The Experiences of Abused South African Women in Shelters[1]

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Abstract

Abrahams and Jewkes (2005) report that South Africa experiences high levels of violent crimes. In particular, in South Africa in 1999, 8.8 women per 100 000 aged 14 years or older were murdered by a current or ex-husband or boyfriend (Abrahams & Jewkes, 2005). This indicates the seriousness of the problem of women abuse in South Africa, which motivated this study. This study explores the experiences of abused women living in shelters for abused women. The participants in this study were abused by people known and close to them, such as their spouses, boyfriends, step-fathers and uncles. Due to such abuse, they had to seek refuge in shelters for abused women, where they have access to psychological intervention and counseling. This study reports on multiple case studies that were conducted on victims of domestic violence in two shelters in South Africa. Some of the reasons given for being abused were: their refusal to give their abusers money for drugs, refusal to have sex without condoms because the abusers had paid "lobola" or dowry, and the refusal to allow their husbands or partners to have extra-marital affairs. The participants were exposed to verbal, psychological/ emotional, physical, sexual and financial/economic abuse. In the shelters, they were empowered to acquire different skills in order to prepare them for life "after the shelter."

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Introduction

Violence against women occurs in all societies in some form or another. The home is sometimes the most dangerous place for abused women, because they often know and live with the perpetrators (Fedler & Tanzer, 2000). Fathalla (2005) and Fedler and Tanzer (2000) assert that to many people staying out of harm's way is a matter of locking doors and windows and avoiding dangerous places, whereas for others, it is not possible to escape because the threat of violence is behind the doors, well hidden from public view.

According to Fedler and Tanzer (2000), violence in some cases is supported by various cultural and traditional practices within the society. Mullender and Morley (1994), cited by Park and Khan (2000), maintain that culture is universally used by many men in order to maintain their power over women, and to justify misogyny and chauvinism. A study conducted by Moletsane and DeLancey (2003), found that violence against women is an additional aspect of life that increases the likelihood of a woman becoming HIV positive. The perpetrators of domestic violence have control and advantages in the domestic arena. Moletsane and DeLancey (2003) also found that customs, practices and beliefs encourage multiple sexual partners and risky behaviour, and in most cases, men have the final decision as to whether or not to use protection. In their study, Park, Peters and De Sa (2000) found that more than 80% of all HIV infected women get the virus from a male sex partner. The victims of domestic violence who become HIV positive, suffer psychological trauma which, according to Zappulla (1997), is associated with extreme anxiety over possible rejection and judgment by family members, friends and the community.

The year 2004 was a significant one in South African history. It marked the end of legislated apartheid and saw the introduction of South Africa's first democratic elections, as well as the implementation of a range of changes aimed at eradicating apartheid's injustices and excesses. But for South African women, freedom from racial oppression and violence has not led to freedom from gender oppression and violence (Vetten, 2000).

The international agency Interpol, maintains that South Africa reports some of the highest figures for rape in the world (Crime Information

Management Centre, 1996). Vogelman and Eagle (1991) describe violence against women as endemic in South Africa. The problem has become so intractable, that the National Crime Prevention Strategy (NCPS) has declared crimes of violence against women to be "priority crimes" (Department of Safety and Security, 1996, p. 37). As a psychologist, who provides intervention to abused women on a regular basis, this author was motivated to conduct this study to explore their experiences, which are a reflection of the high rate of violence against women in South Africa.

The purpose of this research study is to explore and investigate the experiences of abused women living in shelters. The study also aims to construct the experiences of the participants into informed knowledge.

Research on Women Abuse

Pelser *et al*., (2005) maintain that perceptions of violence differ vastly between cultures and communities. Research on violence committed against intimate partners has shown that some people, including women, regard such violence as acceptable if it does not injure or leave a mark on the victim (Vetten, 2000). Abrahams and Jewkes (2005) found that many women in their study thought wife beating was justifiable under certain circumstances, including refusal to have sex. These attitudes are symbolic of a general pattern of acceptance of victimisation as part of being female. A culture of silence prevails which is a serious concern. In a survey conducted in three provinces in South Africa, more than a third of the participants agreed that a man beating a wife was a sign of love (Abrahams & Jewkes, 2005); hence some abuse cases are not reported in South Africa. It is evident that in South Africa women need to be informed about their human rights. According to Saur *et al*., (2005), domestic violence is a vicious circle which can be addressed and tackled by profound awareness of human rights, the right to bodily integrity, and by profound empowered strategies on an economic and educational level.

Due to the seriousness of domestic violence in South Africa, the Domestic Violence Act (Act 116) was introduced in 1998. The aim of the Act is to protect the victims of domestic violence by creating obligations on law enforcement bodies to protect the victims as far as

possible. The Act sets out a broad range of behaviours that constitute domestic violence; including physical, sexual, verbal, emotional and psychological abuse, stalking, intimidation, harassment, malicious damage to property, unauthorized access to the complainant's property, as well as other forms of controlling behaviour which may cause harm to safety, health or well being of the complainant (Dissel & Ngubeni, 2003). The Domestic Violence Act has its own challenges. According to Vetten (2005), while South Africa has eleven official languages, the application forms for the protection order are available in only two languages, namely; English and Afrikaans. Over and above language, the written completion and reading of the application forms challenges women with varying degrees of literacy. Further, the forms are not available in Braille, and sign language interpreters for Deaf women are not readily available at courts.

World Health Organization (in Fathalla, 2005) mentions that; "Violence pervades the lives of many people around the world, and touches all of us in some way." A study by the World Health Organisation (2006) confirms that violence against women is pervasive and that violence by intimate partners, rather than other perpetrators, is a dominant occurrence in women's lives. The study also revealed that for women with partners, the lifetime prevalence of physical or sexual abuse, or both, by an intimate partner ranged from 15% to 71% in the different sites investigated. The study conducted by the World Health Organization (2006), across all countries, reports that between 20% and 75% of women had experienced one or more acts of emotional abuse.

A World Bank report (in Fathalla, 2005) estimates that rape and domestic violence account for about 5% of the total disease burden in women aged 15~44 years in developing countries. By damaging women's physical, mental and emotional capacity to care for family, violence against women also affects the health of other family members, particularly young children.

Factors Contributing to Violence against Women in South Africa

The various manifestations of violence against women in South Africa

have been influenced by social, cultural and political history; by colonisation and apartheid, in particular and by the resultant race, class and gender divisions (Vetten, 2000). Vetten (2000) further mentions that in order to understand violence against women in South Africa, one must have some sense of South Africa's particular colonial and apartheid history and the current transition to democratic government. Throughout the history of South Africa, race has divided the people of the country. Notions of racial superiority and racial separation have led to the creation of institutions such as migrant labour and domestic labour. In addition people have had to face forceful removals, states of emergency and the artificial creation of so-called "homelands." These racist acts and institutions have either directly or indirectly resulted in the break-up of traditional African family structures. Together with the effects of urbanisation, the codification of customary laws and modernisation, there have been many challenges in terms of men's traditional authority and patriarchy.

Social hierarchies that privilege the traditional authority of men over women remain fairly intact, especially in rural areas. Within this context, violence is used to maintain the patriarchal social hierarchy, as well as to compete for scarce resources (Van der Waal, 1996). The European colonisation of Africa resulted in the development of a dual legal system within South Africa, namely: an European system of law applicable to the colonisers and a "subordinated and regulated version of indigenous law for the colonized" (Seidman, 1978, pp. 29-34 in Currie, 1994). However, the interaction between colonial rule and African customs produced another type of indigenous law (Chanock, 1987 cited by Nhlapo, 1991). The customary law was born of an alliance between colonial administrators and indigenous elites. African male elders, seeing their power dwindling, attempted to maintain it by manipulating customs such as lobola (dowry) and kinship (Chanock, 1987 in Nhlapo, 1991).

According to Archer and Lloyd (2002), there is a general perception among some communities in South Africa that men are superior and women are inferior. Archer and Lloyd (2002) further state that one paradoxical part of this belief is that women are viewed as being nicer, more morally upright human beings. This unequal power balance between men and women can have an effect on the psychological well-being of women. If women and/or girls are continually told that

they are inferior and unworthy, they may develop an internalised oppression (Hunter & Forden, 2002). This internalised oppression can lead to self-destructive behaviour such as difficulty with assertiveness, as well as a tendency to settle for less in life. Kaplan and Sadock (1988) maintain that behavioural, cultural, intra-psychic and interpersonal factors contribute towards abuse against women. The abusers' aggression is bullying behaviour designed to humiliate their wives in order to build up their own low self-esteem. In view of the high prevalence of intimate partner violence in South Africa, it is not surprising that much of this violence is witnessed by children in the home (Abraham *et al.*, 2005). This certainly has an impact on children.

The Impact of Abuse on Children

The reaction of children who witness violence against their mothers takes a range of forms (Park & Khan, 2000). They overhear the violence as it occurs and witness the beatings. Some, particularly, older children, attempt to intervene to protect their mothers, whereas others are encouraged to support or participate in the abuse and degradation of the mothers. Even when children are never themselves physically harmed by the abuser, they are indelibly impacted by the violence. The greatest benefit for children in a shelter, after safety has been provided, is to have contact with other children in a similar position. Muller and Morley (1994), in Park & Khan (2000), maintain that in a refuge children can have their experiences heard, validated and understood by other children and adults who have been through similar things and who understand how they feel.

Family violence can have the following effects on children according to Park and Khan (2000): emotional, somatic or physical, social and behavioural effects.

Children from violent homes often feel tense and anxious. They might feel guilty because the abusive partners often use their children's behaviour as an excuse to start a fight. The children then feel it is their fault and that they should be able to stop the violence or protect their mothers. They might develop withdrawal behaviour and lack of concentration, which can affect their scholastic performance. Due to lack

of attention or affection as a result of mother's stress, they might resort to inappropriate behaviour, such as throwing temper tantrums or swearing, in order to seek attention. The longer children live in an abusive home, the more likely it becomes that they will exhibit their fears and feelings through illnesses, such as headaches, stomach aches and asthma. Children sometimes model their parents' behaviour. Children from abusive homes might grow up learning that violence is used to address conflict and to solve problems. Often they do not learn alternative ways of solving problems and may use violence to get what they want. This pattern is called the cycle of violence or inter-generational violence theory (Park & Khan, 2000).

Shelters for Abused Women in South Africa

Due to the increase of violence against women in South Africa, shelters for abused women were established, as described in this section. While shelters for destitute women or pregnant unmarried teens have been in existence for decades, shelters for abused women are a relatively new phenomenon in South Africa. According to Park, Peters and De Sa (2000), the first shelter in South Africa specifically designed for abused women, was opened in 1984 by People Opposing Women Abuse (POWA). Currently, there are approximately 25 shelters for abused women in South Africa. Many of these shelters have a therapeutic component and offer both individual and group counseling. They employ experts such as psychologists and social workers to work with and rehabilitate the victims for life after the shelter.

Shelters are defined by Gelles (1976), Bowker and Maurer (1985), and Dobash (1992) (all cited by Park, Peters & De Sa, 2000) as places of safety where abused women and their children can seek refuge when their lives are endangered by interpersonal violence. Shelters for abused women play an important empowering role in providing social, psychological and emotional support for women in abusive relationships. The safety of the shelters provides women with opportunities to plan for a safer future. Beyond meeting such practical needs of abused women and their children, shelters play an important strategic role, namely working towards eliminating violence against women.

According to Batliwa (1994), women's empowerment is only vaguely understood by most abusers, who view such a concept as yielding absolute power to women. Batliwa (1994) further mention that empowerment is a process whereby the powerless or less powerful members of a society gain greater access and control over material and knowledge resources, challenge the ideologies of discrimination and subordination, and transform the structures and institutions which uphold the unequal distribution of resources and decision-making power.

Shelter services in South Africa are categorised as short-term or long-term shelters. Short-term shelters are intended to deal with emergency crisis situations and are equipped to shelter women for two to six weeks. Long-term shelters usually extend their services from three to nine months. While making use of short-term shelter services, women are encouraged to make plans for a safer future without delay. On the other hand, the long-term shelter service allows women sufficient time to deal with the practical and emotional issues related to coping with or leaving the abusive situation, normalises the situation for both women and children, provides counseling, and allows the abused women to establish meaningful and supportive relationships with other residents and shelter staff (Park, Peter & De Sa, 2000).

Method

This study is designed using qualitative and narrative research methods. According to Lieblich, Tuval-Mashiach and Zilber (1998), narrative research refers to a study that analyses narrative materials. The data can be collected in the form of a story or a life story recounted in an interview. Lieblich, Tuval-Mashiach and Zilber (1998) further maintain that the mission of psychology is to explore and understand the inner world of individuals. Lieblich, Tuval-Mashiach and Zilber (1998) further mention that one of the clearest channels for learning about the inner world is through verbal accounts and stories presented by individual narrators about their lives and their experienced reality. According to Zapulla (1997), narrative keeps us alive; it preserves our experiences of human existence and provides a dynamic account of mankind's history. This study employed the interpretivist paradigm, which according to

Burton and Bartlet (2005), attempts to understand the social world as it is from the perspective of individual experience.

About the Participants

The participants were ten abused women from two shelters for abused women in South Africa. Two of the participants were HIV positive. According to them, they were infected by their partners who refused to use condoms even though they knew that they were HIV positive. The participants were referred to the shelters by the social workers and police. All the participants were referred for long-term shelter services. They were provided with counseling by social workers and psychologists. The selection of the participants was purposeful. This author agrees with Babbie and Mouton (2001) that it is sometimes appropriate to select your sample on the basis of your own knowledge of the population, its elements, and the nature of your research aims. This was the case in this study, since the author's work involves providing psychological intervention to abused women.

Data Collection

Individual face-to-face semi-structured interviews about participants' abusive experiences were conducted. I agree with Rossman and Rallis (2003) that the skills employed in interviews can be described as skills used in everyday life, including questioning, looking/observing and listening. The interviews took place at the shelters were the participants were accommodated. I had one hour face to face interviews with each participant. After collecting data I had another one hour session with each participant to verify the data. I therefore spent twenty hours for the interviews with ten participants. The interview questions were divided into five sections. Section A consisted of the participants' biographical questions, section B focused on the participants' abuse experiences, section C focused on the participants' coping strategies, section D on support and intervention that the participants got while section E focused on the lessons learned by the participants. The interview questions are indicated on Appendix. The participants' responses are indicated in the discussion of findings. The aim of the interviews was to obtain an in-depth

understanding of the participants' construction of knowledge and social reality, and to understand their experiences and the meaning they attached to their abusive experiences. A comprehensive literature review on violence against women, HIV & AIDS and culture, as well as women's empowerment was conducted as a basis for the empirical research.

Data Analysis and Interpretation

Data was analysed in terms of themes. Themes and patterns emerged from systematic organisation of the data. I identified similarities and differences amongst data elements, and coded and sorted the data into relevant categories. According to (Patton, 2002), the interpretation of the findings involves attaching significance to what was found, making sense of the findings, offering explanations, drawing conclusions, making inferences and considering meanings. In this study, the interpretation highlighted the participants' understanding of their experience and their world view. I also examined the body of knowledge provided in the literature, to see if any relevant theories correspond to, extend, or deepen my interpretations (Rossman & Rallis, 2003).

Ethical Considerations

Ethical issues were taken into consideration. Permission was granted by the participants and informed consent letters were issued and signed. Privacy and confidentiality were ensured. The purpose of the study was thoroughly explained to the participants. They were informed about the voluntary nature of their participation, as well as their rights to privacy and confidentiality. They were also informed of their right to withdraw from the study at any stage, should they wish to do so.

Findings

The interview questions were divided into the following categories: causes of abuse, types of abuse, reason for staying in abusive relationship, referral to shelter, and lessons learned from their experiences. The

findings are summarised in Table 1.

Table 1: Summary of Abused Women's Experiences
Causes of Abuse, Types of Abuse, Reason for Staying in Abusive Relationship, Referral to Shelter and Lessons Learned from Their Experiences

Themes and Sub-Themes
Causes of Abuse Payment of Lobola or Dowry Attempt to Disclose Abusive Relationship And to Expose the Abuser Refusal to Give Money (Monthly Salary) to the Abuser Refusal to Allow Extra-Marital Affairs Refusal to Have Sex Without Condom
Types of Abuse
Verbal Abuse
Shouted at Insulted
Emotional and Psychological Abuse
Ridiculed Isolated from Family and Support System Death Threats Posed to Participants, Children, Families and Friends Degraded/Belittled/Humiliated Falsely Blamed Controlled Possessiveness and Jealousy
Physical Abuse
Assaulted Attempted Murder (Gun Shots)
Sexual Abuse
Sexually Abused by Husband, Boyfriends, Uncles, Stepfathers and Men Close to Them Forced Sex Without Condom Forced Sex with torn Condom Forced Sex without a Condom Because They Paid Dowry Demand Sex Any Time of the Day to Satisfy the Abusers' Sexual Needs
Financial and Economic Abuse
Demanding Money for Alcohol and Drugs Sold House Contents and Property to Get Money
Reasons for Staying in Abusive Relationship
Quitting is Regarded as Taboo (Cultural) Unemployment (Financial Reason) Stability for Children Death Threats to Participants

Referral to Shelter
Social Workers Police
Lessons Learned by Abused Women
Report Abuse Immediately Talk About Abuse (Break the Silence) Seek Help Quit Immediately Refuse to Be Isolated Have Support System in Place Refuse to Be Manipulated Enjoy Life

The findings indicated in Table 1 are discussed in the section below.

Discussion of Findings

Perceptions of violence and abuse differ vastly between cultures and communities (Pelser *et al*., 2005). Some of the participants in this study considered abuse to refer only to domestic violence and abuse such as beatings that result in wounds, bruises and scars. They did not regard verbal, emotional/psychological and financial/economic abuse as being abuse, because there is no evidence such as wounds, bruises and scars. They regarded this type of abuse as normal reactions from their spouses. Some of the participants mentioned that when they were growing up, their mothers were shouted at, ridiculed by their fathers, and most of the men in their communities had extra-marital affairs. The themes are discussed below.

Causes of Women Abuse

The causes of domestic violence against the participants in this study were: the participants' refusal to have sex without a condom; their refusal to allow their abusers to have extra-marital affairs; their refusal to give their abusers money to buy drugs; their refusal to have sex with their abusers any time they wanted it because they had paid lobola (dowry); their refusal to stay away from work or dodge work for sexual activities. One of the participants sacrificed her lunch hours at least three times a week by going home to have sex with her unemployed husband in order

to satisfy his sexual needs and fantasies. Some of the participants were brutally assaulted because they wanted to report the abuse, whereas others were abused because they refused to be isolated from their families and relatives. Some of the abusers took money from the participants, sold furniture and house contents in order to get money for alcohol and drugs.

Types of Abuse

All the participants experienced verbal, emotional/psychological, physical, sexual and financial abuse. They were shouted at, ridiculed, degraded, falsely blamed and humiliated by their abusers. Death threats were posed to some of the participants, their children, families and friends. They were assaulted and one of them was shot on the head by her fiance because she refused to be isolated from her friends and relatives. She developed severe migraine headaches as a result.

Most of the participants were told by their spouses that they had done them a favour by marrying them; that other men would not have been interested in them because they were ugly, stupid, useless, worthless, or shapeless. Some husbands passed negative comments, such as: "You cannot cook", "you are not good in bed." "you are sexually tasteless, I just use you to release sperms," "other women are better than you," and so on. The participants believed what they were told by their abusers; hence they developed low self-esteem, lack of confidence, and withdrawal behaviours. Some of them regarded themselves as worthless and attempted to commit suicide.

The abusers who were HIV positive and had extra-marital affairs refused to use condoms, even though they knew their status. They insisted that to prove to their community, families and friends that they were men, they were expected to have children; hence they did not want their children to suffocate in plastic bags, referring to condoms. Other reasons given for refusal to use condoms were that they had paid lobola (dowry). Some abusers mentioned that condoms had worms and were poisonous; condoms had a disgusting substance which was intended to infect them with AIDS; when they used condoms they did not enjoy sex because they did not *feel* their partners; they were unable to ejaculate; they developed pain on the tips of their penises; they did not feel that

they were men enough. Others claimed to have suffered from kidney problems, or developed stomach and waist pains. Some accused women who preferred condoms as being *gold diggers* who wanted to sleep around with every man; that they did not trust their husbands but expected their husbands to trust them; and that they were influenced by western culture by not wanting to have many children. One abuser boastfully told his fiance that he deliberately cut the tips off condoms when having sex with her on several occasions; hence she conceived a child.

Some abusers in this study used cultural phrases and idioms to have as many women as they wanted to. For instance, some claimed that they could have many girlfriends or mistresses because, according to their culture: "*Monna ke nawa o a naba*" which is a seSesotho expression meaning that men can "spread anywhere like bean plants." Some men boastfully said: "*Monna ke selepe o a adingwa*," which means: "A man is like an axe; he can be borrowed."

The participant who was abused by her uncle another who was abused by her stepfather mentioned that they were afraid to report the abuse to relatives because their abusers told them that even if they could report the abuse, people would not believe them because the participants also enjoyed sex. The abusers threatened them that if they exposed them they would be the cause of family conflict which could lead to divorce. The participant who was abused by her stepfather reported him to her mother's friend. To her surprise, her mother did not believe her when she was informed by her friend about the abuse. Instead, the mother called her daughter a liar, a prostitute who slept with her husband, a devil, and chased her out of her house. The participant therefore consulted the nearby social worker who referred her to a shelter for abused women.

Reason for Staying in Abusive Relationship

Most of the participants' reasons for staying a long time in their abusive relationships were due to financial constraints. Those who were unemployed depended entirely on the salaries of their partners or spouses, and stayed in the marriage for the sake of their children. If they did not comply with what their partners wanted, they were deprived of money, food, and shelter; their spouses threatened to stop paying children's school fees and buying clothes. The participants also mentioned that

quitting such a relationship would have been regarded by their families as taboo. One participant indicated that she could not leave because when she got married she was told that "*lebitla la mosadi ke bogadi*," which is a seSotho idiom meaning: *A married woman should tolerate the problems that she encounters with her husband and in-laws no matter how hard it is, until death separates them.* Some of the participants stayed in the abusive relationship because they did not want to be seen as cowards and did not want to be a disgrace to their families.

Fear was imposed on some of the participants. Death threats were also mentioned as reasons why some were afraid to quit their marriages. Some perpetrators threatened to kill the participants, their children and families if they revealed abuse or divorced the abusers. The participants stayed in the abusive relationships in order to save the lives of their loved ones.

Referral to Shelters

The participants were referred by the police and/or social workers to shelters for abused women. Shelters for abused women played an important role in empowering these participants. Besides accommodation, shelters provided them with social, psychological and emotional support. Social workers and psychologists were available to offer them therapy and counseling.

Lessons Learned by Abused Women in Shelters

Abused women had an opportunity to share their problems with others and developed coping skills while in shelters. They expressed their problems in different ways such as painting, sewing, singing and writing poems. The participants mentioned that before they came to the shelters, they thought they were worthless; they had developed low self-esteem, and most of them had suicidal thoughts. According to them, shelters gave them a second chance. They started to break the silence and shared their experiences with other participants. After intensive counseling sessions in shelters offered by social workers, the participants who were HIV positive accepted their status and were on anti-retroviral drugs. The participants were empowered and in turn wanted to empower others by becoming counselors for abused women in their communities.

When asked about the lessons they had learned and what advice they would give to other abused women, their responses included the following:

Abused women should:
(a) Identify and know the signs of abuse;
(b) Not ignore the signs of abuse, but take them seriously;
(c) Report abuse immediately before it affects them and their children;
(d) Break the silence and talk about abuse;
(e) Refuse to be manipulated;
(f) Seek help;
(g) Quit the abusive environment immediately;
(h) Expose the abusers;
(i) Refuse to be isolated from their support system;
(j) Accept and love themselves the way they are;
(k) And enjoy life because "we only live once"

The above advice given by the abused women in the shelters, signifies that they have been empowered by the shelters. Without doubt, the shelters not only acted as a place of refuge, but also contributed to preparing them for life beyond the shelter.

Limitations of the Study

The sample in this study is very small; therefore the findings cannot be generalised to all abused women in South Africa. This study focused only on the abused women themselves, and not on their abusers. It is recommended that a similar study be conducted with a broader sample of abused women in all shelters, and on men who abuse women.

Conclusion and Recommendations

According to this study, it is evident that cultural practices and perceptions that women are weak still exist in some communities in South Africa. Women should not allow themselves to be victims of this

school of thought. Even though the shelter system is not viewed as a permanent solution for victims of domestic violence, it gives them a second chance in life, and to be able to regain their proper place in society. I agree with Vetten (2000) that while shelters provide counseling and support to the abused women in South Africa; they will not in the long term provide preventative solution to the problem. However, other strategies such as education and training, in combination with support are needed. It is recommended that more shelters be established in order to empower victims of domestic violence. Public awareness of the problem of violence against women is needed.

It is recommended that men who are abusers be educated about the rights of individuals and rehabilitated. Government should assist in the establishment of more shelters, as well as in education projects intended to educate women about abuse and their human rights.

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Appendix

Interviews: Domestic Violence against Women

Section A: Biographical Information

How old are you?
How long have you been living with your husband/fiance/partner or your boyfriend?
How many children do you have?
Where are your children now?
How long have you been at the shelter?

Section B: Experience of Abuse

1. What type of abuse have you experienced, for instance: verbal, physical, emotional/psychological, financial or sexual? Specify and explain.
2. Who is/was abusing you?
3. When did the abuse start and for how long?
4. When did you expose or report the abuser and how?
5. Who brought you to the shelter/place of safety/the institution where you are at present and how?
6. What is/was the impact of the abuse to your life in general?
7. How did the abuse affect you and people around you (for example; your family, children, friends or colleagues)?
8. In case of sexual abuse, were you allowed to make any decisions with regard to the use of protection (for example: condoms)? Explain.
9. How knowledgeable are you with regard to HIV/AIDS?
10. Have you discuss HIV/AIDS with your abuser? Explain.
11. How do you connect manhood, cultural values/beliefs/norm with your abusive situation? Explain.

Section C: Own Coping Strategies Used
(Before Psychological Intervention)

12. What did you do to cope during the abuse?

Section D: Support and Intervention

13. What kind of support do you get?

Section E: Lesson Learned

14. What have you learnt from your experience?
15. What advice can you give to other women with regard to violence and abuse?