PERCEPTIONS ON GENDER BASED VIOLENCE BY MALE AND FEMALE REFUGEES IN DAGAHALEY REFUGEE CAMP, NORTHEASTERN

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DECEMBER 2013
DECLARATION

This proposal is my original work and has not been presented for any academic examination in any other university

Signature ___________________________ Date_________________________

Miriam Njoki Warui

This research proposal has been submitted for examination with my approval as the University supervisor.

Signature______________________________ Date_________________________

Khamati Shilabukha
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### ACRONYMS

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<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ARC</td>
<td>Activities and Recreation Center</td>
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<tr>
<td>CARE</td>
<td>CARE International in Kenya</td>
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<tr>
<td>CEDAW</td>
<td>Committee on the Elimination of Discrimination against Women</td>
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<td>CREAW</td>
<td>Center for Rights Education and Awareness</td>
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<td>DRA</td>
<td>Department of Refugee Affairs</td>
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<td>FGD</td>
<td>Focus Group Discussion</td>
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<td>FIDA</td>
<td>Federation of Women Lawyers</td>
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<td>GBV</td>
<td>Gender Based Violence</td>
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<td>HI</td>
<td>Handicap International</td>
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<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<tr>
<td>IASC</td>
<td>Inter-Agency Standing Committee</td>
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<td>IDP</td>
<td>Internally Displaced Person</td>
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<td>IEC</td>
<td>Information, Education and Communication</td>
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<td>KII</td>
<td>Key Informant Interview</td>
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<td>KDHS</td>
<td>Kenya Demographic and Health Survey</td>
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<tr>
<td>MDG</td>
<td>Millennium Development Goal</td>
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<tr>
<td>MSF</td>
<td>Médecins Sans Frontières (Doctors without borders)</td>
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<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
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<td>PSTD</td>
<td>Post Traumatic Stress Disorder</td>
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<td>Acronym</td>
<td>Organization</td>
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<tr>
<td>UN</td>
<td>United Nations</td>
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<td>UNAIDS</td>
<td>United Nations Programme on HIV/AIDS</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<td>UNICEF</td>
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ABSTRACT

This study, aims at examining the perceptions of gender based violence by men and women in Dadaab, Dagahaley Camp. The study will be carried out in Dagahaley refugee camp, Dadaab, in June 2014. This study will be guided by Ecological theory which was advocated by Heise. This study will adopt cross sectional- exploratory designs. The study will use probability-sampling design through cluster sampling frame. The tools to be used entail the use of standardized household questionnaires, focus group discussion and key informants interviews. Data from structured household questionnaires will be coded and analyzed by computing frequencies, means and percentages. This data will be presented in descriptive statistics such as tables, frequency distribution, charts and. Data emanating from focus group discussion and key informant interview will be organized, summarized and presented in verbatim quotes and selected comments.
CHAPTER ONE
INTRODUCTION

1.1 Background to the study

Gender Based Violence (GBV), in its various forms, is endemic in communities around the world, cutting across class, race, age, religion and national boundaries. In general women have been found to be more marginalized and vulnerable to both direct and indirect/structural violence in the extensive research that has been conducted on GBV globally and particularly in areas of conflict. Exposure to gender-based violence and sexual coercion significantly increases girls’ and women’s chances of early sexual debut, experiencing forced sex, engaging in transactional sex, and non-use of condoms. Gender is a part of our identity and how people make sense of the world (Hoogensen & Rottem, 2004). It has connections to culture, traditions, biological sex and societal norms. Thus GBV is an attack on a person’s identity, which has devastating consequences for its victims.

The impact of gender-based violence resonates in all areas of health and social programming: survivors of violence experience increased rates of morbidity and mortality, and violence has been shown to exacerbate HIV transmission, among other health conditions (IGWG of USAID, 2006). While girls are the most visible survivors of sexual violence, they are far from being the only ones who suffer from the consequences: children of both sexes constitute the majority of abuse survivors, and adult men and the handicapped are minority groups who are often neglected in research and interventions. SADC (2008) defines gender-based violence as, “all acts perpetrated against women, men, girls and boys on the basis of their sex which cause or could cause them physical, sexual, psychological, emotional or economic harm, including the threat to take such acts, or to undertake the imposition of arbitrary restrictions on or deprivation of fundamental freedoms in private or public life in peace time and during situations of armed or other forms of conflict”.

The notion of gender-based violence conjures up the image of physical violence against women, despite the fact that it was intended as a gender-neutral term to include the all-
pervasive scourge of violence committed against both males and females. Heise, Pitanguy and Germain (1994) acknowledge that in the overwhelming majority of incidents of violence, women are the victims (Namibia Ministry of Health and Social Services, 2004). According to the United Nations (2006), there is no single or universal definition of gender-based violence. Understandings differ according to country/culture, community and legal context. The term “gender-based violence” in its widest sense, refers to the physical, emotional or sexual abuse of a survivor. Despite this inclusive definition, the term “gender-based violence” is widely used as a synonym for violence against women (United Nations, 2006).

Previous research shows that GBV is most prevalent in societies with rigid gender roles or in patriarchal communities in which male dominance is engrained in a masculine identity (Heise, 1998). Culture consists of patterns, explicit and implicit, of and for behavior acquired and transmitted by symbols, constituting the distinctive achievement of human groups, including their embodiments in artifacts; the essential core of culture consists of traditional ideas and especially their attached values; culture systems may, on the one hand, be considered as products of action, on the other hand, as conditioning influences upon further action. In many parts of Africa, there exist patriarchal systems. For example, the Attorney General of the Kenyan government was once quoted on this subject saying:

“Violence against women pervades all social and ethnic groups.... Culture does influence the relationship between the various groups in society and some cultural practices, beliefs and traditions have had the tendency to relegate women to second class status in society thereby not only violating their rights as human beings but also leading to discrimination against women. Some customs and cultural practices have found their way not only into law but are used as justification for violence against women” (Houben, 2003).

Despite ratification of the United Nations’ Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), both international and statutory laws have been insufficient in protecting vulnerable women against the still powerful religious and customary laws that dictate the course of action in many villages throughout the region.
Community law states that female children are prohibited from inheriting property from a land-owning father if he has a son. Traditions surrounding marriage often include a bride price, which perhaps reflects the belief that a bride is a transferable commodity from her father to her husband (Rutazaa, 2005). Women are frequently disadvantaged by religious law as well because both Islam and Christianity, each roughly 40 percent of the population find divorce morally questionable (Bastien, 2005). As a result, women face pressure from religious leaders and respected community members to remain in marriages that may be detrimental. Thus, the legislation passed at the federal level does not necessarily reflect the beliefs of those who feel more allegiance towards either religious or customary law.

Like much of sub-Saharan Africa, the Dadaab Refugee Camp region is host to a patrilineal society in which inheritance is traced through fathers. Men benefit from the preservation of the status quo and typically hold more decision-making capabilities than their female counterparts. Evidence of strong patriarchal institutions can be found in the use of a bride price, the practice of polygamous marriages, emphasis on fertility, significant expectations to marry, and paternal control in choosing suitable partners for marriage (McCloskey, Williams, and Larson n.d.). Additionally, a highly stratified sexual division of labor and an inherently unequal distribution of resources contribute to a society in which women are disadvantaged. Because women are reared to work inside the home and are seen as economically less valuable than men, they often have less access to education which perpetuates their seemingly inferior status. Their plight is further compromised by the frequent denial of property ownership, which, in conjunction with a lack of education, makes acquiring assets and increasing human capital exceedingly difficult.

According to the International Labor Organization, (1998) “in general, the orientation of a culture, or the shared beliefs within a sub-culture, helps define the limits of tolerable behavior. To the extent that society values violence, attaches prestige to violent conduct, or defines violence as normal or legitimate or functional behavior, the values of individuals within that society will develop accordingly. Attitudes of gender inequality are deeply embedded in many cultures and rape, domestic assault and sexual harassment can all be viewed as a violent expression of the cultural norm.”
1.2 Statement of the problem
Violence against women is one of the most dramatic manifestations of the abuse of power that stems from existing economic, social, political and cultural inequalities between men and women. It is present in the private as well as the public spheres of women’s lives. It is understood to include physical, sexual and psychological harm that occurs within the family or domestic unit or within any other interpersonal relationship as well as in the community. Gender-based violence can manifest itself in numerous forms throughout a woman’s life, causing severe physical and psychological consequences, including her sexual and reproductive health. At the Vienna Conference on Human Rights (1993), violence against women was recognized as a violation of human rights and fundamental freedoms, and in the Cairo and Beijing conferences, governments and the international community committed. In Cairo and Beijing, the international community recognized the link between violence against women and political crisis.

Around the world, at least one in every three women has been beaten, coerced into sex, or abused in some other way - most often by someone she knows, including her husband or another male family member; one woman in four has been abused during pregnancy (UNFPA, 2000:23). Culture plays a huge role on a person’s perception of the world and consequently decided the type of morals and ethics a culture promotes in its people, ‘crime’ and punishment. Some cultural practices exacerbate gender based violence incidences. According to the Inter-Agency Standing Committee (IASC) guidelines of 2005, gender based violence is especially problematic in the context of complex emergencies and natural disasters. Community and family systems and protection mechanisms are weakened or lost, making the situation worse. Conflicts and natural disasters affect men and women, boys and girls in different ways. They are also often characterized by an escalation in sexual and physical violence as a consequence of population displacement, insecurity and the disruption or collapse of normal social structures (UNHCR, 2003).

While GBV is prevalent in all societies, crisis situations can exacerbate the extent and incidence of the problem, particularly GBV involving female survivors and male
perpetrators. Research studies show that a sizeable proportion of women, in conflict areas worldwide, have experienced GBV (IGWG of USAID, 2006, Keesbury and Askew, 2010). In the last twenty years, the humanitarian field has increasingly recognised gender based violence (GBV) as a serious global health, human rights, and development issue. Recognising women’s and girls’ vulnerability to violence, it is important to document the GBV so as to facilitate intervention. However, most women will not mention violence unless asked directly. Instead, women suffer in silence for lack of someone they can trust, with whom they could discuss the violence in their lives - someone who could listen sensitively and give a helpful response. According to a study carried out in Somalia by UNAIDS (2006; p45), over 60% of women who had experienced sexual violence did not report the abuse to anyone, and only 12% reported the abuse to a person in a position of authority. The high percent of unreported cases is partly a consequence of the culture of silence surrounding GBV. People carry a part of their cultural beliefs, practices and perceptions even when they move from one environment to another.

In the last twenty years, the humanitarian field has increasingly recognized gender-based violence (GBV) as a serious global health, human rights, and development issue. While GBV is prevalent in all societies, crisis situations can exacerbate the extent and incidence of the problem, particularly GBV involving female survivors and male perpetrators. The documentation of numerous incidences of GBV and high numbers of victims in refugee camps, is a reflection of some of the most intractable development challenges of the society, which is attributed to lack of proper education, escalating poverty and general lapse in security guaranteed to vulnerable groups i.e. women and young girls.

Locally, Ellsberg et al (2001) has discussed the relationship of gender violence to the payment of bride-price in Kenya and the likelihood that this financial transaction is interpreted as tacit payment for husbands’ unconditional sexual access to their wives. The agreement may also imply permission for husbands to discipline wives by beating. Kimuna and Djamba (2008) used KDHS (2003) statistics to describe correlates of physical and sexual wife abuse in Kenya, finding relationships between gender violence and
household income, religion, type of union, and husband’s abuse of alcohol. Ochieng (2007) studied Gender injustice: the determinants of violence against women and access to human rights in Kenya a case study of Mathare and Korogocho slums in Nairobi. The study revealed the women are aware about the fact that their rights are being violated and that majority of the perpetrators are their husbands. Most incidences of violence occur due to patriarchal tendencies in the African societies, which fuel the belief that women must be disciplined. Other factors revealed in the study include substance abuse, alcohols and poverty. The study further showed that government efforts to curb violence against women exist in the slums, albeit, with myriad weaknesses.

The above local studies do not capture the perceptions of gender based violence by men and women. Therefore, this study aims at highlighting the perceptions of gender based violence by men and women in Dadaab, Dagahaley Camp.

To achieve this, the study will attempt to answer the following study questions:

What are the perceptions of male and female refugees on GBV?

What are the perceptions on the initiatives to combat GBV in the camp?

What are the opportunities for men and women refugees in combating the GBV as well as the intervening agencies?

1.3 Study Objectives

1.3.1 General objectives

To explore the perceptions of the men and women on gender based violence and identify the role of refugees in its prevention.

1.3.2 Specific objectives

- To examine the perception of men and women on GBV in Dagahaley camp, Dadaab Refugee Camp.
• To examine the perception of men and women refugees on the initiatives to combat GBV in Dagahaley camp, Dadaab Refugee Camp.

• To identify opportunities for combating GBV in Dagahaley camp, Dadaab Refugee Camp.

1.4 Justification of the study
While previous studies are well suited for assessing GBV and the impact of the GBV prevention interventions in the camps, they do not go very far in explaining why the same GBV have been persisting throughout, even after 20 years of interventions, and the role of the refugees themselves in ending GBV.

The findings from the study, if adopted will be useful source of information for the government, intervening agencies and society at large, since it will assist in enabling the concerned parties or stakeholders to make an informed decision necessary for intervention purposes particularly to do with increasing their efforts and resources in elimination of future GBV.

Effectiveness or success of any fight against GBV requires an understanding of the perception and general beliefs surrounding the affected study area and population, in this case the GBV victims, agencies and the study population in Dagahaley camp. The findings will also motivate further examination of methods for prevention of and response to GBV that engages boys, girls, men, and women.

1.5 Scope and limitations of the study
This study will examine GBV perceptions of men and women in Dagahaley camp.

Due to lack of sufficient resources the study will be limited to in Dagahaley camp. The financial expenditure, time and distance will be substantial because of diverse geographical locations. Majority of the respondents will be refugees who may be suspicious of the researcher’s motive thereby withholding vital information. This will be overcome by assuring the respondents of confidentiality of the information gathered through anonymity of the questionnaires.
The volatile and unpredictable operational environment in the past 2 years has presented challenges to humanitarian work in Dadaab. Humanitarian workers and law enforcement agencies have become targets of Somalia-based Al Shabaab militia group, which has abducted several agency personnel. All movement within the refugee camp is done with armed police escort. This situation may limit the extent to which refugees were reached in Dagahaley camp. The researcher adhered to the security escort convoy to the camp and used refugees to administer most of the questionnaires.

A majority of refugees are not conversant with the English language. The enumerators administering the questionnaires were refugees themselves. There is also a possibility of information getting lost through translation. Training will be conducted for the enumerators so that they are able to translate the common meaning of Gender-Based Violence.
CHAPTER TWO

LITERATURE REVIEW

2.1 Definition

There are many different definitions that attempt to capture the broad concept of gender based violence (GBV). According to WHO (2005), there is no single or universal definition of gender-based violence. Understandings differ according to country, community and legal contexts. Prevailing definitions of sexual violence exclude children and men.

In 1993 the United National General Assembly adopted a declaration which for the first time offers an official UN definition of gender-based abuse. According to Article 1 of the declaration, violence against women includes: “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 private life.”

According to Baker (2003), the lack of a clear and commonly accepted language inhibits the development of an effective reporting system and/or databases, and thus restrains prevention, monitoring and advocacy efforts (Baker, 2007).

It is generally agreed that GBV consists of violence, sexual or otherwise, which plays on gender norms and gender exclusions to break people down both physically and emotionally (El Jack, 2003). The term sexual and gender based violence, in its widest sense, refers to the physical, emotional or sexual abuse meted on a person based on their gender. It connotes the “use of physical violence or psychological pressure to compel a person to participate in a sexual act against their will, whether or not the sexual act is consummated” (WHO, 2011).

Sexual violence is “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” (WHO, 2011). The scope of this definition as expanded here includes forced sex, sexual coercion and rape of adult and adolescent men and women, and child sexual abuse.

Sexually molested children face increased risks of subsequent rape and domestic violence in adult life and will experience even higher rates of adverse health outcomes (Fleming et al. 1999). Gender Based violence comes in various forms, occurs in all communities, and remains an issue of great concern. It is a problem not just for victims and survivors of the crime, but for society as a whole. A high proportion of survivors (30-94%) of sexual violence experience symptoms of Post Traumatic Stress Disorders (PTSD) .This develop in the first days after the rape (Rothbaum et al., 1992). There is substantial natural recovery in the initial months and years, but at least a third of individuals who develop PTSD remain symptomatic for three years or longer and are at very high risk of other related problems such as substance abuse.

Further, women with incestuous histories commonly experience an extreme sense of alienation and isolation. For instance, a raped girl among the Somali endures this stigma sometimes even for the rest of her life. Her prospects for marriage are also diminished (Population Council, 2009). The traditional conflict resolution mechanism known as maslaha among the Somali sometimes compels the perpetrator to marry his victim as a form of ‘punishment’. In most cases, the family is ashamed of the situation the girl went through and they fear she will not get married and thus bring dishonour to the family and therefore go along with the decision of the elders. To the victim, this is a double tragedy, for she endures life punishment for a mistake she did not commit.

Gender-based violence occurs in all countries and transcends social, economic, religious, and cultural groups. Population based surveys in 36 developing countries conservatively estimate that 10-50% of reproductive age (15-45) women have been physically assaulted
by an intimate partner. Such violence includes physical acts such as hitting and beating, sexual coercion, physical threats, psychological abuse, and the use of power to limit actions. Despite the continually increasing incidence of gender-based violence (GBV) around the world, GBV and the effects it has on impoverished communities remains an area where further research and resources are needed.

Gender-based violence is often used interchangeably with the term ‘violence against women’ and must be understood in the context of structural inequalities between men and women. Men and boys can also experience gender-based violence. In these cases, the violence occurs in the context of ‘gendered’ abuse. Examples include: men being ‘feminised’ through rape, forced to commit rape and/or incest or made to watch the abuse of their partners and children. Those most affected by gender-based violence are disproportionately women and girls, who experience it across all sectors of the community – in conflict, peacetime, during emergencies, humanitarian situations, in their homes and in the streets (Australian Red Cross 2013).

Violence against women is one of the negative social mechanisms through which women are forced into a subordinate position compared with men. Women and children belonging to the civilian population who find themselves in circumstances of humanitarian situations and conflicts are often deprived of shelter, food, medical aid or other inalienable rights against the dictates of the provisions of the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights and other human rights instruments. Yet whether they live as internally displaced persons in IDP camps within the country’s borders or as international refugees; whether these violations are occurring in public or in private life, they result in the aggravated suffering of women and children in gross and arbitrary desecration of their rights. The physical, sexual and psychological violence perpetrated against women and children in this state constitute serious abdication on the part of the state from its traditional role to protect and promote those rights and freedoms.
Of the approximately fifty million refugees and internally displaced persons in the world today, nearly eighty percent are women and children (Julie 2003). Many of these women are in this position because they have fled conflict situations that included sexual and gender-based violence, which has been a component of armed violence since ancient times. Tragically, for many of these women, the violence does not end when they arrive at a refugee camp. In recent years, it has become increasingly apparent that many refugee camps or communities are rife with acts of sexual or gender-based violence, perpetrated by other refugees, bandits, and sometimes aid workers. The United Nations (2006) notes: “In refugee camps, (women and children) are raped and abused by military and immigration personnel, bandit groups, male refugees and rival ethnic groups. In conflict situations, women and girls face a greatly increased risk of physical and sexual violence. Many women and girls are subjected to rape including gang rape, forced marriages with enemy soldiers, sexual slavery, and other forms of violence (being forced to witness others being raped, mutilations, etc.). Many have fled their homes, lost their families and livelihoods, and may have little or no access to health care (CREAW 2008).

2.2 The root causes of and risk factors for sexual violence

Understanding the factors associated with a higher risk of sexual violence against women are complex, given the various forms that sexual violence can take and the numerous contexts within which it occurs. The ecological model, which proposes that violence is a result of factors operating at four levels: individual, relationship, community and societal, is helpful in understanding the interaction between factors and across levels.

The following lists of factors, which are common across studies and settings, are adapted primarily from the 2010 publication Preventing intimate partner and sexual violence against women: taking action and generating evidence and the 2002 publication World report on violence and health.

2.2.1 Individual and relationship factors

Research into factors that increase men’s risk of committing sexual violence is relatively recent and skewed towards those men who have been apprehended, particularly for rape.
Among the factors that have been reported in multiple studies of this type are: gang membership; harmful or illicit use of alcohol or drugs; antisocial personality; exposure to intra-parental violence as a child; history of physical or sexual abuse as a child (22); limited education; acceptance of violence (e.g. belief that it is acceptable to beat one’s wife or girlfriend); multiple partners/infidelity; and gender-inequitable views.

More recently, researchers in South Africa have completed a large cross-sectional survey of men in the population and found that having raped was associated with: higher levels of adversity in childhood; having been raped by a man; higher levels of maternal education; less equitable views on gender relations; having had more partners; and other gender-inequitable practices such as transactional sex (7).

2.2.2 Community and societal factors

From a public health perspective, community and societal factors may be the most important for identifying ways to prevent sexual violence before it happens, since society and culture may support and perpetuate beliefs that condone violence. Factors linked to higher rates of men’s perpetration of sexual violence include: traditional gender and social norms related to male superiority (e.g. that sexual intercourse is a man’s right in marriage, that women and girls are responsible for keeping men’s sexual urges at bay or that rape is a sign of masculinity); and weak community and legal sanctions against violence.

Gender-based violence does not occur in a vacuum and is a symptom “of failed institutions, of norms that perpetuate or tolerate abuse, of dangerously skewed gender relations and entrenched inequalities.” (UNFPA 2012). Gender-based violence has historically been met with silence, taboos about disclosure, a culture of victim-blaming and attitudes that normalize it (UNFPA 2010).

UNICEF (2004) highlights that in the context of Somalia, there is cultural discrimination towards uncircumcised women, and if a change in attitude does not take place women (in Somalia) may feel that the pain endured by their daughters during and after circumcision is a lesser evil than the emotional and economic hardship they will endure by remaining
unmarried. In a case study entitled 'a bridegroom from Canada', a bridegroom, returned from the Diaspora to find a wife, became upset when he learned from his prospective father-in-law that his bride was uncircumcised. He refused to marry her and returned to Canada.

An article in The Guardian (2013) highlighted a testimony of a 86 years old woman who still remembers the pain of being circumcised at eight. Horrific as it was, she allowed her own daughters to go through the same ordeal. But when it came to her granddaughters, she decided to step in and stop it “As a little girl I would go looking for the cutters and ask them when it was my turn, I thought it was exciting. I wish I had known then what I know now.”

It is almost eight decades since she underwent female genital mutilation (FGM), sometimes known as female circumcision, in Somalia. Today, sitting in her daughter's lounge in north London, she says it has left her with a lifetime of pain and medical problems. Yet despite her own agony she felt powerless to resist the societal pressure driving the tradition, and insisted her own daughters have it done too.

According to the article in The Guardian 2013, a tangled mix of family pressure, cultural traditions and religious motivations make FGM – illegal for almost 30 years in the UK – hard to eradicate. It has been documented in 28 countries in Africa and in a few countries in Asia and the Middle East. Today 30,000 girls in the UK are said to be at risk of this form of mutilation, while 66,000 live with the consequences of it. Yet no one has ever been prosecuted for carrying out or abetting the practice (which carries a maximum prison sentence of 14 years).

This is attributed to the situation where children are unwilling to speak out against their families and communities. An old woman in explained to The Guardian that that growing up in the suburbs of Galkayo, a city in south Somalia, being "cut" was not just something she looked forward to, but insisted upon.
"Everyone had it done. If you didn't, you were shunned. I saw it as something exciting.... But it was part of our way of life. My grandmother and mother had had it done, so it seemed natural." She believes it is up to men to take a stand.

"This has to be a man's campaign. Until men say stop, that this is not part of our religion and not part of our culture, it will still go on."

As violence against women has continually beleaguered societies in Nigeria and Africa in general, the governments have come up with specious and spurious policies that camouflage protection for women, yet fall short of achieving this objective. A majority of women in Nigeria and Africa in general suffers one form of violence or another. Women have unfortunately and helplessly come to accept these mistreatments as the norm rather than the exception. Most of these women are raised in the belief that their identity is subsumed or attached to the man’s and that they can’t have dignity of their own. This fallacious belief is rooted in most African cultures and the African women born and raised in these disquieting cultures know nothing other than the system and way of life they are used to. It is commonly argued in sociology that no culture is vice and none would promote evil or antisocial behaviors. Yet, the distinction between good and evil is in most cases is subject to the understanding and reality of the party making such distinction and dependant on several variables. Certain cultures that people have come to accept in Nigeria are strange, yet acceptable at community level. For instance in the Tiv culture of Benue State, men offer their wives to august visitors sleeping over in the man’s house in demonstration of the host’s regard for such friend or visitor. The wife that is offered usually does not have any prerogative on the issue other than to make sure she satisfies the visitor in bed that night. Rather than spite such culture, married women look forward to the visit of strong, macho, and herculean men especially, wives married to men with diminishing strength (Arisi and Oromareghake 2011).

Many cultures give men the right to control their wives’ behavior and those women who challenge that right may be punished. In several countries studies found that violence is frequently viewed as the husband’s right to “correct” an erring wife (Heise. et al 1999).
Humanitarian situations, encompassing natural disasters and armed conflict, are mostly characterized by a lack of stability, even in places of refuge (WHO 2007). The impact of humanitarian situations on communities is affected by a host of factors. During emergencies people can be suddenly displaced (sometimes as refugees) and forced to live in overcrowded settlements. There can be a breakdown of law and order, and structures that normally hold communities together (such as social networks and access to resources) are profoundly disrupted. There is a heightened sense of instability, insecurity and fear, a loss of autonomy, and dependency on others for aid. The stressful time of a humanitarian situation can exacerbate existing gender inequalities, resulting in increases in gender-based violence in the home and community. The crisis does not cause the violence per se, but can change the severity and types of violence experienced. In these times, the people more vulnerable to violence, generally women and children are even more at risk for abuse, assault and exploitation. Sexual violence in particular is used as a weapon of war during conflict by soldiers and armed groups. The systematic sexual violence inflicted during the breakdown of the former Yugoslavia and in the Rwandan genocide in the 1990s offers some of the most graphic examples of this. Systematic and opportunistic sexual violence continues to be a feature of ongoing emergencies around the world (UNFPA 2012).

The urgency of addressing this global problem is tragically illustrated by the treatment of women in conflict or crisis situations, where various forms of harassment, intimidation, rape and forced pregnancies are being used as instruments of war, especially by the opposing forces or the supposed peacekeepers (Heise, et al, 1994).

The Dadaab refugee camps in Kenya were created in 1991 to respond to the influx from Somalia after the fall of Siyyad Barre regime in 1991. The camp hosts refugees from Burundi, Congo, Ethiopia, Eritrea, Rwanda, Somalia, South Sudan, Sudan and Uganda with the Somali refugees forming 95.9% of the total population. The host community is Kenyan Somalis, who share religion, language and culture with the Somali refugees.
Female Genital Mutilation (FGM) is defined as procedures involving partial or total removal of female genitalia or other injury to female genital organs. In Somalia, FGM prevalence is about 95 percent and is primarily performed on girls aged 4-11. In Somali society, the practice of female genital mutilation (FGM) is an honoured tradition. Those who oppose it do so against the tide of public opinion.

Despite the many internationally recognized laws against FGM, lack of validation in Islam and global advocacy to eradicate the practice, it remains embedded in Somali culture. However, some agencies, groups and individuals are slowly making an impact and, with support, can slowly alter the perception and eventually the practice of FGM in the country. Both men and women play a role in perpetrating GBV and both have the power to combat GBV. In study carried out by Heise., et al (1999) to assess community perceptions and attitudes towards husband violence against women in Ethiopia, they concluded that, if successful strategies aimed at violence against women are to be designed and mounted, perceptions and indigenous views need to be understood initially in adequate detail.

2.3 Theoretical Framework
This study was guided by Ecological theory which was advocated by Heise (1998). The ecological theory will be used to understand the interplay of personal, situational and socio-cultural factors that combine to cause abuse and to understand the consequences of GBV. The Ecological theory provides a holistic analysis of the various factors at play that contribute to a person’s decision to use violence (Heise, 1998).

2.3.1 Ecological theory and GBV
The Ecological theory demonstrates that violent behavior grows out of a complex interplay of individual, relational, communal and societal dynamics. It asserts that violence does not occur as a result of one factor in one of the four spheres of influence, but is rather more complex with multiple factors within different spheres influencing a person’s attitudes, behavior and choices. The theory shows how the environment influences human behaviors and vice versa, and so focuses on the interaction between the
two at different levels (Green, 1994). These interrelated systems have an influence on an individual’s life from early childhood to adulthood (Bronfenbrenner, 1979).

The environment consists of the political, social, cultural, economic and psychological aspects. The political environment consists of leaders and political activities; the social environment is family and schools, churches and clubs. The cultural environment is the values, morals and traditions of a society; it is the framework whereby people live. The economic environment is shaped by commerce and industry and the rate of employment; it is also shaped by informal employment. The psychological environment consists of the attitudes that people display towards life around them (Swanepoel & de Beer, 2006).

Four levels of ecological components are used to understand the influence of hierarchical environment systems on individuals. These are the microsystem, which refers to an individual’s immediate environment; the mesosystem, which refers to the interactional process between the microsystems; the exosystem, which affects an individual indirectly, and the macro-system, which are the political, cultural, social and economic forces affecting individual functioning (ecological theory.tripod.com). This theory combines biological, socio-cultural and personal factors affecting an individual, which could include childhood experiences of violence at home as well as in the community. There is also a focus on close relationships among family, friends and peers. It explores how these relationships increase the risk of being a victim or perpetrator of violence (WHO, 2002).

The community context explores the contexts in which social relationships occur as well as examining risk factors existing within schools, workplaces and neighborhoods (WHO, 2002). This could be the absence of social networks, resulting in the isolation of women and families, delinquent peer groups as well as poverty and high levels of unemployment (Ellsberg & Heise, 2005). Ecological theory also focuses on the societal factors creating or inhibiting a climate of violence. This includes the social and cultural norms – for example, those which entrench male dominance over women and children, gender roles as well as the acceptability of violence (Krug et al., 2002; WHO, 2002). Finally, the theory
advocates that societal factors include health; economic, educational as well as social policies may help to maintain economic or social inequality between societal groups.

The work of preventing violence by refugees is daunting yet the Ecological Model can provide a useful framework for understanding the task of preventing violence. Long-term success in the prevention of violence will increasingly depend on comprehensive approaches at all levels (of the Ecological Model). This is especially true for primary prevention approaches where the efforts focus on preventing the violence before it occurs. Primary prevention for violence involves creating a legal and policy environment that supports human rights, a culture in the community which promotes non-violence, relationships based on equity, and individuals who take a personal and public stand against abuse. Creating a culture supportive of human right to live free of violence requires long-term, sustained efforts in a community that address the root causes of violence against women. It means moving beyond programs that work with one sector (e.g., health, police, education, judiciary, etc) or one group (e.g., policy makers, battered women, youth, etc) because societal change requires building a critical mass of individuals and institutions who believe in and live these beliefs.
CHAPTER THREE

METHODOLOGY

3.1 Introduction
This chapter describes the research site, population sample, sampling techniques and methods of data collection and analysis. The study mainly will utilize the participatory and scientific approaches in the primary data collection exercise and desk review approach for the secondary data. The participatory data collection is considered important partly because of the objectives that are exploratory in nature. The study also elicit for in-depth understanding of some variables and thus necessitating this approach. The scientific approach is considered out of the need for quantification of given variables, as well as the need for getting representative information.

3.2 Research site
The study will be carried out in Dagahaley refugee camp, Dadaab, in June 2014. It involved both men and women refugees and other stakeholders. Dagahaley is one of the five camps in Dadaab. The others include Ifo, Ifo 2, Hagadera and Kambioos covering a total area of 50 square km. Dadaab refugee camps in Kenya were created in 1991 to respond to the influx from Somalia after the fall of Siyyad Barre regime in 1991. Dadaab is a semi-arid town in Garissa County in the North-Eastern region of Kenya. It is located approximately 80 kilometres from the Kenya-Somalia border. The Latitude of Dadaab Refugee Camp is 0.104573900000000000. The Longitude of Dadaab Refugee Camp is 40.307411000000000000. The nearest major town is Garissa, which is 100 kilometres away and is the headquarters of the Garissa County.

Dadaab refugee camp hosts 425,195 (209,022 Female) refugees (UNHCR May 26, 2013) making it one of the largest refugee camps in the world. In 2011 alone, 170,000 Somali refugees arrived in Dadaab occasioned by a severe drought in the horn of Africa.
Figure 3.1 Location of Dagahaley Refugee Camp
3.3 Research Design

This study will adopt cross sectional- exploratory designs. A cross sectional study we shall get a snapshot of perception of refugees and no further contact will be made with them to validate the findings.

3.4 The study population

Population to be studied will include all the refugees in Dagahaley Refugee Camp.
3.5 Sample and sampling procedures

The study will use probability-sampling design through cluster sampling frame. The idea of having clusters is to ensure optimal representation across the areas of study and therefore eliminate any possible biases that may result from a more generalized sampling design. Identification of the respondents’ households will done using systematic sampling method using the right hand rule. In this method, the interviewer will start from given points in the chosen clusters, go to the right side of the entry point and select every 5th household until the intended sample quotas are reached.

The total sample size targeted is 27,020 households in eight (8) sections in Dagahaley camp, Dadaab Refugee camp. The total population of refugees in Dagahaley camp is 102,952, as at 26 May 2013 (UNHCR)

3.6 Methods of data collection

3.6.1 Survey method

The tools used will entail the use of standardized household questionnaires. The interviewer will issue out the structured questionnaires to be filled by the respondents. Those who are not able to read and write will have their responses recorded and filled by the interviewer. The questions in the standard questionnaires will be both open and closed ended to allow for both quantification and qualification of the data collected (Ritchie,1994) A minimum of 60 structured interviews will be conducted.

3.6.2 Focus group discussion

The discussion will be held with groups that will be systematically selected and according to defined criteria for instance age, gender, e.t.c to discuss the topic of study. This discussion group will be limited to between 7 to about 10 people. This is crucial because it will allow full participation of the interviewees in the discussion as well as providing diversity of perception and opinions.

An interview guide for focus group discussion with a minimum of set questions will be used. The FGD conducted will assist in the allowing for verification of information
obtained from the structured household questionnaires even though they don’t yield any quantitative data. Four focus group discussions will be held in Dagahaley camp, Dadaab refugee camp and the participants will be drawn from the respondents who had been earlier exposed to the structured household interviews, female leadership and male leadership.

3.6.3 Key informant interviews

In depth interview will be conducted with key informants who include Dagahaley camp chairpersons and NGOs staff in Dadaab from different seniority level. This will be used to augment data obtained through secondary sources e.g. books journals and media information. The key informants will be purposively selected as indicated earlier on. These persons will be the ones holding key positions in this community and organization

The respondents will be expected to give insights, draw their knowledge, experiences and professionals observations. A Guide for key informant interview will be used here.

3.6.4 Secondary data sources

The study will also employ secondary data sources. Documentary materials such as journals, books, articles and the internet will be explored. Relevant literature on the perceptions of GBV in humanitarian setup will be reviewed to provide background information for the study.

3.7 Data analysis techniques

Since data to be collected entails both qualitative and quantitative, two different methods of data analysis will be employed. Data from structured household questionnaires will be coded and analyzed using appropriate quantitative techniques. This data will be presented in descriptive statistics such as tables, frequencies, charts and percentages.

Data emanating from focus group discussion and key informant interview will be organized, summarized and presented in verbatim quotes and selected comments. In addition, the content analysis technique will be used here to obtain the implication and the rationale behind a given response.
3.8 Ethical considerations
The researcher will recruit refugees to fill in questionnaires and go extra mile to protect the identity of the respondents. Informed consent to participate will be sought from the respondents after exhaustively being explained of the purpose of study. Also the respondents will be honestly informed that they are at will to withdraw from the study should they feel that they are uncomfortable or feel that their privacy is being intruded into.

Treatment during and after: confidentiality no names in report Respondents participation will be voluntary and the responses handled confidentially. Respondents’ names will not be mentioned in the final report. Proper permission and go ahead will also be sought from the government specifically from the National Commission of Science and Technology, which is in charge of research activities in the country to avoid any problem with the law enforcers. The findings will be published on book journals and articles and recommendations sent to bodies that deal with refugees (UNHCR and operating agencies in Dagahaley camp).
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Hopkins School of Public Health, Population Information Program; December 1999 (Population Reports Series L, Number 11).


The National Commission on Gender and Development Act 2003

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APPENDIX I: CONSENT STATEMENT

Dear Respondents,

My name is Miriam Warui. I am a postgraduate student at the University of Nairobi. This questionnaire is for an academic research study on perception of refugees on gender based violence. The questionnaire will only be used exclusively for academic purposes.

All information collected here will be treated as private and confidential. Your name will not be written on the questionnaire and will not be kept in any other records. Your signature on the bottom of this sheet will not be used for any other purpose apart from proving that you have read and understood this information. You do not have to answer any question that you are not comfortable with, and you may stop the interview at any time.

Participation is voluntary, and you do not have to complete this interview if you do not wish. I would like to ask you some questions and your honest responses will help us understand the community perception and participation in activities that address these issues. Your responses will also be used to find ways of combating Gender Based Violence.

Your participation is voluntary and your responses will be confidential and your name will not be mentioned in the final report. Do you have any questions before we proceed? Can we now begin?

Kindly take some time and fill the questions below by putting a tick/asterix in the space provided or providing short answers where applicable.

NB: You need not disclose your name.

Your kind co-operation will be highly appreciated.

Thank you
APPENDIX II: QUESTIONNAIRE
This questionnaire is meant to gather information

CONFIDENTIALITY CLAUSE:
The responses you provide will be used for academic purposes and will be strictly confidential.

PART A: GENERAL INFORMATION

1. Sex
   Male □  Female □

2. Age bracket
   a) 18–25 □
   b) 26–35 □
   c) 36–45 □
   d) 46–55 □
   e) 56 and Above □

3. Marital status
   a) Single □
   b) Married □
   c) Separated □
   d) Divorced □
   e) Widowed □

4. Kindly indicate the number of years you have been married
   Less than 10 years □  11 to 20 years □
   □ 31
5. Level of education
   a) Primary
   b) Secondary
   c) College (Diploma/Higher Diploma)
   d) University (undergraduate Degree / Postgraduate Degree)

6. How long have you lived in this camp?
   a) 0 – 5 years
   b) 6 – 10 years
   c) 11 – 15 years
   d) 16 – 20 years

PART B: GENDER BASED VIOLENCE

7. Have you ever heard about gender based violence?
   Yes ☐ No ☐

8. Are there cases of gender based violence in this camp?
   Yes ☐ No ☐

9. Have you personally experienced the gender based violence?
   Yes ☐ No ☐

11. Kindly indicate the various types of violence that you were involved in.
   a) Commercial Sexual Exploitation ☐
   b) Rape ☐
c) Female Genital Mutilation

d) Battering

e) Forced prostitution

f) Early & Forced Marriage

g) Sodomy

12. Kindly indicate your level of agreement with the following statements on issues that relate to gender violence. Use a scale of 1-5 where 1=strongly disagree, 2=Disagree, 3=Neutral, 4=agree and 5 strongly agree.

**Perception on gender violence**

<table>
<thead>
<tr>
<th>Statements</th>
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<th>2</th>
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<tbody>
<tr>
<td>Gender violence happens because men want to establish control over women in the family</td>
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<tr>
<td>Primary inequality gives rise to gender based violence is the power inequality between women and men</td>
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<td>Male violence against women varies in degree and intensity according to the specific circumstances</td>
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<td>Women commit violence as a way to ensure their own survival and security</td>
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<td>Gender based violence is not exclusively a woman’s concern</td>
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**PART C: COMBATING GENDER BASED VIOLENCE**

13. Have you noticed any increased attention to issues related to gender based violence recently?

   Yes       No

14. Has anyone in your community undertaken activities to combat gender based violence?

   Yes       No
15. What are the activities

………………………………………………………………………………………………
………………………………………………………………………………………………
………………………………………………………………………………………………
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………………………………………………………………………………………………

16. Have you participated in any activities related to combating gender based violence in
the past three months?
Yes                No

17. What kinds of activities are being undertaken in the camp to combat gender based
violence? (Please check all that apply)

Workshop (group)  
Outreach (individual)
Clinical services
IEC Materials
Others,
specify…………………………………………………………………………………………
………………………………………………………………………………………………

18. Have the things you’ve heard about changed your attitude toward gender based
violence?
Yes                No

19. Kindly indicate your level of agreement with the following statements on initiatives to
address perception of gender based violence. Use a scale of 1-5 where 1=strongly
disagree, 2=Disagree, 3=Neutral, 4=agree and 5 strongly agree.
### Initiative to address perception of gender based violence

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<tr>
<td>Increasing women and girls’ access to income and productive resources helps in combating GBV</td>
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<td>Engaging men and boys to address norms and behaviors in order to prevent GBV</td>
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<td>Increasing gender equity programs and services to address the issue of GBV</td>
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<tr>
<td>Increasing women and girls’ legal protection</td>
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<td>Reducing violence and coercion in the society on GBV</td>
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20. Kindly indicate your level of agreement with the following statements on opportunity to address gender violence. Use a scale of 1-5 where 1=strongly disagree, 2=Disagree, 3=Neutral, 4=agree and 5 strongly agree.

**Opportunity to Address Gender Violence**

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<tr>
<td>Sensitization of the refugees of negative effects of gender violence</td>
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<tr>
<td>Enforcement for changes in cultural paradigms that allow gender-based violence to continue</td>
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<tr>
<td>Support the rights of girls and women whose rights are denied through harmful, but culturally tolerated practices Eg. FGM</td>
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<tr>
<td>Resourcing of women’s movement organizations who have the history, experience and analysis to tackle GBV</td>
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21. Kindly indicate the extent to which the following factors increase men’s risk of committing sexual violence. Use a scale of 1-5 where 1=very small extent, 2=small extent, 3=moderate extent, 4=large extent and 5 very large extent.

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Gang membership
Harmful or illicit use of alcohol or drugs
Antisocial personality
Exposure to intra-parental violence as a child
History of physical or sexual abuse as a child
Limited education
Acceptance of violence e.g. belief that it is acceptable to beat one’s wife or girlfriend
Multiple partners/infidelity
Gender-inequitable views

22. What do you think should be done on those who engage in GBV? Kindly tick appropriately.

   a) Educated
      [ ]

   b) Resolved by community leaders
      [ ]

   c) Arrested and charged
      [ ]

   d) Guidance and Counseling
      [ ]

Others
(specify)……………………………………………………………………………………
……………………………………………………………………………………
……………

36
APPENDIX III: FOCUSED GROUP DISCUSSION GUIDE

1. What do you think are the different forms of violence against women?

2. Are there any circumstances that make violence against women acceptable?

3. Are GBV services available in your community?

4. Where (who) can you go for GBV information and services? Do women who have experienced violence go for assistance? Why or why not?

5. What does the community think about GBV?

6. Have the community’s ideas about this changed since they came to the camp?

7. Who are the people in the community that can help to educate and prevent GBV?

8. What are some of the things that can be done to help stop violence against women?

9. Are you aware what Sexual and Gender Based Violence (GBV) is? Could you please describe the most common forms of GBV that occur in the camps?

10. For the different forms of GBV that you have highlighted above, could you please highlight the different interventions that are there in the community to address GBV?

11. In your opinion, where do the victims of GBV prefer to report and why?

12. Are you aware of campaigns that organisations use to create awareness on GBV? Which messages have been passed on to the community?

13. In your opinion, how have these messages been useful? In what way?

14. In your view, can FGM be stopped in the community? (Why and how).

15. In what ways can the community be greater involved in prevention and response of GBV?

16. Please give suggestions of how NGO’s GBV programs could be improved?
APPENDIXIV: KEY INFORMANT INTERVIEW

1. Is there an inter-agency working group on GBV?

2. Who coordinates it? And how many members are there?

3. What challenges are there in implementing GBV programs in Dadaab?

4. What gaps and opportunities exist in GBV programming?

5. In what ways does your organization partner with other NGO’s in GBV programming in Dadaab? Is this partnership effective?

6. How many cases of GBV are reported to you annually?

7. Which gender is mostly affected by the gender based violence?

8. What are the common causes of the GBV reported?

9. What kind of help do you offer to the victims of GBV?

10. Do you face any resistance in your endeavour to eradicate GBV in this community?

11. Does the government offer any help in your course to create awareness and eradicate GBV?

12. What kind of activities do you undertake in the camp to combat gender based violence?