideologies of male dominance have</td>
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<td>more intimate partner violence</td>
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<tr>
<td>The patriarchal head dominated the family, with the wife or</td>
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<td>mother being restricted to a domestic role</td>
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<tr>
<td>A clear division of labor along gender lines is adhered to,</td>
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<td>meaning that men are allowed better access to education</td>
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<td>and enjoyed exclusive political leadership</td>
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<tr>
<td>Men with a tendency towards abusive behavior have been reported</td>
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<td>to have grown up in traditional models of the</td>
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</tbody>
</table>
family where the father is the breadwinner and the mother is the home maker

Dowry/bride price is part of the patriarchal establishment in the society which breeds inequality between women and men, further placing women in a subordinate position

6. Family Relations and Gender Based Violence

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</thead>
<tbody>
<tr>
<td>Most of the students have reported to being involved in conflict management in the context of GBV in their homes</td>
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<tr>
<td>There is violent behavior among adolescents and/or children from violent homes at school</td>
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<tr>
<td>Patriarchal culture and practices socialize children into accepting sexually differentiated roles</td>
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<tr>
<td>Most of drunk parents have a tendency of engaging in violent activities in front of their children</td>
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<tr>
<td>Violent behavior caused by social factors during adolescence and childhood such as being victims of violence are manifested by student in the school through their behavior</td>
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<tr>
<td>Perpetrators of violence in homes are mostly abusive men who as children witnessed parental violence or experienced</td>
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</table>
7. Substance Abuse and Gender Based Violence

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</thead>
<tbody>
<tr>
<td>Substance abuse is associated with GBV in homes</td>
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<td>Drug abuse results to impaired judgments among the abusers</td>
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<tr>
<td>Most of the drunk persons do not feel shy to engage in violence in the presence of their children or public</td>
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<td>Most of the drunk persons who have been reported to have HIV/AIDS perpetrate gender based violence through sex</td>
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</table>

THANK YOU FOR PARTICIPATING
APPENDIX IV: NACOSTI RESEARCH PERMIT

CONDITIONS

1. You must report to the County Commissioner and
   the County Education Officer of the area before
   embarking on your research. Failure to do that
   may lead to the cancellation of your permit.
2. Government Officers will not be interviewed
   without prior appointment.
3. No questionnaire will be used unless it has been
   approved.
4. Excavation, filming and collection of biological
   specimens are subject to further permission from
   the relevant Government Ministries.
5. You are required to submit at least two (2) hard
   copies and one (1) soft copy of your final report.
6. The Government of Kenya reserves the right to
   modify the conditions of this permit including
   its cancellation without notice.

THIS IS TO CERTIFY THAT:
MRS. CATHERINE WAMBUI NIAGI
of MASINDE MULIRO UNIVERSITY OF SCIENCE AND
TECHNOLOGY, 100-50100 KAKAMEGA,
has been permitted to conduct research
in Nairobi County
on the topic: THE ROLE OF FAITH-BASED
ORGANIZATIONS IN CURBING GENDER
BASED VIOLENCE IN NAIROBI COUNTY KENYA

for the period ending:
14th October, 2016

Applicant's
Signature

Permit No: NACOSTI/P/15/6144/7782
Date Of Issue: 14th October, 2015
Fee Received: Ksh 1,000

Director General
National Commission for Science,
Technology & Innovation
Appendix V: Proposed Research Budget

<table>
<thead>
<tr>
<th>ITEM</th>
<th>COST (KSHS)</th>
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<tbody>
<tr>
<td><strong>1. Proposal Development</strong></td>
<td></td>
</tr>
<tr>
<td>a) Printing of 100 pages of proposal @ Kshs. 10</td>
<td>1,000.00</td>
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<tr>
<td>b) Reproduction 5 copies @ Kshs. 200</td>
<td>1000.00</td>
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<tr>
<td>c) Binding 6 copies @ Kshs. 100</td>
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<tr>
<td>d) Traveling Expenses</td>
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<tr>
<td>e) Miscellaneous expenses</td>
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<td><strong>2. Data Collection</strong></td>
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<td>- Data collection</td>
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<td>- Books and reading material</td>
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<tr>
<td>- Data analysis and computer runtime</td>
<td>20,000.00</td>
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<td>- Printing and photocopying</td>
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<td>- Binding 6 copies @ Kshs. 500/-</td>
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<td><strong>3. Others</strong></td>
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<tr>
<td>a. Miscellaneous expenses</td>
<td>10,000.00</td>
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<td><strong>GRAND TOTAL</strong></td>
<td><strong>173,6000</strong></td>
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### APPENDIX VI: WORK PLAN OF THE STUDY

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<tbody>
<tr>
<td>Development of draft proposal</td>
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<td>Evaluation of draft proposal by supervisors</td>
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<td>Review and finalization of proposal</td>
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<td>Development of data collection questionnaire</td>
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<td>Collection of data in the field</td>
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<td>Data analysis and interpretation</td>
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<td>Writing of draft study report</td>
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<td>Final study report preparation</td>
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