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SOCIO-ECONOMIC FACTORS AND PREVALENCE OF GENDER-BASED VIOLENCE IN THE KURIA COMMUNITY, KURIA EAST SUB-COUNTY, MIGORI COUNTY, KENYA

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A Thesis Presented to the Department of Social Sciences and Development Studies Faculty of Arts and Social Sciences in Partial Fulfillment of the Requirement for the award of Master of Arts in Social Work Degree at The Catholic University of Eastern Africa, Kenya.

NAIROBI, KENYA

SEPT, 2023

DECLARATION

DECLARATION

This research study is my original work. It has not been presented in any other University or institution of higher learning for any academic credit. All work sourced from other scholars and sources has been duly cited and acknowledged in this document.

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DEDICATION

I dedicate this research study to my family, especially my lovely sister and brother, for their love, support, wisdom, and motivation during the period of study inclusive of my research work.

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I acknowledge God Almighty, for granting me sustenance, provision, vigor, zeal, courage, wisdom, favor, grace, and strength, prior to and during the entire period of the research work. Firstly, I salute my supervisors Dr. Mary Mutisya and Dr. Lilechi Melvine, for all their invaluable insights, direction, and tireless support during this research study project. Finally, to the entire Catholic University of Eastern Africa fraternity, I am eternally grateful for granting me this opportunity, under considerable guidance, to undertake and successfully conduct my studies.

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ACRONYMS/ ABBREVIATIONS

ASAL - Arid and Semi-Arid Areas

FGM- Female Genital Mutilation

GBV - Gender Based Violence

IPV – Intimate Partner Violence

SGBV – Sexual Gender Based Violence

USA- United States of America

FGM – Female Genital Mutilation

FGM/C – Female Genital Mutilation/ Cutting

EVP – Emotional and Psychological Violence

UNHRC – United Nations Human Rights Commission

WHO – World Health Organization

NGOs – Non-Governmental Organizations

UN – United Nations

US – United States

UK – United Kingdom

KDHS – Kenya Demographic Health Survey

UDHS – Uganda Demographic Health Survey

MSMV – Multi Country Study on Men and Violence

SSA – Sub Saharan Africa

SDGs – Sustainable Development Goals

NGEC – National Gender and Equality Commission

IEBC – Independent Electoral and Boundaries Commission

SRS – Simple Random Sampling

SPSS – Statistical Package for Social Sciences

CUEA – Catholic University for Eastern Africa

NACOSTI – National Commission for Science, Technology and Innovation

KII – Key Informant Interviews

DNA – Deoxyribonucleic Acid

CBT – Cognitive Behavioral Therapy

PTSD – Post-Traumatic Stress Disorder

STIs – Sexually Transmitted Infections

CBOs – Community Based Organizations

CSR – Corporate Social Responsibility

ABSTRACT

Gender-based violence is a multifaceted and challenging issue prevalent in various communities across the globe. This complexity arises from the intricate interplay of social, cultural, economic, and psychological factors that contribute to its occurrence (Djamba, et al., 2019). This study sought to further explore the specific objectives which were to: examine, explore and analyze the effects of Religion, Economic Dependency, Cultural Practices, and Literacy Levels on the prevalence of GBV among the Kuria community. Symbolic Interactionism and Conflict Theories guided the study. Mixed Method approach was employed together with a Sequential Exploratory Design. The target population comprised community leaders, health care service providers, rescue centers, pre-selected women and girls and administration officers with a sample size of 400 respondents, identified by stratified random sampling technique using the Yamane formula. SPSS v.27 used to analyze quantitative data and thematic analysis for qualitative data. Data was presented using tables, graphs, charts and verbatim. The research findings revealed that socio-economic factors indeed predispose victims to GBV by undermining their autonomy, shrouded in illiteracy, backward cultures, and disdain for divorce. The study further established that: Religion recorded a strong positive correlation, $R = 0.575$ ($P = 0.000$, $p < 0.05$), same as Economic Dependency; $R = 0.541$ ($P = 0.000$, $P < 0.05$) implying a high correlation as well. Cultural Practices, $R=0.436$ ($P=0.000$, $P < 0.05$) indicated a moderate correlation between cultural practices and GBV and finally, Literacy Levels yielded; $R = 0.618$ ($P = 0.000$, $P< 0.05$), indicating a strong positive correlation with GBV prevalence. In conclusion, GBV proves to still be masked in a culture of silence, surrounded by stigma but its consequences are rather loud. The study proves that crisis intervention is still ineffective thus requires reinforcement; recommending interventions like multi-agency collaboration, legal reparation, support structures and strengthened health systems.

CHAPTER ONE: INTRODUCTION

1.0 Introduction

This chapter includes the study background, statement of the problem, research objectives and assumptions, justification and significance of the study, scope, delimitation, and limitation of the study, conceptual framework, as well as the operational definition of terms.

1.1: Background of the Study

Gender-based violence is a thorny issue facing many communities on the global front. The World Bank World Health Organization, (2020) points out that around 35% of women globally have experienced either physical or sexual GBV of some sort. In the United States of America, an estimated 1 in every 4 women are said to experience domestic violence during their lifetime. Gender-Based Violence can be defined as harmful acts directed at individuals due to their gender and is ingrained in harmful norms, gender inequality, and power abuse. Explaining further, GBV violates human rights and is also a life-threatening health and safety matter which often results in both physical and psychological harm on the GBV victim. GBV is a broader term that comprises of sexual assault, domestic and intimate partner violence, as well as human trafficking. In Europe, 25% of women are indicated to have at some point in their lifetime experienced either physical and or sexual violence by an intimate partner. As Gust et al., (2018) notes, regarding the perpetrators, 80% were male, while 6% were female. Obviously, GBV is an issue that affects all genders and ages but with different dynamics

When it comes to young people, there is a need to have a more nuanced understanding as they're often perceived as victims or perpetrators instead of people with complex lives and diverse needs.

Globally, GBV constitutes a public health and human rights concern. In Europe, there are similar trends in GBV prevalence across countries (UNHRC, 2023).

The prevalence of GBV is varied and cannot be accurately determined since most victims lack the ability to seek justice, usually due to fear, shame, religion, dependency on the perpetrator, culture, and other socioeconomic factors. (Women, U. N. 2020). It can include female genital mutilation (FGM), honor killings, and even domestic violence. Emotional and psychological violence (EVP) includes verbal abuse such as name calling & insults which can be hurtful & damaging psychologically (World Health Organization, 2017). While most of the gender violence cases involve physical and sexual violence, most victims also suffer psychologically, emotionally, economically, while suffering efficacy and self-esteem issues.

Generally, people with strong religious belief systems are more likely to hold socially conservative views on matters sex, gender roles, and sexual behaviors. These conservative attitudes are often associated with less tolerance for liberalism or alternative lifestyles. GBV prevalence is not solely the product of socio-cultural factors. Beliefs about sex and gender, including religious beliefs, play a role in shaping attitudes toward women's rights, marriage and family life, and other social norms. For example, many religious traditions hold that men are superior to women. This belief is reflected in laws regulating women's rights. For example, in many Muslim-majority countries, women are required to obtain permission from a male relative or husband before they can marry or travel abroad. While religion may not necessarily advocate for GBV, certain beliefs like the superiority of a man may entrench GBV and power over women and girls, thus increasing the prevalence of GBV (Chaudhuri, 2018). This phenomenon has been present for ages.

The violence is occasioned by fights, physical assault, coercion, sexual assault, and deprivation of resources and opportunities (Kaladelfos et al., 2014). Religious beliefs can affect the prevalence of GBV. In some countries with high percentages of Muslims for instance, women are not allowed to work outside their homes. This means that they are not able to earn enough to financially support both themselves and their family members. With the coming of Christianity, several African traditions were eliminated. However, the Christian and Muslim faiths indicate that men are the heads of their families, so women ought to submit to them (John, et al., 2021). Certain cases of GBV have been swept under the carpet or downplayed by religious leaders advocating for forgiveness, hence perpetuating the vice.

The economic dependency approach focuses on how poverty affects women's lives by creating situations, forcing them into abusive marriages due to financial issues (Muluneh, et al., 2020). Women from poor backgrounds face a higher risk of GBV because they are cut out from accessing education and or job opportunities that would liberate them, allowing them to make ends meet. GBV victims who cannot afford medical services may not receive adequate medical care. Economic dependency and financial power dynamics within families may propagate the prevalence of GBV. A partner with less income or who is dependent on their significant other may not have the freedom of leaving an abusive relationship. For example, some men who depend on their wives suffer untold humiliation and emotional abuse from their wives due to their lesser incomes (Fry, et al., 2019).

In societies that are poor or have low literacy rates, women may be more vulnerable to GBV because they cannot read about GBV prevention programs or seek help when they are victims of violence. The level of awareness in society affects the prevalence and nature of GBV. In Africa,

increasing awareness of GBV and the plight of GBV has seen the emergence of social activists among men. Public awareness of GBV has also seen an increase in the number of civil society organizations working to curb it (John, et al., 2021). Oliveira et al., (2019) indicate high levels of exposure to sexual and GBV among refugees, asylum seekers, and migrants in Europe. While GBV is usually associated with developing countries, there are many unreported cases of gender-based violence and sexual assault globally, even in the USA and Europe. This denotes the global nature of the issue, necessitating the need for understanding and developing solutions.

The cultural practices of a community can influence its attitudes towards women, including their value and worth as individuals. In some communities, traditional teachings that emphasize the inferiority of women have been used to justify violence against them. African cultural practices like FGM, child marriages, and wife-beating might perpetuate the vice of GBV. Social norms reinforce gender stereotypes which also contribute substantially to the prevalence of GBV. In Ethiopia, Mali, and Niger, girls are often forced into marriage from the young age of 12 years (Dlamini, 2021). A good example is how, men are expected to be superior and women, inferior thus contributing to GBV in society. It is important for society to address how gender roles are perpetuated through social norms so that all people can be treated equally, their gender identities and or sexual orientations notwithstanding.

Economically dependent women in abusive relationships often leads to financial power dynamics within the family because the abuser often takes advantage of the partner's financial needs thus increasing their control. Economic dependency is also linked to financial power dynamics because abusers may use their partners' financial situation as an excuse to control them. For example, a husband who does not earn much could use that situation as an excuse to abuse his wife. According

to Aura (2018), Kenya has had massive reforms that have helped reduce GBV-based violence; however, there is still much to be desired. Financial power dynamics are also important because they can affect a partner's decisions on leaving or staying in an abusive relationship. A woman who is financially dependent on her husband may feel pressurized to remain in that abusive relationship from fear of losing all her financial resources, were she to leave. Therefore, financial dependence also increases a woman's risk of experiencing physical violence. Spouses who are financially dependent on their significant others experience more physical violence than their counterparts who are not financially dependent.

Society suffers when a group of the community is temporarily incapacitated due to GBV. The WHO suggests that for every three women globally, one of them is believed to have experienced either physical or sexual violence. Compared to the West, Africa scores poorly on human rights and GBV. According to Nkaabu, (2019), cultural and religious nuances and outdated cultural practices are significant factors causing the high levels of GBV and abuse of human rights against women, and girls around the continent. Some practices like child marriages, patriarchy, and FGM also contribute to GBV Africa. There are no official statistics, but experts believe that at least 50% of all African women have been abused by their husbands or other male relatives (Perrin, et al., 2019). Like other African countries, Kenya has its fair share of GBV, with the Corona pandemic further exacerbated the GBV issue. Most communities in Kenya, like the Kuria, are patriarchal.

This, coupled with poverty and limited access to education has led to higher rates of domestic violence. The Kuria community has a tradition where elders settle disputes within the community. If a woman wanted to report her husband for domestic violence, she would have to go through these elders, who would have to get permission from her husband to welcome her into their midst

(Buard, et al., 2013). This practice is gradually being phased out by modern ways of thinking and new approaches to justice, which seek to give more power back to the victims themselves and ensure that perpetrators are brought to book. The Kuria people in Kenya are predominantly a pastoral and farming community. They mainly follow Christianity as their religion, but also practice traditional rituals like circumcision, FGM, marriage ceremonies, the burial of the dead, etc. The Kuria people are further known for their music and dances, performed during special occasions like weddings or funerals (Shako and Kalsi, 2019). The researcher believes administrative, law enforcement and legal interventions in isolation cannot holistically tackle the GBV menace without fully understanding dynamics of the Kuria communities, geographical impediments, the effects of access to resources, poverty levels, awareness levels, religion, and traditional practices on the incidence of GBV against men, women and girls among the Kuria people.

1.2: Statement of the Problem

Gender-Based Violence (GBV) constitutes a significant legal, social, and human rights challenge in Kenya, affecting individuals across diverse demographics. Particularly, Western Kenya, encompassing the former Nyanza and Western provinces, has emerged as a hotspot for GBV cases, with Migori, Vihiga, and Busia counties exhibiting alarmingly high prevalence rates of over 50% (Morris, et al., 2020). Troublingly, statistics reveal that nearly 20% of the population has fallen victim to Female Genital Mutilation (FGM), reaching staggering levels of up to 94% in Northeastern Kenya. The intricate interplay of power dynamics, gender norms, and conflict has been identified as pivotal drivers of this pervasive issue. However, the Kuria community residing

in Migori County presents a distinctive socio-economic milieu that warrants an in-depth investigation into its unique factors contributing to the prevalence of GBV.

Despite the existence of extensive research on GBV in Kenya, prior studies predominantly emphasize its general repercussions, often overlooking the nuanced socio-economic underpinnings specific to individual communities. While existing research largely concentrates on variables such as literacy rates and cultural dimensions, this research seeks to unravel the intricate tapestry of socio-economic factors intrinsic to the Kuria East sub-county, and their role in shaping the prevalence of GBV within the Kuria community. In light of a plethora of policies, civic education initiatives, and action programs worldwide aimed at combatting GBV, this study endeavors to enrich the discourse with a fresh perspective, focusing on the facilitators and impediments unique to Kuria East. By delving into aspects like religious beliefs, economic dependence, cultural practices, and literacy levels inherent to the Kuria people, this study aims to unearth critical insights that can guide the development of targeted interventions to address GBV in this community.

The findings of this research are expected to offer valuable insights that inform the development of effective interventions aimed at curtailing GBV within the Kuria community and in other communities in Kenya. By unraveling the intricate web of socio-economic dynamics contributing to this issue, the study aspires to lay the groundwork for tailored and targeted strategies that address the root causes of GBV within Kuria East. By undertaking this investigation, the study not only contributes to the broader discourse on GBV but also addresses the critical need for nuanced insights into the facilitators and barriers that sustain GBV within communities. This research seeks to provide a more holistic understanding of the interplay between socio-economic factors and the

perpetuation of GBV, while proposing and developing possible solutions of addressing GBV within the community.

1.3: Research Objectives

The general objective of this study sought to explore some socio-economic factors and the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County, Kenya.

1.3.1: Specific Objectives

i. To examine the effects of religion on the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County.
ii. To explore the influences of economic dependency on the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County.
iii. To analyze the effects of cultural practices on the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County.
iv. To examine the effects of literacy levels on the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County.

1.3.2: Research Questions

i. What are the effects of religion on the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County?
ii. In what ways does economic dependency affect the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County?

iii. To what extent do cultural practices affect the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County?

iv. To what extent do literacy levels affect the prevalence of GBV in the Kuria Community in Kuria East Sub County, Migori County?

1.4: Research Assumptions

This study was premised primarily on the assumption that the four socioeconomic factors (religion, culture, literacy, and economic dependency) influence the prevalence of GBV. Another assumption made was that the two theories (social interactionism theory and conflict theory) adopted adequately informed the research study. The 'Social Interactionism Theory' explains how the Kuria community interprets various practices like FGM, GBV, child marriages and more by establishing relationship dynamics and the interplay of gendered power around cultural norms and social constructs.

On the other hand, the 'Conflict Theory' framework established how gendered power dynamics are reproduced in our day-to-day lives through dominance and practices such as IPV. Other assumptions include the similarity of participants' characteristics within the study, the sample size as an adequate representation the study research population, and the implication that the research study participants answered honestly and truthfully.

1.5: Justification of the Study

Understanding the factors influencing the prevalence of GBV among marginalized communities is crucial in developing interventions uniquely customized to offer solutions, empowerment while

boosting access to awareness, education, and health service by the community. While the effects of gender-based violence including loss of life, physical and emotional harm, and poor quality of life have been demonstrated in various studies, with possible solutions developed; women and girls in Kuria communities continue to suffer and the prevalence of GBV against a few women, and girls is still quite high. It is based on the existing gap that this research seeks to address.

1.6: Significance of the Study

This research study resolves to contribute to the development of literature on issues affecting various Kenyan communities. Analyzing the prevalence of GBV in a marginalized region sought to help provide actionable recommendations for community driven change and reduction of prevalence rates. The study sought to help improve awareness on the prevalence of GBV, thereby promoting community advocacy for ending GBV in Kuria East and various parts of Kenya. The results of the study seek to benefit the Kuria community members and county administration, as well as NGOs on the prevalence and the causal factors, thereby allowing policy formulation and increased awareness.

1.7: Scope and Delimitations of the Study

A cross-sectional examination of the prevalence of GBV against a few women, and girls in the Kuria Community was conducted in Kuria East Sub County, Migori County. The study focused on the prevailing causal factors and how they can be addressed to offer long term solutions. The study was limited to select regions in Migori County, community elders, religious elders, pre-selected women and girls and administration officers.

1.8: Limitations of the Study

Sampling errors highly likely arise when the probability sampling method is employed in sample selection. Notwithstanding, the sample was not a reflection of the general or concerned populace and consequently resulted in some study limitations, for instance sample or selection bias. In order, therefore, to undo the biased sample outcome from a statistical standpoint, the researcher exerted efforts to weight the tainted sub-groups and eradicate bias by expanding the sample size, grouping the population, and even randomizing selection. This research study involved surveying certain people or organizations, and the researcher was faced with the problem of having limited access to these respondents. Another setback was inadequate time allocation for the completion of data collection.

The research study was therefore redesigned to address these concerns through the allocation of more time and widening of the sample scope to ensure adequate data is collected to facilitate accurate conclusions from the study. In anticipation of unwilling respondents, the researcher gave an assurance of anonymity, and that the information would only be used for research purposes. This eased the respondents into divulging sensitive and traumatizing information thus enabling data accuracy. To ensure accurate data collection among a section of respondents with low literacy levels, the researcher used an interpreter who doubled up as the research assistant, who ensured that all responses were adequately captured. The researcher also utilized local intermediaries, such as community health workers, social workers, or volunteers, to help bridge the gap between the researcher and the respondents. These intermediaries assisted in identifying eligible participants and facilitating data collection. Additionally, the researcher also sought respondents with higher literacy levels in data collection.

Due to time and resource limitations, it was unfortunate that this study could not be carried out in the whole of Kuria East thus there is need to replicate the same study in other regions, to ascertain the socioeconomic factors affecting the prevalence of GBV. Poor road networks also challenged, and in some selected cases hindered access to interior locations within Kuria East. During my interactions with the locals, the researcher also noticed that they were quite a suspicious lot, and it took time to earn their trust and get them to opesn-up to me. There was also lack of cooperation among study respondents whereby the respondents feared speaking out among other respondents citing victimization.

1.9: Conceptual Framework

This study explores the link and effect of religious practices, economic dependency, cultural practices, and literacy levels on the prevalence of gender-based violence against a few men, women and girls in Kuria East Sub County, Migori County.

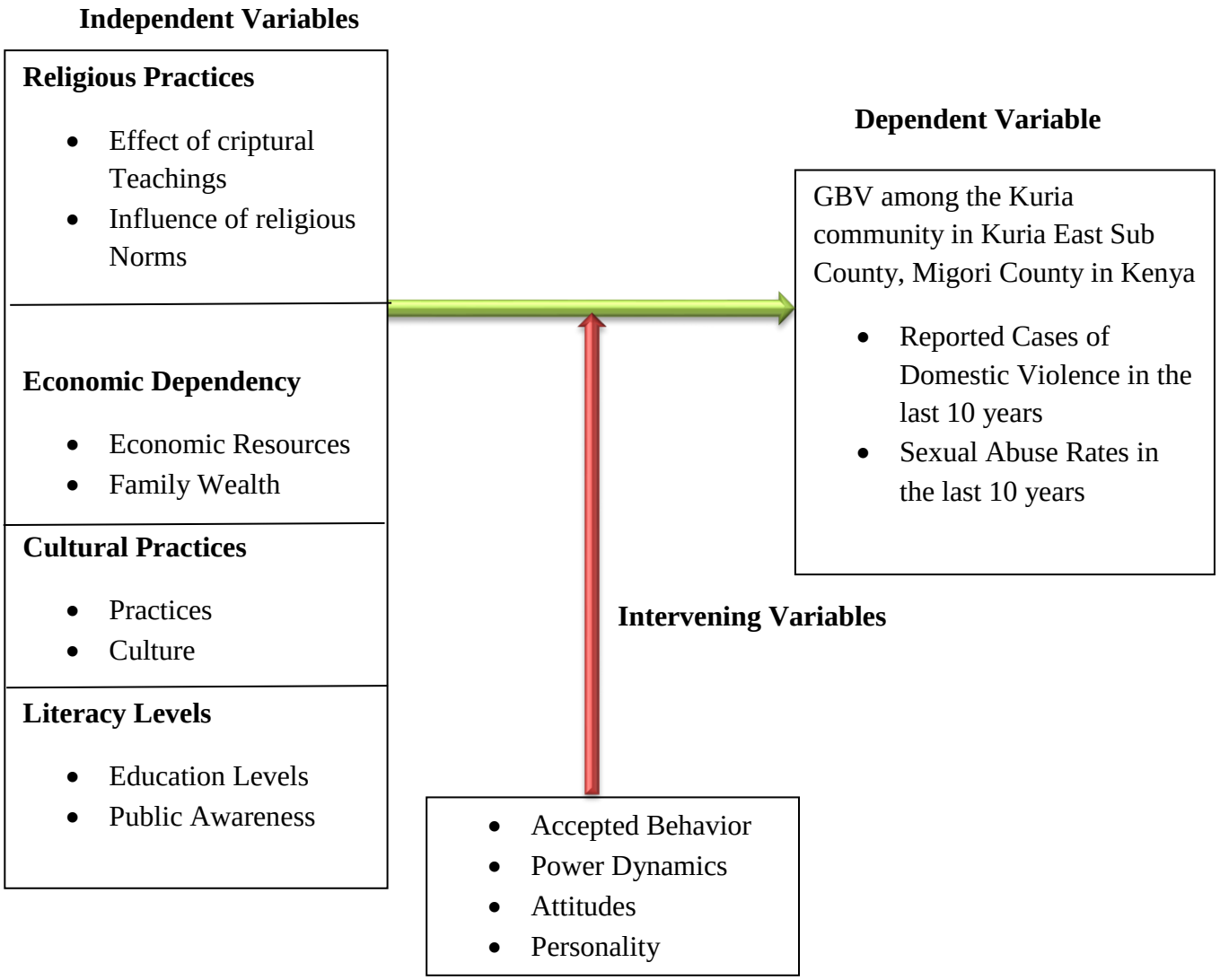

Figure 1: Conceptual Framework

Source: Field Data (2023)

1.10: Conceptual and Operational Definition of Variables

1.10.1: Religious Practices

Religious practices and the teachings, nuances and what is considered acceptable in various religious groupings influences mannerisms of people, relationship dynamics and the actions

considered religiously acceptable. Traditional religions like Islam and Christianity consider the man as the head of the family unit and places women on a lower scale compared to men. This is usually used to normalize violence against women and girls, while condemning women who are aggressive, not submissive or question the authority of men.

1.10.2: Dependency

Dependency determines the power dynamics between various parties in a relationship and community. Usually, women in patriarchal societies depend wholly on their men thus are predisposed to violence and abuse from their benefactors. In rural areas and communities, women exemplify high levels of dependency, whereby they have little say of how their benefactors treat them. The fear of missing on various benefits and resources due to dependency makes women and girls not to speak up against GBV.

1.10.3: Cultural Practices

Most African cultures practice polygamy, wife battery and FGM. The practices considered normal and practiced by certain communities determine how women and girls are treated and the help mechanisms in case of violence in the home. Most cases of violence are normalized, and in extreme cases home based solutions that do not favor the victims are sought. Most Kenyan communities still hold on to repugnant practices that reduce the impact of the government's effort to curb GBV. Due to their culture, even the victims consider it normal to experience violence from their fathers and male members of the society. Where men are the victims, the shame of being beaten by a woman prevents the men from seeking justice and speaking out.

1.10.4: Literacy Levels

Literacy levels inform the personality, awareness of rights, and attitudes towards gender-based violence against the Kuria community. Literacy levels in some regions of Kenya, like Kuria East Sub-County, are low, which could be a causal factor in the high rates of GBV in the area. If a community has very low literacy rates, they may not be able to access information about GBV from various sources. They may not be aware that it is a problem or know how to address it.

1.10.5: Operational Definition of Terms

Dependency: This is condition whereby one party or a group of persons, for instance women and children depend solely on a specific person or group persons, usually the fathers, husbands, and elders of the community for their survival, affirmation, and socioeconomic nourishment.

Gender Based Violence: This is physical and psychological violence directed at a person or group of people based on their gender, usually by persons of the opposite and dominant gender resulting in bodily and psychological harm on the victim. It can affect both men and women, though it is mostly women who suffer this type of violence.

The Kuria Community: Also known as the AbaKurya, this Bantu community found in both Kenya and Tanzania are traditionally pastoralists and farmers of both food and cash crops (maize, beans, cassava, and coffee).

FGM – Female Genital Mutilation: Also referred to as female circumcision, FGM is the ritualistic cutting or removal of some or all the external female genitalia.

Sexual Abuse: This is any forced act of a sexual nature for instance rape, marriage, assault, dating, violence, stalking, and inappropriate touching as well as sexual harassment.

Physical Abuse: This refers to any form of bodily harm done to a person without their consent, or when they cannot give consent for instance if ill, disabled, young or old.

Emotional or Psychological Abuse: This refers to verbal abuse, characterized by name calling and hurling of hurtful, demeaning, and psychologically damaging insults (WHO, 2017).

Violence: This is often occasioned by fights, physical assault, coercion, sexual assault, resource, and opportunity deprivation.

Consent: In the context of GBV, this is the voluntary granting of permission to engage in sexual activity.

Patriarchy: This can be described as a social system whereby men dominate over women because they feel they are a superior gender.

Perpetrator: This is a person who carries out a heinous, immoral, illegal, or harmful act.

Repugnant Cultural Practices: In the GBV context, this is an extremely distasteful and unacceptable cultural practice.

CHAPTER TWO

LITERATURE REVIEW

This chapter offers a literature overview of the GBV issues, its prevalence rates, while providing the theoretical background of this study. The chapter examined the symbolic interactionism and the conflict theories to further explore the issue. Furthermore, it summarized and highlighted the gaps that the study sought to fill.

2.1: Critical Review of Relevant Theories

Theoretical review studies an existing set of established facts on a specific field of academia. It involved studying the set of accepted academic principles which would contribute to illuminating the perception of the factors affecting the prevalence of GBV against a few women, and girls in Kuria communities in Migori, Kenya. The study was guided by two major theories, namely, symbolic interaction theory and its shortcomings complemented by conflict theory.

2.1.1: Symbolic Interactionism Theory

George Herbert Mead (1863–1931) is considered as the forefather of symbolic interactionism even though he did not publish his work on it. In 1969 however, Mead's student Herbert coined the term 'Symbolic Interactionism' and further outlined basic principles suggesting that human interactions with things based on the significance ascribed to them. This significance is believed to emanate from human interactions with others, as well as society at large, and that these meanings are in specific circumstances interpreted by the person dealing with them (Carter & Fuller, 2016).

The relationship concerning the ‘Symbolic Interaction Theory’ and GBV involves both cultural and social norms present in society. To understand how gender-based violence can be avoided or stopped, there was need to look at how these acts were carried out by men against women. For someone to commit an act of GBV against another person, they first needed to believe that they had power over the other person by virtue of their gender status.

Symbolic interaction theorists believe that people act based on their perception of their social environment. According to Denzin, (2008), people develop a set of rules for interacting with others based on what they observe other people doing in similar situations or environments. Socialization is one way through which these rules become internalized by an individual so that he or she can behave in accordance with them. Symbolic interactionism helped inform the researcher on the relationship dynamics of the Kuria people and their interpretation of various practices like GBV, FGM, child marriages, and more.

The interplay of interpersonal communication, power, and gender were notably closely related to this theory framework which is banked on the assumption that humans communicate using either words, gestures, facial expressions, or many other nonverbal cues to express feelings or convey ideas and in turn influence how people perceive and interact with others. By advancing gender and race as social constructs based on people’s beliefs thereby determined the relationship dynamics (Handberg, et al., 2019). ‘Social Interactionism Theory’ is believed to form the basic framework of the sociology theory, where people develop and build on symbolic meanings based on their social interactions. It demonstrated the Kuria community through subjective symbolism of events, habits, behaviors, and objects. This theory accentuates the relationship between meanings of

symbols and people's behaviors, raising awareness of moderate social interactions, in consideration to the social environment where learning takes place.

This theory was however faulted by incorrect or differential interpretation of symbols across varied groups of people thus proving difficult to quantify based on interpretations, thus making it biased by nature. Another weakness noted was that the theory overrated the power of people to build their own realities, neglecting the emotional dimension of human conduct, and preferring smaller social structures (Handberg, et. al, 2019). Due to these weaknesses, the conflict theory was used to complement the symbolic interactionism theory.

2.1.2: Conflict Theory

The 'Conflict Theory', first developed by Karl Marx in 1848, suggests that the state of perpetual conflict of society results from the competition for scarce resources. Stroebe, et al., (2012), indicates that the theory is the macro level approach in describing the society as made up of various social classes, divergent interests, power influences, social stratums, and their effects thereof, in the distribution of resources in that society. In this study, the theory indicated that society members had to compete for social resources and thereby created social classes, dependency, and power structures within society. Economic, political, and social inequalities within society often lead to violence.

Different societal groups are faced with different levels of aggression based on their race, gender, tribe, or ethnicity, while their reactions were based on the prevailing economic, political, and social inequalities, social mobility, legitimacy of those in power, and resource allocation. Gumplowicz, when expounding Karl Max's ideas indicated that war and conquest form the basis for civilization,

whereby cultural and ethnic conflicts resulted in territories and nations being identified by the domineering point of influence that controls other groups of people (John-Kall, et al., 2010). In this research study, the Conflict Theory best described the prevalence of GBV in varied ways by providing a framework for understanding how GBV was perpetuated. It demonstrated that men used GBV to control women and deter them from challenging male dominance while women used GBV to enforce compliance with their husbands' wishes.

The theory enforced the underlying assumption that both genders are equally responsible for GBV, with both committing acts of violence and explained how gendered power dynamics were reproduced through daily interactions. In terms of domestic violence, conflict theory suggests that there are two types of conflict: "power" and "control". Power refers to people seeking control over others through coercion and force while control refers to people trying to gain power over others by restricting their ability to act and make decisions. Power and control being closely linked, both lead to violence against women (John-Kall, et. a., 2010). In this research study, the conflict theory indicated how dominant community members and gender subjugated over other genders or groups within the community, thereby having a monopoly on aggression against their weaker counterparts.

The theory further examined various phenomena through the social lens, suggesting the natural attraction between humans and conflict. This theory provided a macro view of the society, apportioning it into different clusters that allowed easier scrutiny of interactions. Nevertheless, one common reproach of the conflict theory is that it did not capture how economic interactions were mutually beneficial to the dissimilar classes involved.

2.2: Review of Empirical Studies

With over 40% of women in Kenya likely to face physical and or SGBV, including lifetime physical and sexual intimate partner violence. Around one in five girls facing child marriage or Female Genital Mutilation, Kenya has a long way to go. As enshrined in Article 29 (C) of the Constitution of Kenya, women and other persons are protected from GBV. The Kenyan Constitution also ensures that men and women have equal rights but despite this, the prevalence of GBV in Kenya hasn't exactly gone down, (Nicolson, 2019). Exposure to violence has long-term effects on girls and women, including increased risk of contraceptive non-use, unwanted pregnancies, unsafe abortions, sexually transmitted infections, low birth weight babies, increased risk of alcohol and substance abuse, and self-harm and further victimization in later life. In most African countries where GBV is prevalent there are laws protecting women from violence.

The relationship between socio-economic status and gender-based violence is complex. Socio-economic factors may enhance or protect against risk factors associated with GBV. They may also be directly related to levels of GBV itself (World Health Organization 2017). GBV is associated with lower socioeconomic status in Western countries and vice versa. In the US and Europe, GBV is occasioned by economic dependency on men due to lack of economic resources, decreased opportunities for education and employment, and other factors that limit women's independence (Dlamini, 2021). The US Department of Justice reports that most perpetrators of domestic violence are employed full time while their victims are likely unemployed. The link between poverty and domestic violence has been well established in studies of community samples from the US, UK, Australia, New Zealand, and Canada. Low income is positively related to both physical abuse and psychological abuse toward wives (Erez and Harper, 2018). Gender-based violence (GBV) is a

complex social phenomenon that manifests as physical, sexual, and psychological forms of abuse. GBV is associated with negative socio-economic, cultural, and political factors. In the US and Europe, GBV is occasioned by socioeconomic disadvantage in disadvantaged communities. In countries like the US and Europe, GBV is more prevalent among women from disadvantaged communities. These women are often economically dependent on their partners who control all the finances in the family. This can lead to increased vulnerability to violence (Satyen, et al., 2018). Gender-based violence is most perpetrated by men against women. However, this does not mean that all perpetrators are male or that all victims are female. Statistics suggest that both genders are affected by GBV.

Gender-based violence can also be perpetrated by women against men or other women. GBV includes any act of violence or abuse against a person that is motivated by their gender. It may include physical, emotional, sexual, or psychological abuse. This includes intimate partner violence (IPV), sexual assault and abuse, stalking, female genital mutilation/cutting (FGM/C), human trafficking, forced marriage, acid throwing and other forms of gender-based violence (Walby and Towers, 2018). Women are often expected to be submissive to their husbands and fathers; some even believe that it is their duty to do so. They are also expected to take care of everyone else before themselves, which leaves them exhausted and emotionally drained. Other contributors to GBV in Africa involve cultural practices such as child marriage, bride price and polygamy. According to UNICEF, child marriage is defined as the marriage of a girl or boy before attaining 18 years of age (United Nations Children's Fund). It is estimated that more than 700 million girls worldwide were married before their 18th birthday between 2000 and 2017.

These early marriages tend to be arranged by parents, without seeking consent from their children as they may not approve. In some African countries like Ethiopia, Mali and Niger, girls are forced into marriage sometimes even as young as 12 years old because they are seen as property or property owners have the right to exchange their daughters for cattle or other goods (Djamba and Kimuna, 2019). In Kenya, like most African countries, we have our share of GBV and archaic cultures. The Kuria community is no different. Indeed, the Kuria people are known for their adherence to tradition and culture. In the Kuria community, GBV is prevalent in all forms. These include physical abuse by men against their wives and children, marital rape, sexual harassment at work, domestic violence, child physical abuse, child sexual abuse, child marriage, and FGM, (Arora-Jonsson, et al., 2019).

The Kenya Demographic and Health Survey 2014/2018 (KDHS) shows that almost one in four women in Kenya have experienced physical or sexual violence by their partners. This is an increase from 22% in 2005/2006. The prevalence of gender-based violence (GBV) has remained high despite efforts to reduce it through anti-GBV campaigns, increased awareness, and education. GBV in Kenya is mainly caused by cultural practices. Gender-based violence has been observed because of the cultural beliefs that women are inferior to men. The most practiced cultural belief is that women are subservient to men. Women are taught from an early age that they should obey their fathers and husbands without questions. This attitude has led to many cases of domestic violence where men abuse their wives because they do not listen to their husbands or do not obey them. In Kenya, there are many cultural practices such as FGM and early marriages that contribute to the prevalence of GBV. FGM is widely practiced in Kenya despite being illegal since 2010 (Ouma, et al., 2018).

Gust, et al., (2018), indicates that in rural communities in Kenya; traditions; religion, ignorance, poor access to justice system services, conflicts, poverty, and poor infrastructure compounds the prevalence of GBV. Most Kuria communities, especially in Northeastern region of Kenya still practice traditional practices that aid the menace. Studies indicate that the rate of GBV and sexual assault is higher among Kuria communities than in other communities in Kenya. It is further indicated that the rates are also higher in rural Kenya than in urban areas. In the Kuria community, GBV is mainly perpetrated against women and children by men who have power over them. Domestic violence against women is widespread in the Kuria community and occurs mostly at home or in public spaces.

The most common forms of violence include physical assault, sexual violence, and emotional abuse. These forms of violence are perpetrated by husbands and fathers because they do not want to lose face while exercising dominance over their wives or children. The most common reason given by perpetrators of GBV in this community is that it is their right as men to discipline their wives or control them (Ali, et al., 2018). Buttia, (2015) investigates successful interventions in mitigation of female genital mutilation/cutting (FGM/C) among selected Kenyan communities of Maasai, Kisii and Kuria and indicates that there is a need to increase community awareness on cultural practices that propagate GBV. There are varying interpretations regarding FGM by different people in communities. Some people consider it as a rite of passage for girls while others consider it as an act of violence against women and sexuality. In this regard it is important to note that FGM has been practiced for centuries by various ethnic groups in Kenya including Maasai, Kikuyu, Luo, Kalenjin, and Turkana among others. It has also been reported from many countries around the world with prevalence ranging from 5% to 95%.

Magige, (2020) on the effects of Female Genital Mutilation on Girl Child Education in Kuria West Sub-County, indicates that FGM limits the ability of girls to get quality education, indicating the adverse effects of GBV on women and girls. FGM and other forms of GBV have been associated with a wide range of negative outcomes including complications during childbirth, increased risk of newborn deaths, sexual dysfunction, infertility, chronic pain, and infection (WHO, 2020). There are also negative effects on children's health among the Kuria both during childhood and adulthood including mental health issues such as depression and anxiety disorders, reduced ability to engage in productive activities due to sores caused by FGM, and lowered capacity for learning and development especially in early childhood which can lead to lower educational achievement later in life.

2.2.1: Religion and Gender Based Violence against Women and Girls

GBV is a major public health problem in the West, with significant consequences for women's physical, mental, and sexual health. The prevalence rates are lower than in developing countries but vary by country. In the United States, an estimated 25% of women have experienced physical violence by an intimate partner and 17% have been raped at some point in their lives. In England, Wales, and Scotland, 1 in 4 women has experienced domestic violence at some point in her life. This is because of the varying patriarchal and religious belief systems in the West that places the man as the head over a woman (WHO, 2019). The situational dynamics are better understood when looking at the African traditional governance system, culture, and way of life. This system has certain religious norms that perpetuate GBV. Religious norms in Africa state that it is the woman's duty to care for her family; she must always be obedient to her husband; does not have equal rights to property; has limited rights to inheritance etc.

Religious norms state that women should dress decently and cover their bodies and faces so as not to provoke lustful thoughts from men, who may not be able to control themselves when they see women's bodies or faces. This has led to victim blaming by both the society and the woman herself when she is sexually abused or assaulted by a man who argues that he was overcome by lustful thoughts provoked by her dressing or behavior (Rono, 2023). There are certain religious norms that could be deemed to perpetuate GBV. Both in Mulsim, Christian, and African religious beliefs and norms, the man is the head, and the woman is a lesser and weaker sex. Religious norms also provide justification for violence against women (Rono, 2023). For instance, the Koran teaches that men have authority over women because of their "strength and superiority," and there are several verses in the Bible (most notably, Ephesians 5:22-24) that command wives to obey their husbands.

The prevalence of religious norms that support GBV in Uganda is demonstrated by the high number of Ugandans who believe that wife beating is sometimes justified. In a survey conducted by The Uganda Demographic Health Survey (UDHS), 4 out of 10 Ugandans believe that wife beating is justified if a wife burns food or argues with her husband (Le Roux, 2019). Religious leaders, imams, priests, and preachers play a crucial role in the prevention of gender-based violence. Religious leaders are at the forefront of community outreach and have the potential to impact social norms that promote and discourage gender-based violence (Muluneh, et al., 2020). Religious leaders are believed to proffer a wide variety of solutions and remedies to victims, perpetrators, and the society in general on how to address GBV. The religious leaders should use their platform during worship sessions to preach against GBV. They should be active agents in educating the youth on issues pertaining to GBV.

They ought to create awareness on the dangers of GBV with a view of educating and sensitizing people about the menace it heralds for all. The religious leaders should ensure that all cases of GBV reported in their churches or mosques are referred to appropriate authorities for redress (Rono, 2023). Nkaabu, (2019), in examination of the role of church leaders in averting GBV in Imenti South sub-cunty, Meru County, Kenya indicates that the Church leadership is being looked at when it comes to averting violence at communal and family levels. The purpose of the study was to examine the role of the Church leaders in averting GBV in Imenti South sub-county. The study further sought to determine instructional role of Church leaders in averting GBV in Imenti South sub-county, Kenya, to assess the influence of Church leaders' advocacy against gender base violence in Imenti South sub-county. It also sought to analyze the influence of Church leaders' conflict resolution on GBV in Imenti South sub-county.

This study concluded that church leaders play an important role in the disclosure of abuse because of the trust by individuals, families, and community. However, the study only focuses on the role of church leaders without critiquing the role of Biblical teaching and patriarchal nature of Abrahamic religions in entrenching the view that males are superior to females, thereby reducing the prevalence of GBV in those communities. The church leaders should also emphasize the development of relational virtues such as selflessness and unconditional love. Religious beliefs and rituals often profess the superiority of men over women and the need for women to be submissive. These beliefs and practices are widespread in Africa, particularly in the Christian and Muslim faith. In the Islamic faith, Quran 4:34 states that men oversee women because Allah made one of them excel the other. The verse also goes on to say that men are to beat disobedient wives (Quran 4:34).

While some sections of the Islamic faith take this passage literally, other Muslims believe it should only be used as a last resort after attempting all other measures. In the Christian faith, 1 Corinthians 11:3 states that man is the head of woman as Christ is head of man and God is head of Christ. Additionally, religious teachings promote submission of women to men and discourage divorce even when there is domestic violence (Nkaabu, 2019). Religion is one of the contributing and enabling factors to GBV. Kenya and most African countries are predominantly Christian and Muslim and blend African religious practices. Some religious leaders have been accused of encouraging followers not to use contraceptives as taught by the Bible while they themselves refuse to practice abstinence and fidelity. In some religious teachings, women are described as a second class of human beings who were created from the ribs of man. The scriptures portray women as inferior and accountable for the sin in the world. Some religions encourage men to dominate women by perceiving them as property or possessions which can be bought, sold or inherited from parents or relatives. In other cases, some clergymen also offer to pray for those who want to use violence against their partners (Rieger, et al., 2023). An analysis of the GBV situation in Kenya shows that religion is one of the contributing and enabling factors to GBV. Christian and Muslim blend African religious practices, beliefs and values such as having multiple wives, charging dowry, female circumcision and sanctioning men to beat their wives if they misbehave. The Christian community believes in the Bible which is the word of God. The Bible does not advocate for GBV (Rieger, et al., 2023). However, it is unfortunate that many Christians have misinterpreted some scriptures to justify violence against women. Many scholars have over time, made a case that Christian theology has been used to justify male dominance and female subordination in society. The theology in question has been called patriarchal as opposed to egalitarian (Fry, et al., 2019).

2.2.2: Economic Dependency and the Prevalence of Gender Based Violence

Cameron and Tedds, (2021) postulate that GBV does not simply occur in the context of inter-personal relationships or as the result of perpetration by 'bad men'; rather, GBV is a systemic issue that seizes upon and operates through longstanding pathologies and power dynamics—patriarchy, racism, and colonialism—rendering diverse people more vulnerable to victimization based on their identity. Strategies, policies, and programs focused on ensuring victims and survivors can achieve economic security seek form a vital component of any serious plan to address GBV. They consider economic security to be a state in which criteria for financial security, stability, and continuity are fulfilled, and conceive of basic income as a class of policies that share principles of simplicity, respect, economic security, and social inclusion. However, economic independence cannot ensure reduction of GBV rates on its own.

Poverty puts women at risk for abuse because they often depend on their partners for financial support. They may also be more dependent on their partners because they cannot afford childcare or other services without their help. Women who work part time or as temporary workers are less likely to report workplace sexual harassment. Precarious employment can also limit a woman's ability to leave an abusive relationship if her partner threatens her job prospects. Women in low-income households in the US are more likely to experience violence than those with higher incomes. They are also more likely to live in unsafe neighborhoods and have fewer resources to move out or get help (Erez and Harper, 2018). In households where money is tight in US and most European countries, women are more likely to stay in violent relationships as leaving might mean homelessness.

Economic abuse can prevent women from leaving abusive relationships. They may be unable to work; their wages may be controlled, or they may be prevented from studying or working. Being the main reason why women remain put in abusive relationships. High dependency rates among women, due to factors such as caring responsibilities and income inequality, further entrench women's powerlessness and financial dependence on male partners (Nicolson, 2019). Economic resources are very important in the decision to stay or leave a violent relationship for women in the West. It determines if services such as housing and legal aid are available. It also influences whether the woman feels able to leave the relationship without losing everything. Without any economic resources, women may feel they cannot afford to leave a violent partner. This is especially true of those women who are financially dependent on their partners and have little access to employment opportunities. Women's financial independence has a positive impact on their physical safety and emotional well-being (Wirtz, et al., 2018).

Economic self-sufficiency can also improve women's confidence and ability to determine their own destinies, including deciding when and how to end abusive relationships. Economic resources, such as income and assets, provide options for women to leave violent relationships and access safety. Conversely, a lack of economic resources can increase a woman's dependence on her partner, which in turn increases her vulnerability to violence (Rono, 2023). The wealth of GBV victims and the economic power dynamics also contribute to GBV. Poor victims in Africa are usually dependent on their perpetrators. Family wealth is important because it is typically a key source of security in times of crises such as GBV. In addition, family wealth influences who makes the decisions within the household.

Because intra-household allocation is determined by power relations, the level of wealth of an individual or a household determines the extent to which they have power to influence allocation decisions. A distinction can therefore be made between financial (cash and financial investments) and material assets (physical objects). The relative importance of each type differs from one country to another, different social classes, households, and individuals. Family resources also matter when it comes to reporting GBV incidents. If victims are economically dependent on their spouses or violent partners, they may be less likely to report violence due to fear of losing access to financial support, housing and other necessities required for survival (Wirtz, et al., 2018). From an economic standpoint, lack of power and control over decisions is particularly problematic and could lead to violence from lack of security and financial stability.

Wealth distribution within households is another major issue influencing the risk of domestic violence. Within Africa there tends to be unequal distribution of income between men and women in households. The gender pay gap suggests that most women earn less than men therefore translating to less control over household finances; in turn increasing their vulnerability to abuse (McIlwaine, 2013). Allocation of resources among family members, especially between men and women, often influences GBV occurrence. The 'best case scenario' is where a woman has her own income, and in situations where both husband and wife have jobs, suggesting that economically empowered women are therefore less likely to experience domestic violence (Nicolson, 2019). Allocation of household resources affect GBV occurrence in Kenya. The perpetrator withholds money or food as punishment or for personal gains. Women and girls economically dependent on their partners or families find it difficult to leave violent relationships as they lack access to resources and anywhere else to go (Chaudhuri, 2018).

In most cases, the dynamics of family wealth and allocation are central to domestic violence. The distribution of resources within a family is uneven and often based on gender roles. Men oversee access to and control over resources, while women's role is perceived as that of household managers who provide for their husbands and children. This power imbalance makes women vulnerable to varying forms of abuse. Many GBV survivors also face challenges in accessing economic resources after they leave their abusers. For instance, property transferred during marriage under customary laws is deemed as joint property and returned to the husband upon divorce or separation. This normally leaves many survivors without assets upon which they can depend after separation (Mshweshwe, 2020). Lack of economic resources and dependence on the male partner is the main reason why women remain in violent relationships. In domestic violence cases, control and economic abuse often begins before physical abuse.

Research shows that financial control is a common tool in coercive control, used by abusers to threaten and intimidate their victims. The consequences are huge, with many women unable to leave abusive relationships due to their lack of financial independence (Morrison et al., 2007). Women who are economically dependent on their partners often feel limited by choice, forcing them to stay in violent relationships because they lack the financial means to leave it or are afraid of not being able to support themselves or their children if they did. Women in low-income households and those without private health insurance are less likely to report IPV than women in higher income households with private health insurance (Chaudhuri, 2018).

2.2.3: Cultural Practices and the Prevalence of Gender Based Violence

World Bank (2019) indicates that 35% of women worldwide have experienced physical and sexual intimate partner violence or non-partner sexual violence. Globally, 7% of women have been sexually assaulted by someone other than a partner. During the Covid-19 pandemic, there has been an alarming rise in the incidents of gender-based violence in Europe and North America. Several risk factors are attributed to the surge of gender-based violence such as culture, societal views, and social ills like alcohol consumption (Mittal and Singh, 2020). In the US, one in three women report experiencing some form of sexual violence at some point in their lives. This includes rape, sexual harassment, stalking or other forms of intimate partner violence. Cases have been cited where men have been falsely accused of rape or other forms of sexual assault (Rieger, et al., 2023). Cultural practices, social norms, and level of awareness play a crucial role in the prevalence of GBV in Africa. One of the biggest contributors to GBV in Africa involves lack of education and awareness. This is because many people are unaware of the causes and consequences of GBV, so they do not understand the issue or how to prevent it.

Women are often victims of rape, physical abuse, and murder due to their gender. They also suffer from other forms of abuse such as economic deprivation, discrimination in schools and workplaces, psychological abuse, sexual assault, forced marriage, and infanticide. Another contributor to GBV in Africa involves men's attitudes and perception towards women. In many African countries, women are seen as property, rather than individuals with rights. This is especially true for women who are married or still living with their parents (Mshweshwe, 2020).

While GBV is a global phenomenon that affects all countries, there are significant variations in prevalence across countries. In SSA, for example, data from the UN Multi-Country Study on Men and Violence (MSMV) indicate that rates of GBV against women are much higher than elsewhere in the world. This is thought to be due to continued high levels of poverty, with women's access to resources such as education, health care and employment being limited. In addition, there are also several other risk factors for GBV in SSA which include gender inequality, cultural norms around masculinity and femininity, religion, and ethnicity. For example, religious beliefs can influence how people treat others based on sex or gender (Keith, et al., 2023). Data pooled from Sub-Saharan Africa suggests that prevalence of intimate partner violence (IPV) among women was 44%, and non-intimate partner violence prevalence was 14%.

The highest prevalence rates of intimate partner violence that were reported included emotional (29.40%), physical (25.87%), and sexual (18.75%) violence. In addition, the sub-regional analysis found that women residing in Western (30%) and Eastern (25%) African regions experienced higher emotional and physical violence levels. Therefore, integrated mitigation measures to reduce GBV in Sub-Saharan Africa should focus mainly on intimate partner violence to achieve the SDG's (Muluneh, et al., 2020). The level of violence increases with the level of cultural or religious beliefs that support the justification of violence. FGM practice may inflict long-lasting physical and psychological damage on women. Additionally, it affects the victim's ability to enjoy sexual relations and her capacity to bear children, also exposing her to health risks during childbirth (Badurdeen, 2020). Furthermore, early pregnancy often deprives girls of their right to education and pushes them into a life of poverty and dependence.

Bride price is a form of ownership intimating women as property transferrable during marriage which is a human rights violation. It also makes it more difficult for women to leave abusive relationships because they are perceived to belong to their husbands' families, who may demand compensation if they left (Rieger, et al., 2023). Like most communities in Kenya, the Kuria have cultural beliefs promoting violence against women and girls while homosexuality is regarded as an abomination and taboo. As such, every effort must be made to curb this vice which is a social-ill. Women who engage in same sex relationships are stigmatized by their community and often beaten or even killed by relatives. Their families also suffer from the stigma resulting from these behaviors. Women are considered property of men and are subject to male authority at all levels. There is no decision-making role for women and girls including those in marriage.

They have no voice or say in decisions relating to them including issues such as education, employment, marriage, and health among others. Those who dare to challenge cultural norms pay dearly by being victimized through physical abuse or other forms of violence (Rono, 2023). The Kuria people are a patriarchal society, with clear divisions of labor between men and women. Men are the breadwinners who go out to work and support their families while women take care of domestic chores such as housekeeping and cooking. While this arrangement may seem fair on the surface, it has its roots deeply embedded in gender inequality which leads to GBV among other forms of violence meted against women and girls. It is common for men to be violent towards their wives or girlfriends if they do not perform certain tasks well enough or because they feel like it.

In most cases however, these acts of violence are directed against lower status members of society such as children and poor people who have little or no access to resources and services but have few means to protect themselves from abuse or seek redress when they fall victim to it (Morris, et al., 2020). The Kuria community like most African communities is male dominated where men are seen as superior to women. Within this context, boys are more valued than girls. This hierarchy is instrumental in perpetuating GBV; men believe they can exercise power over women because they are superior, and women accept this reality (Badurdeen, 2020). Culture allows for various forms of GBV including physical, sexual, and emotional abuse, forced marriage and female genital mutilation (FGM). Wife inheritance for instance is a common practice in the Kuria community whereby a man's brother inherits his wife in case he dies. Men are generally unsupportive of FGM, but their opposition does not translate into action to abandon it. Polygamy, a major cultural practice among the Kuria, significantly contributes to GBV prevalence as it empowers men over women through unequal distribution of resources in polygamous households. Primary wives have greater access to resources than their junior counterparts, resulting in conflicts over who gets what (Badurdeen, 2020).

2.2.4: Literacy Levels and the Prevalence of Gender-Based Violence

The more literate and educated a population is, the higher the likelihood of less GBV occurrences. Educated women in the US and Europe empower themselves to make better choices for their lives than uneducated women. Women who are educated are less likely to tolerate domestic abuse; they know their rights and have more self-confidence to get out of abusive relationships. Educated women tend to marry later and have fewer children, which in turn makes them economically independent.

This can play an important role in preventing domestic abuse as well as preventing early marriages that often lead to domestic violence against young girls who have barely reached puberty. In addition, educated women are more likely to earn a living on their own, which also helps decrease dependency on their partner or family. Furthermore, studies in the US show that if women are economically empowered, they are less likely to suffer from domestic violence or abuse by a partner or any other family member (Erez and Harper, 2018). With increased public involvement, donor funding for programs and projects aimed at curbing GBV also increased. Increased funding has contributed to the rise of more organizations involved in GBV related issues and this has led to increased research into the causes of gender-based violence. The increase in research has led to the identification of various risk factors that lead to GBV.

Awareness of these risk factors can help enhance prevention efforts put in place by various stakeholders including government, NGOs, and other actors in the country (Kimunah et al., 2008). Gender equality can contribute to lower levels of both intimate partner violence and sexual violence by strangers. There is no evidence to suggest that low literacy directly causes violence; however, it appears to be an indicator for higher levels of GBV or for perpetration or victimization for groups (e.g., women with less formal education) in Africa. A woman's risk of becoming a victim of sexual violence increases with decreasing literacy. In fact, the risk is highest in populations where women are illiterate and decreases gradually as women's education levels increase. Research in the US indicates that the prevalence of GBV is highest in areas where women are less educated. There is a significant decrease in the likelihood of GBV for each additional year of education for both victims and perpetrators. Men who perpetrate violence against women have lower literacy rates than their non-violent counterparts (Badurdeen, 2020).

Public awareness on GBV has also contributed to more women reporting cases of GBV to the authorities in the US. The availability of funding for existing organizations and their programs targeted at addressing Gender Based Violence also influences its prevalence. The government has allocated funds towards the implementation of Gender Based Violence programs. However, it is not enough given the vastness of the problem. There is need for increased allocation by both government and other donors to ensure that adequate services are provided to victims and potential victims of GBV with a view to eliminating it altogether. Additionally, many people in Kenya have come out to speak about their experiences with GBV to encourage others to seek help. There are also activists who have gone out to educate young girls on their rights and how they can report incidences of violence against them. These actions have had noteworthy positive effects on victims' willingness to report cases of violence against them (Muluneh, et al., 2020).

The relationship between education and gender-based violence (GBV) is complex. GBV can be both a cause and consequence of women's limited access to and participation in education. Poor and uneducated girls are more likely to become GBV victims. After marriage however, educated women are less likely to be beaten by their husbands provided they have other resources available to them (Morrison, et al, 2007). Higher levels of education among girls and women have also been shown to reduce the risk of premarital sexual violence. The risk of sexual violence before marriage is higher in areas where there are fewer educated girls and young women among the population. Education levels of both victims and perpetrators play an important role in determining the prevalence and risk for GBV in developing countries like Kenya (Rieger, et al., 2023). Public awareness of GBV is critical in changing societal attitude towards GBV.

The various media houses have played a significant role in raising awareness on GBV through their various media platforms. For example, the daily talk shows and debates on television, radio and newspapers have created an avenue for people to participate in the discussion and bring out their views on gender (Edwards, et al, 2021). This has been important in demystifying gender stereotypes and myths on women, which is responsible for GBV. Public awareness has also led to increased sensitization campaigns from both public and private sectors. The Government has developed a multi-sectoral policy framework to combat sexual violence, through the National Gender and Equality Commission (NGEC) in collaboration with other government agencies to develop programs that reduce sexual violence against women and children (Muluneh et al., 2020).

2.3: Research Gap

An analysis of the GBV situation in Kenya shows that religion is one of the contributing and enabling factors to GBV. While the literature has provided nuances on how religion might increase the prevalence of GBV, there is no literature on rural communities like the Kuria. Furthermore, the authors haven't indicated how religion can be used to reduce GBV in Kenya. Women and girls who are economically dependent on their partners or families find it very difficult to leave violent relationships because they have no access to resources or anywhere else to go (Chaudhuri, 2018). While dependency has been proven to have a very strong correlation with GBV, there is no evidence on the Kenyan context. Indeed, various cultural practices like FGM, child marriages, and wife inheritance can be causal factors for GBV. Furthermore, various other cultural practices promote GBV. However, this is a narrow description of the vice in the Kuria community.

The authors reviewed have not indicated the specific cultural practice contributing to GBV, without acknowledging the positive impact of community spirit and African values in promoting security for all members of the community. Literacy has been shown to have a direct impact on GBV prevalence rates. The authors reviewed do not however indicate how literacy levels continue to affect GBV prevalence rates in 2023. This study sought to fill in these gaps.

CHAPTER THREE

METHODOLOGY

This chapter describes the research design that was used in the study, target population, sample size and sampling procedure. In addition, the chapter describes the research instruments, data collection procedure, validity and reliability, data analysis techniques that were used in the study and finally the ethical issues encountered and dealt with in the research.

3.1: Research Design

The study adopted a mixed method which involved survey and fact-finding inquiry. A sequential exploratory design was found to be appropriate because of its specific nature, thus facilitating understanding and interpretation of the problem. Nayak and Singh, (2021) indicate that an exploratory sequential design is a mixed methods study design, where the quantitative phase of data collection and analysis follows the qualitative phase of data collection and analysis. This design allowed the researcher to seek elaboration, enhancement, illustration, and clarification of results. Mixed design helps in fact findings and formation of important principles of knowledge and solution to significant problems through analysis, measurement, classification, comparison, and interpretation of data.

3.1.2: Descriptive Survey Research Design

According to Kothari (2018), a descriptive research design is defined as a process of collecting data to test hypothesis or to answer questions concerning the status of the subject in the study. In this case descriptive survey research design was adopted. This was suitable because it attempted to describe the nature, behavior, influence, and what factors contribute to the study. The research design also sought views and feelings from the clients regarding the factors that would influence the research. The researcher used quantitative research by analyzing numerical data for statistical analysis, while qualitative research involved collecting data for exploratory purposes or for finding common themes. It involved collecting and analyzing qualitative and quantitative data to understand a phenomenon better and answer the research questions.

3.2: Sampling Frame

The study was conducted in Kuria East sub-county, of Migori County. Migori County in located in the former Nyanza Province in western parts of Kenya. The Kuria community was been selected due to its documented high prevalence of Gender-Based Violence (GBV). The decision to study Kuria East could be motivated by the desire to address regional disparities. Western Kenya, including Nyanza Province, has been identified as a hotspot for GBV cases in the country. By focusing on Kuria East, the study could provide valuable insights into GBV prevalence within a distinct community, contributing to a more comprehensive understanding of the issue on a regional level. The sub-county has 4 wards including Bukira East, Getambwega, Getong'anya, and Gokeharaka. The sub-county has an altitude of 1,400m above sea level, with undulating hills and a few stretches of flat land. It has a population of 93,229 people as per the 2019 census. The Kuria

people are predominantly a pastoral and farming community, who now grow maize, beans and cassava as food crops and coffee, tobacco, and maize as cash crops. Kuria's are mostly of Christian faith, with a few still practicing African religious practices and some other few being Muslims. The Kuria people have various customs. Some of them include circumcision for both sexes. The Kuria also have an unusual marriage custom where two women can be married, so that a woman who cannot have her own children can still have a family. Polygamy was common until recently, the only barrier being a man's wealth.

3.3: Study Population and Target Population

A target population is a group of individuals or participants having specific attributes of interest and relevance for the research of which the research data are to make inferences. The study population refers to the specific group of individuals from which data is collected, analyzed, and studied to draw conclusions and make inferences. This is the group of people who are directly involved in the research process and whose characteristics, behaviors, or experiences the researcher aims to understand.

On the other hand, the target population is the larger group of individuals to which the research findings are intended to be generalized or applied. It represents the broader group that the researcher wants to draw conclusions about based on the study's results. The target population is the larger context or population to which the study's findings are meant to be relevant (Asiamah et. al., 2018). This is the population for which the findings of the study can be generalised. This is the entire group of people, individuals or objects the researcher has chosen to study. This is the

group of people to whom the study results applied. The study population comprised people who meet the operational definition of the target population, according to Vonk (2019).

The population of Kuria East sub-county from the last Census data released by the Kenya National Bureau of Statistics 2020 show was at 96,872 people, with 46,969 being male 49,894 being female. A target population is generally a large collection of individuals or objects that is the focus of scientific query (Patten et. al., 2018). Usually, the description of the population and the common binding characteristic of its members are similar. For this study, the target population included community leaders, health care providers, rescue centers, pre-selected women, and girls as well as administration officers while the study population shall be a representative of all the groups.

3.4: Sample and Sampling Techniques

The sample is a representative of the population, and it allows inferences derived from the sample to be made back to the population of interest (Halperin, et al., 2020). The study employed stratified random sampling, whereby population of women and girls was divided into homogenous subgroups and simple random samples taken from each sub-group. The researcher then used the Yamane sample formula to come up with a sample size.

Yamane Formula; n = N/(1+N(e)2, Margin of Error= 0.05

The total population in Kuria East= 96,872 people

n=96,872 / [1+96,872 x 0.05^2] ***Therefore*** *n=96,872 / [1+96,872 x 0.0025]*

n=96,872 / [1+242.18] ***Therefore*** *n=96,872 /243.18*

*n=398.355 (approximately **400** respondents).*

Therefore, a sample size of 400 respondents out of the entire population of 96,872 respondents would be the lowest acceptable number at a 95% confidence level with a 5% margin of error.

The number of respondents for every category was; women and girls *(49,894 /96,872) x 400 = 206.*

Extrapolating that the remaining have equal chance of representation.

=400-206= 194

Sampling is a procedure that was applied by the researcher to gather people, places, or things to study. This is a process of selecting some people or objects from a population such that the selected group contains elements representative of the characteristics found in the entire group. Sampling is technique, process, or design of statistically selecting a representative sample of individuals from the population of interest. It is an important tool in research because the population of interest usually has too many individuals for a research project (Majid, 2018).

There are two main categories of sampling; one is probability like simple random sampling, systematic random sampling, stratified random sampling, cluster random sampling and multi-stage random sampling. The other is non-probability like purposive sampling, snowball sampling, convenience sampling and quota sampling. This study applied both purposive sampling and simple random sampling methods. Simple random sampling was preferred for large chunks of the data because ensures that every individual or element in the population has an equal chance of being included in the sample.

This probability-based approach increases the likelihood of obtaining a sample that accurately represents the entire population. As a result, the findings derived from the sample are more likely to be generalizable to the larger population, enhancing the external validity of the study. Also it helps to minimize selection bias. Since each member of the population has an equal chance of being selected, the sample is less likely to be skewed towards a particular subgroup or characteristic. This reduces the risk of introducing bias into the study, ensuring that the sample is a fair and unbiased representation of the population.

Purposive was used to get the necessary information required by the researcher from hospitals, health care centres, and rehabilitation centres like Mabera Health Centre, Akidiva Hospital and Migori County Referral Hospital in Kuria East. The Kuria community inhabit four wards, geographically sub-divided by IEBC namely, Kegonga, Komosoko, Kombe, and Maeta. Simple Random Sampling (SRS) was carried out to give each respondent an equal chance of participation.

Sampling Frame

Table 1

Sample Size

Category	Target Population	Sample Size	Sampling Techniques
Women and Girls	49, 894	206	Simple Random
Administration Officers	100	48.5	Purposive
Community Elders	100	48.5	Purposive
Health Service Providers	100	48.5	Purposive
Rescue Centers	100	48.5	Purposive

TOTAL	**50, 294**	**400**

Source: Field Data (2023)

3.5: Tools of Data Collection

This study employed the use of both secondary and primary data. Secondary data was collected using literature related to the topic of study. Primary data was collected using questionnaires and interviews (in-depth and direct).

3.5.1: Questionnaires

Open and closed ended questionnaires were used to collect quantitative data as well as with health care workers, administration officials, and in rescue centers. They were chosen because they offer a fast, efficient, and inexpensive means of gathering large amounts of information from sizeable sample volumes.

They also prove quite effective for measuring subject behavior, preferences, intentions, attitudes, and opinions. The provision for information to be gathered from large samples and diverse regions saves time, upholds confidentiality, and eliminates interviewer bias, (Nayak and Singh, 2021).

3.5.2: Interviews

In-depth interviews provide much more detailed information than what is available through other data collection methods. In-depth interviews are useful when people want detailed information about a person's thoughts and behaviors or want to explore new issues in depth. They were used to collect qualitative data especially from the survivors of GBV and other important respondents

such as hospital attendants, administration officials, and community leaders. Interviews are often used to provide context to data such as outcomes, offering a more complete picture of what happened in the program and why (Alston and Bowles, 2020). This study employed in-depth interviews with various respondents to collect qualitative data on the phenomena and to provide in-depth understanding of the issues and factors therein, nuances, and their thoughts on GBV.

An interview is a qualitative research technique which involves asking open-ended questions to converse with respondents and collect elicit data about a subject. This survey method is utilized when a specific target population is involved. Conducting a personal interview survey helps explore people's responses and gather more and deeper information (Halperin, et al., 2020). The researcher used this data collection tool for collection of detailed information about research questions. Moreover, with this type of primary data collection, the researcher has direct control over the process flow, and they have a chance to clarify certain issues during the process if needed.

The study used direct interviews to allow the researcher to explain, better understand, and explore research subjects' opinions, behavior, experiences, and phenomenon, since they have open-ended questions to aid the collection of in-depth information.

3.6: Validity and Reliability

Reliability and validity are concepts used to evaluate the quality of research. They indicate how well a method or technique measures something. Reliability is about the consistency of a measure, and validity is about the accuracy of a measure. The purpose of establishing reliability and validity in research is essentially to ensure that data are sound and replicable, and the results are accurate.

The evidence of validity and reliability are prerequisites to assure the integrity and quality of a measurement instrument (Nayak and Singh, 2021).

3.6.1: Validity

Validity is the extent to which an instrument measures what it is supposed to measure and performs as it is designed to perform. It also refers to the appropriateness of the contents of the instrument. Validity of tests is vital for the results to be accurately applied and interpreted. This study research sought to measure what it claims to measure to ensure validity of discussions and conclusions drawn from the study. The validity of a study is the quality that makes it believable, and bears witness to the thoroughness that was exercised. It includes their objectives and logical consistency between its parts (Halperin, et al., 2020). Instrument validity was ascertained by experts (a supervisor and a lecturer at the University) and rated per item in question relative to the study objectives and only rated questionnaire items were used for data collection.

In preparation for this study, the researcher underwent prior training sessions on various aspects of the research. The researcher ensured systematic validity by conducting the Key Informant Interviews. The researcher also ensured content validity by involving experts in the field to review the research instruments and ensure that they comprehensively cover the relevant aspects of socio-economic factors and GBV in the Kuria community. To establish criterion validity, the researcher compared the results of the study's measurements with established measurements or benchmarks related to GBV or socio-economic factors. Validity was further achieved through result comparison across various instruments by CUEA supervisors following the interpretation criterion to ensure the data is credible, transferable, dependable, and conformable.

3.6.2: Reliability

Reliability refers to how consistently a method measures something. If the same result can be consistently achieved by using the same methods under the same circumstances, the measurement is considered reliable. It is therefore the extent to which these tools are consistent, while validity is the accuracy of a data collection tool-whether it measures what is supposed to measure (Alston and Bowles, 2020). To measure interrater reliability, the researcher conducted the same measurement or observation on the same sample then calculated the correlation between their different sets of results.

If all the researchers give similar ratings, the test has high interrater reliability. Further, by applying the mixed method approach, the data collection tools that were employed supplemented each other, thus improving data reliability. Further, data was collected from diverse sources as indicated in the sampling frame followed by the corroboration and triangulation of data. To assess reliability, the researcher employed the test-retest method. This involves administering the instrument to the same group of respondents on two separate occasions. The consistency of their responses over time indicated the reliability of the measurement. To further establish the reliability of the data collection tools, internal consistency techniques were further employed.

3.6.3: Pilot Testing

To determine the reliability, the researcher sought to pre-test the items in the questionnaires with 5% of respondents, whereby for those items the respondents give similar answers to, for the same items; those items shall be used in the study. To control quality, the researcher sought to appraise the validity and reliability of the instruments and improved on them. The main aim sought to make

necessary adjustments to the research instruments before rolling out the research, which helps gauge the reactions of the target population and equally to help the researcher in allocation of resources like time. The pilot results were insightful in revising both the questionnaires and the interview schedules in efforts to ensure the study objectives were captured and similar results elicited. Furthermore, evidence from empirical literature provided a clear definition of key operational terms consistently used in this research study.

3.7: Data Analysis Procedures

The data collected from the study was then fed into the computer and analyzed. It was further coded and arranged in an orderly manner by use of tables to later be analyzed quantitatively and qualitatively. Data analysis procedures were guided by The Data protection Act of Kenya (2019). In analyzing the data, the study adopted descriptive statistics by using statistical Package for Social Sciences (SPSS) V. 27. The software package enabled the analysis of the data into percentages, means and standard deviations, (Halperin, et al., 2020). It also included the scrutinization of the acquired information while making inferences and uncovering underlying structures, extracting important variables, and testing underlying assumptions.

The qualitative data was analyzed thematically through reading of transcripts, annotations, as well as conceptualizing and segmenting the data. The segments were then analyzed, and results written.

The findings were then presented using frequency distribution tables, graphs, and charts. In contrast, quantitative data was analyzed using descriptive and inferential statistics. To quantify the strength of the relationship between the variables, the study used Karl Pearson's coefficient of variation. The Pearson coefficient was then used to indicate one on one association between each

of the independent variables to the dependent variable. Multiple was also used to analyze the relationship between a single dependent variable and several independent variables. According to Kellehear, (2020), the linear regression assumption ought to be met by the data analyzed. The assumptions state that the coefficients ought to be linear in nature, response errors follow the Gaussian Distribution and that errors ought to have a common distribution. The resulting coefficient of determination ®, helped determine the goodness of fit.

3.8 Ethical Considerations

The researcher made several ethical considerations and committed to being bound by them. The researcher sought authority from CUEA and acquired a NACOSTI permit to conduct research. The researcher also obtained consent from the children care givers to interview them. The study also considered the principle of informed consent which is the major ethical issue in conducting research. Furthermore, the study upheld the principle of beneficence including the professional mandate to do effective and significant research to better serve and promote the welfare of society. The study made sure to observe other ethical considerations like anonymity, confidentiality, and protection of vulnerable groups. Further, to add knowledge, the findings shall be published as policy briefs in national journals or presented in workshops.

CHAPTER FOUR

RESULTS AND DISCUSSION

4.1: Introduction

This section covers the presentation of field survey data, focusing on the effect of socioeconomic factors on the prevalence of GBV in Kuria Community, Kuria East sub-county in Migori County. The participants in the study were selected residents drawn from cadres including community administration officials, community elders, healthcare providers, rescue Centers care, personnel, and ordinary community men, women, and girls. This study involved two parts which featured; a general questionnaire with both closed and open-ended questions, and the second part the interview schedule which was handed to key informants who were well-versed about GBV and intimate partner violence.

4.2 Response Rate

A total of 400 respondents were sampled to take part in the study. From this, a total of 294 participants returned the questionnaires in time for data analysis, representing a 74% response rate. According to Saunders and Bezzina (2015), a response rate of 60% and above is good enough to give a good outcome in field surveys, whereas a response rate of 70% and above is excellent in presenting a reliable illustration of the facts on the ground. The respondents were instructed to carefully review each question and provide responses based on their experiences and observations.

Table 2

Response Rate

Response	Frequency	Percentage
Responded	294	74%
Not Responded	106	26%
Total	**400**	**100%**

Source: Field Data (2023)

The results in ***Table 2*** highlight the response rate at 74%, therefore N = 294. The study also undertook Key Informant Interviews, where 34 participants offered their contributions to the discussion on social factors and the prevalence of GBV in Kuria East sub-county. Therefore, for Key Informant Interviews (KII) data, N=34. It is worth noting that the study utilized thematic analysis to analyze all the data from both open-ended questions, and responses for the KII data.

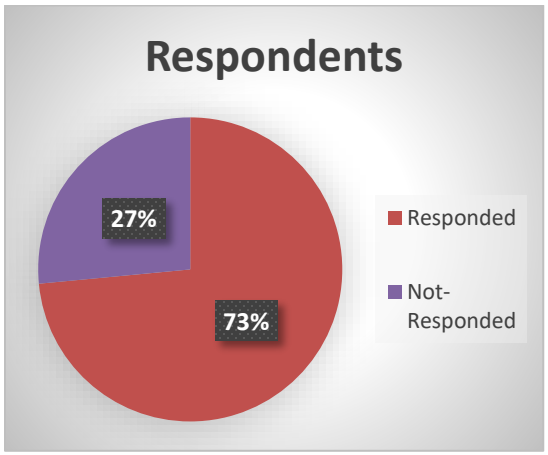

Figure 2: ***Respondents***

Source: Field Data (2023)

4.3: Respondents' Demographic Data

This section provides a representation of the demographic details of the respondents.

4.3.1: Demographic Distribution of Respondents by Gender and Duration of Stay in Kuria East

The data in ***Table 3*** shows the distribution of respondents by gender and their duration of stay in Kuria East sub-county, computed in frequencies and percentages.

Table 3

Respondents' Gender and Duration of Stay in Kuria East Sub-County

*Instruction to respondents: Please provide your gender and duration of stay

Demographic	**Category**	**Feedback**	
		Frequency	**Percentage**
Gender	Male	56	19.0%
	Female	238	81.0%
Duration of stay in Kuria East sub-county, Migori	Less than 2 years	13	4.4%
	2 – 5 years	36	12.2%
	6 – 9 years	80	27.2%
	10 years and above	165	56.1%

Source: Field Data (2023)

Results in ***Table 3*** show the distribution of respondents by gender and duration of stay in Kuria East sub-county. In gender demographic, majority of the respondents, 238 (81%) were female, whereas 56 (19.0%) of the respondents were male. Significant participation by the female gender offers deeper insight into issues surrounding GBV despite both genders being the focus here. study. As regards the demographic distribution by the duration of localization regarding their period of residence in Kuria East sub-county, a majority of 165 (56.1%) of the respondents indicated that they have lived in Kuria East for a period of 10 years, and above. 80 (27.2%) of respondents also indicated having resided in Kuria East for 6 – 9 years, and 36 (12.2%) of the respondents indicated having lived in Kuria East for 2-5 years. Finally, 13 (4.5%) of the respondents indicated having lived in Migori for a period of less than 2 years.

The study, therefore, establishes that significant populations have lived in Kuria for a substantial period, to have gained an understanding of the social issues bedeviling the region.

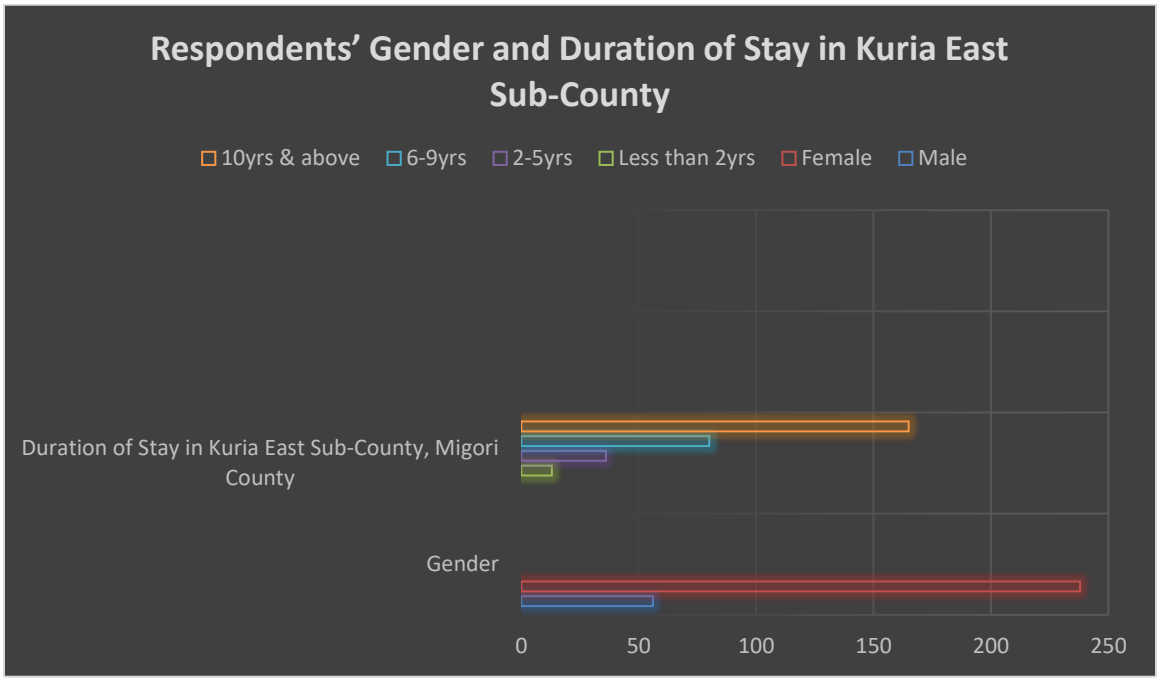

Figure 3: ***Respondents Gender and Duration of Stay***

Source: Field Data (2023)

4.3.2: Respondents' Demographic Distribution by Age

The data in ***Figure 4*** highlights the distribution of respondents by age and is computed in frequencies and percentages.

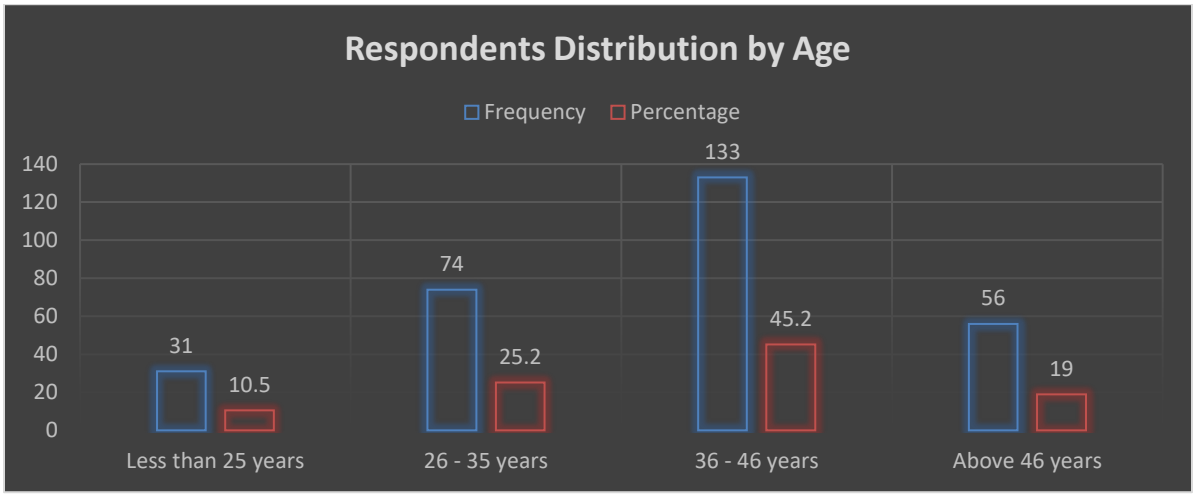

Figure 4: ***Respondents Age Group***

Source: Field Data (2023)

Results in ***Figure 4*** show that majority 133 (45.2%) of respondents fall under the 36 – 46 years' age bracket therefore establishing that a significant portion of participants about social factors and prevalence of GBV is above middle age, which implies a substantial level of insight and experience on the subject matter. Further, 74 (25.2%) of respondents indicated to be in age-group 26-35 years, 56 (19%) of respondents indicated to be above 46 years and finally 31 (10.5%) of the respondents indicated to be less than 25 years in age.

The study also established the existence of diversity in age demographics across Kuria East. This offers a wealth of perspectives regarding understanding the dynamics surrounding the subject of GBV.

4.3.3: Respondents' Demographic Distribution by Interest Group

The study identified 5 groups of interest in the Kuria community who have direct insight into the subject of GBV. ***Figure 5*** shows data collected from these groups, and then computed in frequencies and percentages.

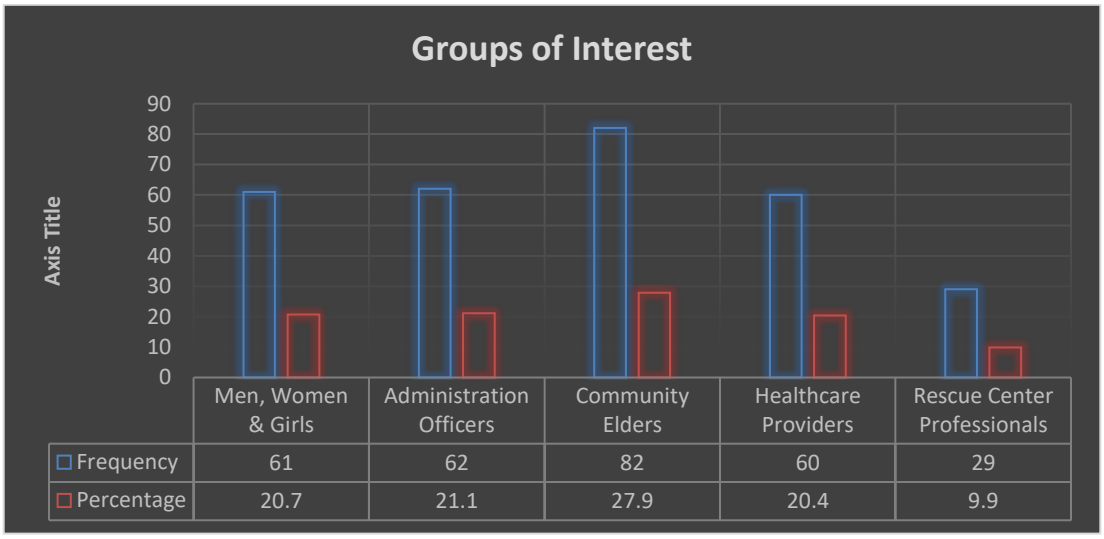

Figure 5: ***Respondent's Groups of Interest***

Source: Field Data (2023)

The results in ***Figure 5*** show that a majority of 82 (27.9%) respondents are community elders and that 62 (21.1%) of respondents indicated to be administration officers, while 61 (20.7%) of respondents represented men, women, and girls. 60 (20.4%) of the respondents were healthcare providers. Finally, 29 (9.9%) of the respondents were 'Rescue Center' professionals.

The diversity in professional distribution offers rich perspectives on socioeconomic factors and the prevalence of GBV.

4.3.4: Respondents' Distribution by Education Level

The study identified education attainment as a critical element as regards GBV. The data in ***Figure 6*** presents the distribution of respondents by education attainment which is represented using frequencies and percentages.

*Instruction to respondents: Please provide your education level

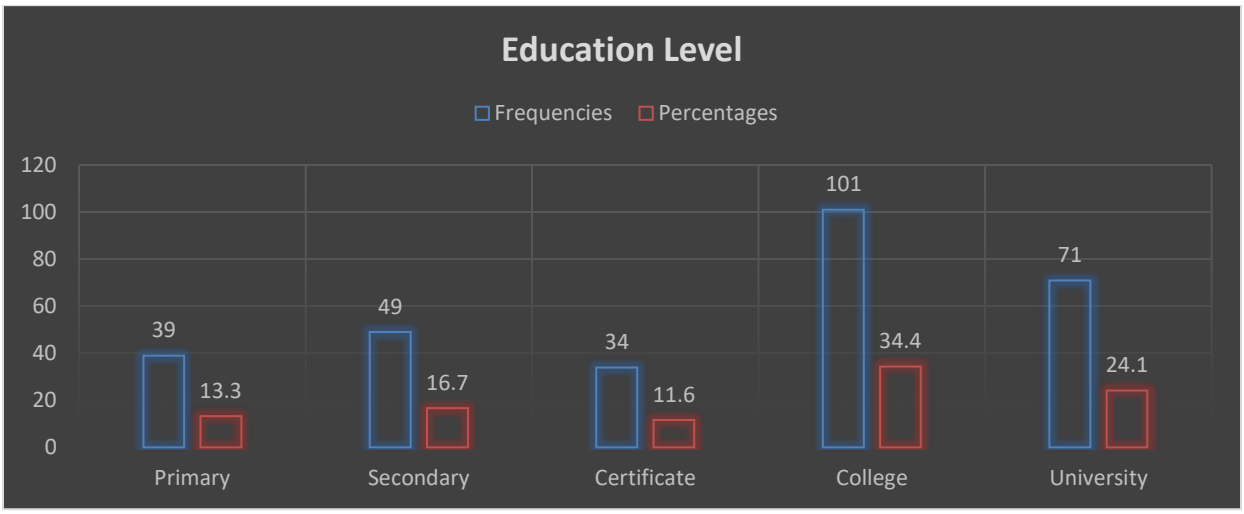

Figure 6: ***Education Level***

Source: Field Data (2023)

The above results highlight the distribution of respondents by academic attainment. Majority of the respondents, 101 (34.4%) indicated to have attained a college education while 71 (24.1%) of the respondents indicated to have attained a university education.

49 (16.7%) of respondents indicated to have attained secondary education while 39 (13.3%) of respondents indicated to have attained primary school education and finally, 34 (11.6%) of the respondents indicated to have attained certificated training.

The study establishes the existence of moderate levels of academic attainment across Kuria East sub-county. Equally, there exists a proportion of community members who have high academic attainment, implying moderate to high level of literacy levels within Kuria East sub-county.

4.4: Socio-Economic Factors and the Prevalence of Gender-Based Violence

The study purposed to determine the effects of socioeconomic factors notably; religion, economic dependency, cultural practices, and literacy levels on the prevalence of GBV in Kuria East by employing both closed and open-ended questionnaires to capture respondents' feedback as below.

4.4.1: Religion and Prevalence of Gender-Based Violence

Table 4

Religion and GBV Prevalence

Questions on Religion	**Response**	**Feedback**	
		Frequency	**Percentage**
Do scriptural teachings affect the prevalence of GBV against women, and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?	Yes	122	41.5%
	No	172	58.5%
	Yes	135	45.9

Do religious norms affect the prevalence of GBV against women, and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?	No	159	54.1%
To what extent does religion influence the prevalence of GBV against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?	Very Much	50	17%
	Moderate	114	38.8%
	Very Little Effect	130	44.2%

Source: Field Data (2023)

The first objective sought to examine the effect of religion on the prevalence of GBV. The computed results in ***Table 4*** highlight the respondents' feedback on the influence of religion on the prevalence of GBV. The results in ***Table 4*** indicate that majority of the respondents; 172 (58.5%) submitted that scriptural religious teaching did NOT affect the prevalence of GBV against women, and girls in Kuria community in Kuria East sub-county.

In contrast, 122 (41.5%) of the respondents agreed that religious scriptural teachings contributed to the prevalence of GBV amongst women, and girls in Kuria East. The findings were in secondment with (Nkaabu, 2019) who suggested that religious norms provide justification for violence against women since men are deemed a superior authority to their female counterparts. Nkaabu (2019) also pointed out that religion promotes submission of women through its teachings thus contributing to GBV enablement.

On the question of religious norms, most of the respondents 159 (54.1%) submitted that religious norms did not impact the prevalence of GBV against women and girls in Kuria East. In a contrary

opinion, 135 (45.9%) of the respondents were convinced that religious norms wielded an effect on the prevalence of gender-based violence against women and girls in Kuria East Sub County. Regarding the extent of influence, several respondents, 130 (44.2%) submitted that religion had very little effect on the prevalence of gender-based violence. In addition, 114 (38.8%) of the respondents responded that religion had a moderate effect on the prevalence of GBV.

A total of 50 (17%) of the respondents were convinced that religion had a very high influence on the prevalence of GBV among girls, women, and men. The study establishes the existence of views within Kuria East on the role of religious factors, including norms and scriptural teachings. Further, the study establishes the existence of deniability amongst a significant portion of community members on the extent to which religion plays a part in enabling the GBV.

These findings were also in agreement that religious norms provide justification for violence against women since men are deemed a superior authority (Rono, 2023). Fry et.al, (2019) also suggests that Christian theology justifies male dominance and female subordination society, a statement that is also in agreement with these findings. The results computed in ***Table 5*** represent respondents' views on the ways through which religion can increase awareness of GBV to reduce its prevalence in Kuria East sub-county.

Table 5

Methods for Religion Interventions on GBV Awareness

Religious Driven Interventions	**Frequency**	**Percentage**
Increasing frequency of religion centers driven awareness campaigns centering on discussions amongst congregants on issues of GBV	40	13.6%

Hosting workshops in religion centers where experts are invited to teach the locals about GBV	80	27.2%
Religious leaders and centers create a platform in which victims of GBV can come out and share their experiences for community enlightenment and healing.	81	27.6%
Religious leaders pursue the establishment of community-based platforms for cooperation with grassroots leaders to tackle GBV.	56	19.0%
Establishment of recovery centers within religious centers which can be utilized as shelters for rescuing GBV victims and provided with counseling services and access programs for economic development	37	12.6%
TOTAL	**294**	**100.0%**

Source: Field Data (2023)

4.4.2: Economic Dependency and Prevalence of GBV

The second objective of the study was to determine the influence of the economic dependency factor on the prevalence of GBV in women, and girls residing in Kuria East sub-county. Respondents' feedback on the economic dependency factor in ***Table 6***, computed in frequencies and means.

Table 6

Economic Dependency and Prevalence of GBV

	Response	**Feedback**

Questions on Economic Dependency & the Prevalence of GBV		Frequency	Percentage
Do family economic resources and their distribution between the partners affect the prevalence of GBV in the Kuria Community in Kuria East sub-county, Migori County?	Yes	146	49.7%
	No	148	50.3%
Does family wealth affect the prevalence of GBV against women and girls in the Kuria Community in Kuria East sub-county, Migori County, Kenya?	Yes	147	50%
	No	147	50%
To what magnitude of economic dependency and family economic resources affect the prevalence of GBV against women and girls	High Effect	160	54.4%
	Moderate Effects	107	36.4%
	Low Effect	27	9.2%

Source: Field Data (2023)

The results in ***Table 6*** represent respondents' views on the influence of economic dependency on the prevalence of GBV. On the question of economic resources distribution amongst partners, a total of 148 (50.3%) of the respondents were convinced that it contributed to the prevalence of gender-based violence against women and girls in Kuria East. In contrast, 146 (49.7%) were convinced that the distribution of resources amongst partners contributed to the prevalence of GBV.

On the question of family wealth and its effect on the prevalence of GBV, there was a tie of 50% (147 respondents) for those who agreed that family wealth impacted the prevalence of GBV against another 50% of the respondents who were of the contrary opinion that family wealth did not influence the prevalence of GBV. The study thus establishes the existence of mixed opinions across Kuria East sub-county on the role of family wealth in enabling the prevalence of GBV. This implies that dependents who are in abusive relationships with partners who have access to family wealth are less committed to relieving their pain if they have financial security.

These statements and findings were in secondment with Satyen et.al, (2018) who noted with concern that economically dependent women on their spouses increase their vulnerability to violence. To add on, Wirtz et. al, (2018) posits that economic dependency on the GBV perpetrator reduces the likelihood of reporting violence for fear of losing survival necessities. The results in ***Table 6*** also present respondents' views on the influence of economic dependency and family resources on the prevalence of gender-based violence. This answers the question: *"To what magnitude do economic dependency and family economic resources affect the prevalence of GBV against women, and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?"* Most respondents, 160 (54.4%) were convinced that economic dependency highly affects the prevalence of GBV among the Kuria Community.

Further, 107 (36.4%) believed that economic dependence and family resources wield a moderate effect on the prevalence of GBV, whereas a marginal 27 (9.2%) of the respondents believed economic dependence and family resources wield low effect on the prevalence of GBV. The study establishes that the state of economic resources that are held in a family and those serving as

benefactors influence the state of GBV prevalence implying that, economic inequality contributes to extending GBV prevalence if the perpetrators are economic benefactors of victims.

The data computed in ***Table 7*** represents a thematic analysis of respondents' views on the relationship between economic dependency and the prevalence of GBV.

Table 7

Views on Economic Dependency and GBV Prevalence

Magnitude of Economic Dependency and GBV Prevalence	**Frequency**	**Percentage**
Economic dependency makes it difficult for GBV victims to quit abusive relationships as they are fully reliant on their abusers for economic wellbeing	51	17.3%
In a GBV situation where cohabiting partners have young children and are economically dependent on the perpetrator, the GBV victim often chooses to endure violence to secure their children's future.	104	35.4%
GBV victims who are cohabiting with their abusers have limited options in situations where the abuser is the sole economic well-being provider	34	11.6%
GBV victims who are solely reliant on financial and economic support from their abusers often harbor hopes in the future thus making them endure abuse.	48	16.3%
GBV victims who are independent of their abusers, harbor feelings of shame and fear for starting a new life where	57	19.4%

they must struggle on their own to survive any financial hurdles thus opting to endure the abuse in the long term.		
Total	294	100.0%

Source: Field Data (2023)

The results from the above present respondents' views on the views of economic dependency and family resources on the prevalence of GBV.

A majority of the respondents, 104 (35.4%) were of the opinion that: "*In a GBV situation where cohabiting partners have young children and are economically dependent on the perpetrator, the GBV victim often chooses to endure the violence so as to preserve their children's economic security.*" 57 (19.4%) of the respondents opined that: "*GBV victims who are independent of their abusers harbor feelings of shame and fear for starting a new life where they have to struggle on their own finances to survive thus opting to endure the abuse in long term.*"

A total of 51 (17.3%) of the respondents believed: *"Economic dependency makes it difficult for GBV victims to quit abusive relationships as they are fully reliant on their abusers for economic wellbeing."* This study findings were in endorsement with Erez and Harper (2018) who posited that the link between poverty and domestic violence has been well established in studies of community samples from the US, UK, Canada, Australia, and New Zealand.

Further, 48 (16.3%) of the respondents believed: "*GBV victims who are solely reliant financial and economic well-being on their abusers often harbor hopes in the future thus making them endure the abuse.*" Finally, 34 (11.6%) of the respondents submitted that: "*GBV victims who are cohabiting with their abusers have limited options in situations where the abuser is the sole economic provider.*" The study further establishes that there exist diverse perspectives on the role

of financial security in relationships in cases of economic dependency and exposure to partner and gender violence.

The study also views the aspect of intimate partner violence as more prevalent in relationships where abusers are largely the sole providers. These statements and findings aligned with previous findings from Dlamini (2021) who suggested that in the US & Europe, GBV is occasioned by economic dependency on men due to a lack of economic resources, decreased opportunities for education and employment, and other factors limiting women's independence. Further, on wealth distribution, the gender pay gap suggests that women earn less, therefore, translating to increased vulnerability to abuse (McIlwaine, 2013). This further suggested that a low income is positively related to physical and psychological abuse toward spouses.

4.4.3: Cultural Practices and Prevalence of Gender-Based Violence

The third objective of this study was to determine the role of cultural practices on the prevalence of GBV. The data computed in ***Table 8*** tabulates respondents' views on the role that cultural practices play in perpetuating GBV.

Table 8

Cultural Practices and Gender-Based Violence

Cultural Practices and the Prevalence of GBV among the Kuria Community, Kuria East sub-county, Migori County, Kenya	**Response**	**Feedback**	
		Frequency	**Percentage**
	Yes	192	65.3%

Do Kuria cultural practices like FGM, child marriages, wife inheritance, and wife battery, influence the prevalence of GBV	No	102	34.7%
Does the Kuria culture affect the prevalence of GBV?	Yes	92	31.3%
	No	202	68.7%
To what extent do cultural practices affect the prevalence of GBV?	Very Much	58	19.7%
	Moderate	120	40.8%
	Very Little Effect	116	39.5%

Source: Field Data (2023)

The findings in ***Table 8*** highlight respondents' feedback on the question of the relation between cultural practices and GBV. On the question of cultural practices presently and their role in prevalence of GBV, a total of 192 (65.3%) respondents agreed that; yes, cultural practices such as FGM, child marriages, wife inheritance, and wife battery have contributed towards the prevalence of violence against women and girls in Kuria East community. Further, 102 (34.7%) of the respondents were of the contrary opinions that; No, cultural practices including FGM, child marriages, wife inheritance, and wife battery did not contribute to the prevalence of GBV against women, and girls in Kuria East. The study therefore establishes that there is increasing agreement across the Kuria Community that acts such as FGM, child marriages, wife inheritance, and wife battery just to name a few are acts of violence against men, women, and girls. Subsequently, this implies an increased understanding of GBV that has been passed off as socio-cultural events and activities.

The study is upheld by literature reviews from Ethiopia, Mali, and Niger, suggesting that girls are often forced into marriage from the young age of 12 years since they are seen as property and thus

can be exchanged for cattle or other goods by their owners (Djamba and Kimuna, 2019). FGM/C is also experienced among the Maasai, Kalenjin, Kisii, Turkana, and Kuria. On the question of Kuria culture and its effect in enabling prevalence of GBV, a significant majority of the respondents, 202 (68.7%) believed Kuria culture overall doesn't enable prevalence of GBV in their localities. 91 respondents, (31.3%) however took an affirmative position, agreeing that Kuria culture exacerbated the prevalence of GBV. The study establishes that significant members of the Kuria community have embraced norms and ways of life that define the Kuria tradition and are mostly not considered as violence against women.

To add on, african men are believed to exercise dominance by believing that it is within their right to discipline their spouses and children (Ali et. al, 2018). Specific acts of violent engagements such as intimate partner violence are widely abhorred by the majority. In addition, when the study sought to assess the level of effect on GBV perpetuated by culture among the Kuria people, several of the respondents, 40.8%, submitted that culture moderately impacts on GBV prevalence in Kuria. Further, 116 (39.5%) of the respondents opined that Kuria culture wielded very little effect on the prevalence of GBV, whereas 58 (19.7%) of the respondents took a negative stance. It can be deduced that a majority of Kuria East inhabitants support their cultural foundation, which they distance from violent abuse in partner relationships implying that portions of Kuria culture still enjoy significant community support.

Table 9

Community Approaches to Promote Human Rights and end GBV

Respondents Views on Community Measures to Promote Human Rights and Eliminate GBV	**Frequency**	**Percentage**

Conducting community-based sensitization programs aimed at creating awareness on the scourge of GBV in communities, with objectives of eliminating it in the long-term	51	17.3%
Incorporating GBV in a syllabus that can be shared with the general public in community engagement forums to teach young adults on GBV, its effects and the need to instill awareness and create empowerment against it for future generations.	86	29.3%
Supporting legal and policy reforms aimed at injecting interventions for breaking the cycle of GBV in families and marriage institutions	81	27.6%
Introducing a series of community driven workshops to discuss GBV, with objectives of enlightening the community and mass on GBV.	76	25.9%
Total	**294**	**100.0%**

Source: Field Data (2023)

The results in ***Table 9*** presents respondents' perceptions how culture can be utilized to promote human rights and protection of men, women, and girls, thus reducing GBV.

Majority, 86 (29.3%) opined that; "*Creation of syllabus on GBV that can be shared to the public in community engagement forums to teach young adults on the subject of GBV and its effects with objective of instilling awareness and empowerment against GBV for future generation*". Also, 81 (27.6%) of the respondents were of the opinion; "*Supporting legal and policy reforms aimed at injecting interventions for breaking the cycle of GBV in families and institution of marriage*".

Further, 76 respondents proposed; "*Introducing series of community driven workshops to discuss GBV with objectives to enlighten the community and mass on the subject of GBV*". Finally, 17.3%

of the respondents recommended; "*Conducting community-based sensitization programs aimed at creating awareness on the scourge of GBV in communities with objectives of eliminating it in the long-term*". Overall, this study establishes that consensus exists within Kuria community on the direction in which cultural activities ought to be aligned in efforts to curtail the existence of cultural practices that perpetuate gender-based violence. The statements and findings were in secondment with Buttia (2015) who suggested the need to increase community awareness of cultural practices propagating GBV.

4.4.4: Literacy Levels and the Prevalence of Gender-Based Violence

The final objective of this study was to determine the effect of literacy levels on the prevalence of GBV. The data in table 10 highlights computation of respondent's opinions on connection between literacy and prevalence of GBV.

Table 10

Literacy Levels and the Prevalence of GBV

Questions on Literacy Levels and the Prevalence of GBV.	**Response**	**Feedback**	
		Frequency	**Percentage**
Does the level of education affect the prevalence of GBV against men, women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?	Yes	142	48.3%
	No	152	51.7%
Does the level of public awareness of GBV affect the prevalence of GBV against women and girls in the Kuria Community	Yes	147	50%
	No	147	50%

in Kuria East Sub County, Migori County, Kenya?			
Are most members of the Kuria community in Kuria East aware that GBV is wrong and harmful to men, women and girls?	Yes	190	64.6%
	No	104	35.4%
To what extent does literacy and public awareness levels as well GBV men, against women and girls among the Kuria community	Very much	80	27.2%
	Moderate	119	40.5%
	Very little Effect	95	32.3%

Source: Field Data (2023)

The results in ***Table 10*** shows respondents' feedback about literacy levels and its effect on the prevalence of GBV. On the question of education level, a slight majority 15 (51.7%) of the respondents rejected the notion that; education levels affect the prevalence of GBV against women, and girls in the Kuria Community. In contrast, 142 (48.3%) of the respondents suggested that the level of education wielded an effect on the prevalence of GBV Study establishes present understanding on the minimal role that education plays in enabling or reducing GBV among the Kuria people. This implies that there is little impact of education in moderating the present state of GBV affairs in Kuria East. This was strengthened by Erez and harper (2018) who suggested that in US-based studies, educated and economically empowered women are less likely to be part of GBV statistics.

Regarding public awareness, there was a tie of 50% where 147 respondents agreed, and another 147 respondents disagreed that; level of public awareness of GBV affect the prevalence of GBV

against women and girls in the Kuria Community. The study establishes that presently, there is neutral position regarding the role of education in mediating the prevalence of GBV.

Regarding the level of community awareness and its impact on GBV, many of the respondents 190 (64.6%) opined that they understood GBV is wrong and harmful to women and girls. Magige (2020) pointed out that FGM limits girl child education in Kuria West Sub County due to its adverse effects. However in contrary position, 104 (35.4%) of the respondents believed that GBV wasn't harmful to girls and women. The study establishes that, substantial population in Kuria East is well furnished with information on the harmful effects of GBV. This implies growing perception on the danger of GBV on the future of women and girls in Kuria East. Badurdeen (2020) suggests that most GBV perpetrators have lower literacy levels.

This study findings also suggested the same on the element of literacy level and the prevalence of GBV, in that a substantial number of respondents, 119 (40.5%) held a moderate view that literacy and public awareness levels and cultural practices wield an effect on prevalence of GBV against women and girls among Kuria communities. Whereas 95 (32.3%) of respondents submitted that literacy and public awareness levels and cultural practices wield an effect on prevalence of GBV against women and girls to a very little effect. Finally, 80 (27.2%) of the respondents believed that literacy level, public awareness levels and cultural practices wield an effect on prevalence of GBV against women and girls. The study makes a finding that literacy levels at present haven't reflected on the reduction of GBV in Kuria community. This implies cultural position on social issues is presently superior to literacy level.

The results in ***Table 11*** highlight respondents' feedback on the role of literacy levels and the prevalence of GBV in Kuria East sub-county.

Table 11

Local Administration on Boosting Literacy Levels to Reduce GBV

Views on ways Local Administration Helps Bolster Literacy Levels to Counter the GBV Menace	Frequency	Percentage
Cooperating with grassroots organizers to enlighten entire community on GBV	49	16.7%
Create a support system for GBV victims where they can be counseled and given guidance in overcoming abusive relationship for a fulfilling wellbeing	51	17.3%
Supporting the prosecution of perpetrators of GBV through offering of legal assistance and psychosocial support	81	27.6%
Creating mechanisms for community surveillance to rescue GBV victims trapped cohabiting intimate partner relationships	68	23.1%
Undertake rigorous measures to counter primitive cultural practices that tolerate GBV in cohabiting partners, marriages, family and intimate partner relationships.	45	15.3%
Total	**294**	**100.0%**

Source: Field Data (2023)

The submissions in ***Table 11*** highlight respondents' views on how the local administration can optimize literacy levels towards countering GBV. Most of the respondents, 81 (27.6%) of the respondents submitted that; "*Local administration to support the prosecution of perpetrators of GBV through offering of legal assistance and psychosocial support*". Also, 68 (23.1%) of the respondents suggested; "*Creating mechanisms for community surveillance to rescue GBV victims trapped cohabiting intimate partner relationships*".

Further, 51 (17.3%) proposed the "*Creation of support system for GBV victims where they can be counseled and given guidance in overcoming abusive relationships for a fulfilling wellbeing*".

Additionally, 49 (16.7%) proposed; "*Cooperation between local administration with grassroots organizers to enlighten entire community on GBV*".

Finally, 45 (15.3%) of the respondents recommended that "*For local administration to undertake rigorous measures to counter primitive cultural practices that tolerate GBV in cohabiting partners, marriages, family and intimate partner relationships*". The study therefore establishes that a significant portion of Kuria East residents propose reforms as regards enhancing literacy levels within the community implying that existing systems for literacy enhancement are yet to address the aspect of GBV, thus imperative for reforms to be instituted.

Table 12

Correlation between Social Factors and the Prevalence of GBV

Correlations						
		Religion	**Economic Dependency**	**Cultural Practices**	**Literacy Levels**	**Prevalence of GBV**
Religion	Pearson Correlation	1				
	Sig. (2-tailed)					
	N	294				
Economic Dependency	Pearson Correlation	.035	1			
	Sig. (2-tailed)	.553				
	N	294	294			
Cultural Practices	Pearson Correlation	.017	-.002	1		
	Sig. (2-tailed)	.766	.976			
	N	294	294	294		
Literacy Levels	Pearson Correlation	.210	.023	.091	1	
	Sig. (2-tailed)	.000	.693	.119		
	N	294	294	294	294	
Prevalence of GBV	Pearson Correlation	.575	.541	.436	.618	1
	Sig. (2-tailed)	.000				
	N	294	294	294	294	294

Source: Field Data (2023)

The results in ***Table 12*** highlight the correlation analysis between social factors; notably religion, economic dependency, cultural practices, and literacy levels on the prevalence of GBV in Kuria East. The study establishes that; Religion and prevalence of GBV records a strong positive correlation, $R = 0.575$ ($P = 0.000$, $p < 0.05$). Also, economic dependency and prevalence of GBV

records, R = 0.541 (P = 0.000, P <0.05) which imply existence of high correlation between economic dependency and prevalence of GBV.

In addition, cultural practices versus prevalence of GBV recorded; R=0.436 (P=0.000, P < 0.05) which indicated moderate correlation between cultural practices and GBV. Finally, literacy level versus prevalence of GBV, records; R = 0.618 (P = 0.000, P< 0.05), which indicates a strong positive correlation between literacy levels and prevalence of GBV. The results imply existence of association between religion factor, economic dependency, cultural practices, literacy levels and the prevalence of GBV in Kuria East Sub-County

4.6: Key Informant Interviews on Social Factors and Prevalence of GBV

The study utilized the interview guide to gain further insight of key informants in the study about social factors and prevalence of GBV in Kuria-East. The respondents were asked a series of thirteen questions spanning across the four dependent variables (religion, literacy levels, economic dependency, and culture) and the independent variable (prevalence of GBV), to paint a clear picture of the GBV situation in Kuria East sub-county, Migori County.

Question one sought respondents' feedback on their understanding of gender-based violence and contracted to thematic statements in ***Table 13***.

Table 13

What is *GBV by Informants?*

What is GBV	Frequency	Percentage
Violence against those who are weak and can't defend themselves due to age, body size, financial dependency, and gender	14	41.2%

Violence or harassment meted out to women and girls	12	35.3%
Violence or hurtful actions at home by benefactors to their dependents	8	23.5%
Total	**34**	**100%**

Regarding understanding GBV, 14 informants responded that they understood GBV as; *"Violence against those who are weak and can't defend themselves due to age, body size, financial dependency and gender".* Further, 12 responded that, GBV is; "*Violence or harassment meted out to women and girls*." Finally, 8 of informants suggested that they understood GBV as; "Violence or hurtful actions at home by benefactors to their dependents". The study therefore proves that the informants had some level of knowledge on what GBV is.

The second question sought to gain insight on how the informants understood GBV.

Table 14

Understanding Gender-Based Violence in General

How do you understand GBV?	**Frequency**	**Percentage**
Any form of violence meted to people of opposite gender in public, private and domestic spaces	21	61.8%
Aggressive acts towards women and girls in their home or even outside in public and workspaces	13	38.2%
Total	**34**	**100.0%**

Source: Field Data (2023)

As regards understanding GBV, 21 informants explained that, they understood gender-based violence as; "*Any form of violence meted to people of opposite gender in public, private and domestic spaces*". 13 informants explained their understanding of GBV as; "*Aggressive acts towards women and girls in their home or even outside in public and workspaces*". This also proves that indeed, the informants understood GBV from a general perspective.

Question 3 sought to gain insight on any experiences of GBV within Kuria East as tabulated in Table 15.

Table 15

Experience of GBV in Kuria East

Experiences with GBV within Kuria	**Frequency**	**Percentage**
Cases of wife battery in cohabiting couples and partners	15	44.1%
Girls and women facing sexual aggression in form of violent advances in private, public and domestic spaces	11	32.4%
Cases of parents using excessive violence as punishment for misdeeds to their children and claim to instill discipline	8	23.5%
Total	**34**	**100.0%**

Source: Field Data (2023)

On the question of past experiences for the key informants, 15 informants explained that they have encountered; "*Cases of wife battery in cohabiting couples and partners*". Also, 11 informants noted they have experienced GBV inform of; "*girls and women facing sexual aggression in form of violent advances in private, public and domestic spaces*". Finally, 8 informants noted their experience with GBV as; "*Cases of parents using excessive violence as punishment for misdeeds*

to their children and claim to instill discipline". The data therefore suggests that all informants have encountered either one form of violence or another thus proving the prevalence of GBV further.

The fourth question sought to determine prevalence of GBV in Kuria East. See Table 16.

Table 16

Prevalence Rates of GBV

GBV prevalence in Kuria East	Frequency	Percentage
They are very high but not reported as in many cases victims of GBV live in fear	16	47.1%
They are very high but there does not exist any channel for reporting them	12	35.3%
They are moderate	6	17.6%
Total	**34**	**100.0%**

Source: Field Data (2023)

As regards the informants' views on GBV prevalence, a number of the key informants, 16 were of the opinion that, cases of gender-based violence are; "*They are very high but not reported as in many cases victims of GBV live in fear*."

Also, 12 informants submitted that cases of gender-based violence; "*They are very high but there does not exist any channels for reporting them"*, whereas 6 informants opined that gender-based violence cases were "*moderate*". The study therefore reveals high prevalence of GBV citing fear among victims. It further implies the need to put in place proper reporting channels.

The fifth question sought to determine common causes of GBV in Kuria East sub-county.

Table 17

Prevalence Rates of GBV

Common Causes and Contributing Factors to GBV	Frequency	Percentage
Disagreements amongst cohabiting partners resulting from domestic quarrels such as duties and responsibilities, finances, arrogant attitude, and overall domineering persona	14	41.2%
Patriarchal system in the traditional African society that conditions men enforce domestic authority through actions which are violent	12	35.3%
Absence of deterrence to GBV which has made it continue to happen as perpetrators are emboldened due to lack of consequences	8	23.5%
Total	**34**	**100.0%**

Source: Field Data (2023)

When queried on their perspectives on the causes and contributing factors of GBV in Kuria East, 14 informants submitted that the leading cause of GBV was; "*Disagreements amongst cohabiting partners resulting from domestic quarrels such as duties and responsibilities, finances, arrogant attitude and an overall domineering persona*." 12 other informants submitted that, GBV is caused by; "*Patriarchal system in the traditional African society that conditions men enforce domestic authority through actions which are violent*".

Finally, 8 informants opined that; "*Absence of deterrence to GBV which has made it continue to happen as perpetrators are emboldened due to lack of consequences*". Is the common cause and contributing factor of GBV?

The sixth question sought to determine whether Kuria Community is religious or not.

Table 18

Religion in Kuria Community

The Level of Religious Fellowship among the Kuria Community	Frequency	Percentage
The Kuria community is hugely a conservative religious society with Christianity faith enjoying bigger fellowship in comparison to other religion.	24	66.6%
Not really, as cultural practices supersede religious believes within the Kuria traditional society	10	29.4%
Total	**34**	**100.0%**

Source: Field Data (2023)

When asked about religiousness across Kuria community, 24 informants submitted that; "*The Kuria community is hugely a conservative religious society with Christianity faith enjoying bigger fellowship in comparison to other religion*". In contrast, 10 informants presented an alternative submission, rejecting religiousness in Kuria community, saying; "*cultural practices supersede religious beliefs within the Kuria traditional society*".

The seventh question sought to establish parallels between religion and prevalence of GBV in Kuria East, as tabulated in Table 19.

Table 19

Religion and Prevalence of GBV

Does religion influence prevalence of GBV	Frequency	Percentage
Yes, religious practices require cohabiting partners work out through their problems even when violence is involved	16	47.1%
Not much, as religious leaders condemn violence of any form whether in domestic spaces, public spaces or in private spaces	12	35.3%
A substantial portion of religious establishment take a neutral position in matters of domestic conflicts even in situation of violence	6	17.6%
Total	**34**	**100.0%**

Source: Field Data (2023)

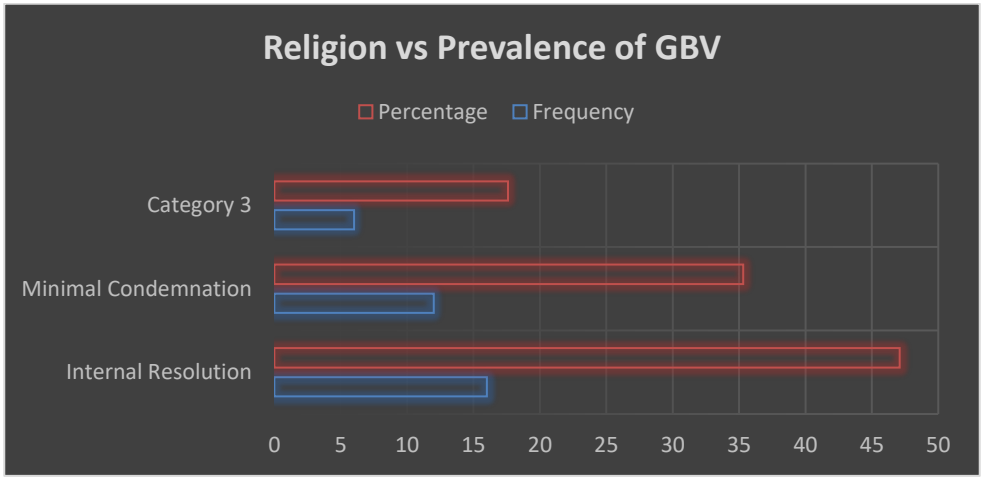

Figure 7: *Religion vs Prevalence of GBV*

Source: Field Data (2023)

As regards religion and the prevalence of gender-based violence, 16 informants submitted that; "*Yes, religious practices require cohabiting partners work out through their problems even when violence is involved*". Further, 12 informants' perspective on religion influence on prevalence of GBV submitted that; "*Not much, as religious leaders condemn violence of any form whether in domestic spaces, public spaces or in private spaces*". Also, 6 informants were of the view that "*a*

substantial portion of religious establishment take a neutral position in matters of domestic conflicts even in situations of violence". Religion therefore comes out as a grey area, not clear on whether it is a problem and a solution.

Question number eight examined the underlying power dynamics between men and women in the Kuria Community.

Table 20

Men and Women Power Dynamics

Status of Men and Women Power Dynamics	Frequency	Percentage
Women understand that men are authority at home and have the duty to submit to the family leadership hierarchy	13	38.2%
Men have authority in running their homes as they wish without question.	11	32.4%
Kuria community still maintains patriarchal system which places men above women.	10	29.4%
Total	**34**	**100.0%**

Source: Field Data (2023)

On the question of power dynamics between men and women, 13 informants submitted that; "*Women understand that men are authority at home and have the duty to submit to the family leadership hierarchy*". In addition, 11 informants conceded that; "*Men have authority in running their homes as they wish without question*". Finally, 10 of the informants opined that; "*Kuria community still maintains patriarchal system which places men above women*". It is quite evident

from the data collected that the patriarchal system is still a major deterrent to curtailing the GBV menace among the Kuria community owing to how men have been profiled as the superior gender.

The ninth question sought respondent's insights on family income and economic capacity on prevalence of violence in Kuria East.

Table 21

Family Income and Economic Capacity on Prevalence of GBV

Family Income and Economic Capacity on Prevalence of GBV	Frequency	Percentage
Cases where the benefactor is violent, dependents often endure the abuse as they are rendered powerless from fear of losing financial support and present comfort	14	41.2%
In marriages where women are housewives with children, even when faced with assault, violence, and abuse by their husbands, in most cases they opt to overlook the scenario and chose to stay for the financial support and economic certainty for their children	11	32.3%
Wealthy perpetrators often have their way when charged in courts of law as they use wealth to corrupt the criminal justice system and disregard repercussions for their actions	9	26.5%
Total	**34**	**100.0%**

Source: Field Data (2023)

On the question of family income and economic capacity and prevalence of GBV, 14 informants submitted that; "*In cases where benefactor is violent, the dependents have to endure the violence and abuse as are powerless to fight back due fear of losing financial support and present comfort*".

Further, 11 informants submitted that; "*In marriages where women are housewives with children, even when faced with assault, violence and abuse by their husbands, in most cases they opt to overlook the scenario and chose to stay for the financial support and economic certainty for their children*".

Finally, 9 informants submitted that; "*Individuals who are wealthy and violent towards women, they often have their way when charged in courts of law as they use wealth in the corrupt criminal justice system to defeat justice, thus never care about repercussions for their actions as they can always get away with it, thus continuing cycle of violence*". From the data, economic dependency still has deep running roots in the GBV situation of Kuria East sub-county.

The tenth question examined major cultural practices and norms that have perpetuated the scourge of GBV in Kuria East.

Table 22

Cultural Practices Perpetuating GBV

Cultural Practices Contributing to GBV in Kuria	**Frequency**	**Percentage**
Wife inheritance	12	35.3%
Commercialization of bride-price, which gives impression of treating women like commodities, which in turn exposes them to	12	35.3%

vulnerabilities of abuse when cohabiting with violent and disrespectful husbands and partners		
Patriarchal system where men are hierarchically placed higher than women, thus reserving the right of offering guidance and direction with leeway to even employ violence and abuse	10	29.4%
Total	**34**	**100.0%**

Source: Field Data (2023)

On cultural practices contributing to the prevalence of GBV, 12 informants were convinced that wife inheritance was the leading practice contributing to GBV. Another, 12 informants submitted that; "*Commercialization of bride-price gives the impression that women are like commodities, which in turn exposes them to vulnerabilities of abuse when cohabiting with violent and disrespectful partners.*"

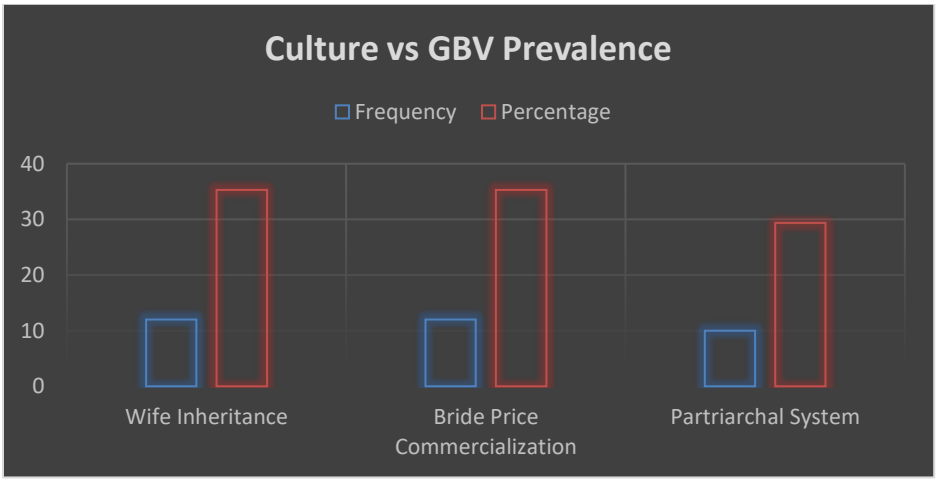

Figure 8: ***Culture vs. GBV Prevalence***

Source: Field Data (2023)

Finally, 10 informants opined that; "*Patriarchal system where men are hierarchically placed higher than women, thus reserving the right of offering guidance and direction with leeway to even*

employ violence and abuse". The data shows a consensus in responses regarding various cultural practices contributing to GBV prevalence.

The eleventh question explored the aspect of literacy levels amongst partners.

Table 23

Literacy Levels of Partners and GBV

Do Literacy Levels Influence the Prevalence of GBV	Frequency	Percentage
Yes, because women and girls who are not literate have no power or capacity to air their grievances when abused, assaulted, or exposed to intimate partner violence	9	26.5%
Not really, as numerous cases exist where educated men are still carrying out acts of abuse against their cohabiting partners and wives, aggressive against workmates and abusive to strangers in public.	25	73.5%
Total	34	100.0%

Source: Field Data (2023)

On the influence of partner literacy levels on prevalence of GBV, 25 informants submitted that; "*Not really, as numerous cases exist where educated men are still carrying out acts of abuse against their cohabiting partners and wives, aggressive against workmates and abusive to strangers in public*". Additionally, 9 informants submitted that; "*Not really, as numerous cases exist where educated men are still carrying out acts of abuse against their cohabiting partners and wives, aggressive against workmates and abusive to strangers in public*".

The twelfth question sought to gauge the level of awareness of community on the consequences of gender-based violence to women and girls.

Table 24

Community Awareness on Consequences of GBV

Is the Society Aware that GBV is hurtful	Frequency	Percentage
Yes, there is increase in condemnation of gender-based violence, Intimate partner violence in relationships and marriages in society due to rise in extreme harm to victims and even deaths reported caused by abuse and domestic violence and reported across media increasing awareness on the dangers of GBV.	14	41.2%
Yes, there is increase in number of men who are now condemning GBV.	11	32.4%
Yes, parents and relatives of GBV victims are joining in condemning all forms of GBV in society	5	14.7%
Yes, there is increased efforts towards prosecution of perpetrators of GBV due to injuries sustained by their victims which are leading to legal redress.	4	11.8%
Total	**34**	**100.0%**

On whether the community is aware of how GBV victims get hurt by the violence, 14 informants explained that; "*Yes, there is increase in condemnation of gender-based violence, Intimate partner violence in relationships and marriages in society due to rise in extreme harm to victims and even*

deaths reported caused by abuse and domestic violence and reported across media increasing awareness on the dangers of GBV". Also, 11 informants submitted that; "*Yes, there is increase in number of men who are now condemning GBV*". Further, 5 informants opined that; "*Yes, parents and relatives of GBV victims are joining in condemning all forms of GBV in society*". Finally, 4 of informants submitted that; "*Yes, there is increased efforts towards prosecution of perpetrators of GBV due to injuries sustained by their victims who are leading to legal redress*". This proves that there are increased concerted efforts towards condemning GBV from the community level.

The final question sought to determine where GBV victims reported their tribulations and how local administration, and community supported them.

Table 25

Reporting GBV cases and Support for Victims

Where victims report and community support offered	Frequency	Percentage
Most victims report abuse to their parents, siblings, or close relatives where they opt for dialogue and arbitration to resolve circumstances leading to violence	12	35.3%
Some victims of GBV report their encounters to religious leaders, who in turn offer counsel and guidance to overcoming differences causing conflicts and violence in relationships	10	29.4%

Some victims of GBV report to local administrators such as chiefs and sub-chiefs who also take initiatives to counsel and caution perpetrators against repeating such acts.	8	23.5%
Few victims take legal action by reporting to police and pursue redress through the courts of law.	4	11.8%
Total	**34**	**100.0%**

Source: Field Data (2023)

About where GBV victims report their cases and support they get from community and local administration, 12 of the informants submitted that; "*Most victims report abuse to their parents, siblings or close relatives where they opt for dialogue and arbitration to resolve circumstances leading to violence*".



Figure 9: ***Reporting GBV Cases***

Source: Field Data (2023)

In addition, 10 informants submitted that; "*Some victims of GBV report their encounters to religious leaders, who in turn offer counsel and guidance to overcoming differences causing conflicts and violence in relationships*". Furthermore, 8 informants opined that; "*Some victims of GBV report to local administrators such as chiefs and sub-chiefs who also take initiatives to counsel and caution perpetrators against repeating such acts*." Finally, 4 informants explained that; "*Few victims take legal action by reporting to police and pursue redress through the courts of law*". This opines that there is no defined reporting structure for GBV cases.

4.7: Discussion of Findings

The study aimed to investigate the impact of socioeconomic factors on the prevalence of Gender-Based Violence (GBV) within the Kuria Community, specifically focusing on Kuria East sub-county in Migori County. The participants in the study were drawn from diverse backgrounds, including community administration officials, community elders, healthcare providers, personnel from rescue centers, and ordinary community members including men, women, and girls. The study achieved a commendable response rate of 74%, with 56% of the respondents being male and 44% female.

In terms of demographic distribution, a notable majority of respondents (81%) were female, while 19% were male. The age distribution indicated that a significant portion (45.2%) fell within the age bracket of 36 to 46 years, implying a substantial level of insight and experience regarding the subject matter. Additionally, community elders constituted the largest group (27.9%), followed by administration officers (20.7%), and representation from women and girls (20.7%). Respondents' education levels were varied, with 34.4% having college education, 24.1% university education,

16.7% secondary education, 13.3% primary school education, and 11.6% having undergone certified training.

Findings regarding the influence of socioeconomic factors on the prevalence of GBV revealed noteworthy insights. While a majority (58.5%) of respondents indicated that scriptural religious teachings did not impact GBV prevalence against women and girls in Kuria community, the data demonstrated a more equivocal sentiment regarding religious norms, with 54.1% of respondents suggesting that religious norms did not significantly affect GBV prevalence in Kuria East.

Regarding economic resources distribution among partners, a substantial portion (50.3%) of respondents believed that it indeed contributed to the prevalence of gender-based violence against women and girls in Kuria East. The impact of cultural practices on GBV prevalence was evident, as 65.3% of respondents agreed that practices such as Female Genital Mutilation (FGM), child marriages, wife inheritance, and wife battery played a role in perpetuating violence against women and girls within the Kuria East community.

However, a slight majority (51.7%) of respondents rejected the notion that education levels significantly affected the prevalence of GBV against women and girls in the Kuria Community. Similarly, public awareness appeared to be a topic of divided opinion, with an equal number of respondents (50%) agreeing and disagreeing about the level of public awareness influencing GBV prevalence.

Overall, the findings underscore the complex interplay of religion, culture, literacy, and economic dependency in shaping the prevalence of GBV within the Kuria community. While certain factors may hold stronger influence than others, the study highlights the need for comprehensive and

targeted interventions that address these multifaceted contributors. By acknowledging the significance of these factors, policymakers and stakeholders can develop more effective strategies to combat GBV and promote a safer environment for women and girls within the Kuria Community.

4.8: Chapter Summary

While the government continues to show commitment towards ending GBV nationally, it is also evident from the study that over-reliance on international leadership and funding deters and limits efforts towards GBV prevention in significant measure. Weak local commitment, poor accountability systems, and limited engagement with the GBV victims compromise prevention measures.

Despite advanced global commitments geared towards curbing GBV, it is sadly still very under-resourced thus, as evidenced here, an analysis that can be used to guide future research. This paper explored, in depth, the consequences of socio-economic factors on the prevalence of GBV among the Kuria community. The findings herein magnified from many different perspectives the importance of combating GBV, particularly through legal redress by reinforcing legislations and protective reforms against GBV. Giving the vulnerable a voice gives them decision making power more-so because silence stifles transformation.

Our results also show that GBV is mostly prevalent among women and girls with a small percentage of men too. Feedback from most of the respondents suggested the need for inclusive engagement and coordination to mitigate associated risks. While specialist services remain insufficient, expansion opportunities are available, untapped, and underutilized. The study

recommends the implementation of a GBV information management system seeking to reinforce service provision and multi-sectoral coordination as well with the long-term impact of sustainability in mind. An information management system ought to enable all reported GBV cases to be collated and available across related sectors. Further recommendations include concerted efforts to strengthen GBV coordination among the county workforce, expanding the inclusion of national actors, as well as investing in GBV prevention and risk mitigation through proper funding.

CHAPTER FIVE

CONCLUSIONS

5.1: Introduction

This section of the study covers a summary of findings, conclusions, recommendations, study limitations and suggestions for further studies on the effects of socio-economic factors on the prevalence of GBV in Kuria East sub-county, Migori county. The socioeconomic factors examined in this study included religion, economic dependency, cultural practices, and literacy levels on their prevalence of gender-based violence.

5.2: Summary of the Findings

Below is a summary of the findings from the data findings and discussions of chapter four.

5.2.1: The Effect of Religion on the Prevalence of Gender-Based Violence

The themes that came out repeatedly from the study include insufficient intervention, misinformation on religious teachings and intentions as well as enabled continuation of abuse and violence. The study establishes that scriptural religious teachings did not impact GBV prevalence against women and girls in Kuria community, as the data demonstrated a more equivocal sentiment regarding religious norms, with 54.1% of respondents suggesting that religious norms did not significantly affect GBV prevalence in Kuria East.

The findings emphasize the need for a comprehensive understanding of how religious teachings and norms interact with other socio-economic factors to shape the occurrence of GBV. By

recognizing the complexities inherent in this relationship, stakeholders and policymakers can design more effective interventions aimed at addressing the root causes of gender-based violence within the Kuria community.

5.2.2: Effect of Economic Dependency on Prevalence of Gender Based Violence

GBV carries with it a heavy economic toll. This has been proven by this study where low economic power was linked to vulnerability among potential GBV victims. The study made the finding that economic dependency is an enabling factor towards the existence of GBV. Economic instability, family dependency, benefactors and fear were identified as one of the causal factors of dependency on the perpetrator and by extension, contributing significantly to the prevalence of GBV. This study identified that men are in most cases the sole bread winners thus women and girls are just but dependents, making them complacent to GBV for fear of economic instability.

5.2.3: Effect of Cultural Practices on Prevalence of Gender-Based Violence

It was established that some of the cultural practices include wife inheritance, FGM, patriarchy, submission, wife battery, and discipline through violence just to mention a few. As much as some of these traditions are being defaced, patriarchy still seems to be deeply rooted among the Kuria people. Misogyny devalues the female gender. In a nutshell, culture nourishes pride, and the history of a people is recognized as their cultural identities, their DNA.

In all its glory, culture defines powerful spaces where gender roles are enshrined but has also been used to unfortunately justify gender inequality and by extension GBV through evoking backward

traditions like misogyny whose expiration has passed. Pushing back on these cultural identities is not a single day journey or that of the faint-hearted.

5.2.4: Effect of Literacy Levels on Prevalence of Gender-Based Violence

Illiteracy is an enabling factor of GBV as it breeds lack of awareness of GBV and resulting consequences. Illiterate people are often either unable to or are conflicted to seek support for GBV cases. Literacy promotes changes in attitude and mindset towards issues like intimate partner violence. It also increases socio-economic opportunities by empowering GBV survivors and unlocking their potential thus enabling them to scale social economic heights. The study has however proven that literacy levels is a blunt measurement for reducing prevalence therefore there is need to adopt a holistic approach and rightfully so by involving all stakeholders in raising awareness, influencing behavioral practices, and even discouraging against religious or society indoctrination.

From the research study, access to education is not a sufficient measure to eliminate backward societal values. However low literacy levels may lead to reduced awareness of one's rights, diminished empowerment, and an inability to challenge harmful gender norms and power dynamics. It may also may reinforce traditional gender norms and roles that normalize unequal power dynamics and condone GBV. Without exposure to alternative perspectives and critical thinking skills gained through education, individuals may be more likely to perpetuate harmful practices. In Kuria East, this was not adopted as a deliberate policy to reduce gender disparities, but rather to raise awareness levels. The study established a need for recreation and work opportunities to eliminate gender biased discrimination.

Major inequalities persist in socio-economic dispensations like access to employment and credit, inheritance rights, marriage laws. With the help of the community, it was identified that reforms should span across both civil and penal areas, for wider coverage. It is further critical to develop reform agendas placing women at the heart of policy reforms.

5.3: Conclusion

In alignment with the study's objectives, this community-based cross-sectional research delved into the intricate interplay of socio-economic factors and their impact on the prevalence of Gender-Based Violence (GBV) within the Kuria Community of Kuria East Sub County, Migori County. Through a comprehensive analysis of the effects of religion, economic dependency, cultural practices, and literacy levels, the study sought to shed light on the underlying dynamics driving GBV and propose targeted interventions.

The study's findings affirm the objectives of the research, highlighting the multifaceted nature of GBV prevalence in the Kuria Community. By examining the effects of religion, it was revealed that while scriptural teachings did not directly influence GBV prevalence, there existed a nuanced relationship between religious norms and their impact on GBV. Similarly, economic dependency emerged as a significant factor contributing to GBV, with disparities in resource distribution playing a pivotal role.

Cultural practices, including Female Genital Mutilation (FGM), child marriages, wife inheritance, and wife battery, were identified as substantial contributors to GBV within the Kuria Community. This finding resonates with the study's objective to analyze the effects of cultural practices on GBV prevalence. Additionally, the examination of literacy levels and their influence on GBV revealed

a complex narrative, challenging assumptions and indicating the need for a more comprehensive understanding of educational empowerment. The study's conceptual and theoretical framework, rooted in the symbolic interactionism theory and complemented by the conflict theory, provided a solid foundation for exploring the socio-economic factors influencing GBV. The symbolic interactionism theory illuminated the intricate web of gendered power dynamics and cultural interpretations, while the conflict theory uncovered the underlying conflicts and competition for resources that contribute to GBV.

The study's assumptions were largely upheld, as the influence of socio-economic factors on GBV prevalence was evidenced through comprehensive data analysis. The study's findings underscored the importance of addressing GBV through a holistic approach that encompasses legal reforms, community empowerment, awareness campaigns, and targeted interventions. The proposed recommendations align with the research objectives and provide actionable steps to mitigate GBV within the Kuria Community.

In conclusion, this study has contributed to the discourse on GBV prevalence by delving into the unique socio-economic factors shaping its occurrence within the Kuria Community. By understanding the complexities of religion, economic dependency, cultural practices, and literacy levels, stakeholders and policymakers can collaboratively develop and implement effective strategies to eradicate GBV, empower survivors, and foster a safer and more equitable society for women, girls, and marginalized individuals within the Kuria Community.

5.4: Recommendations

After exploring the effects of socio-economic factors on the prevalence of GBV, the study recommended some intervention measures namely:

i. The Ministry of Public Service and Gender, in collaboration with local and international NGOs, should establish and fund community-based empowerment programs that challenge traditional norms and perceptions contributing to GBV. These programs should focus on changing societal mindsets, condemning harmful practices, and encouraging victims to seek help. Grassroots networks should be recognized and supported to ensure a comprehensive approach to addressing GBV.

ii. The Ministry of Interior and Coordination of National Government should enhance the capacity of law enforcement agencies, including the police and prosecution services, to effectively investigate, arrest, and prosecute perpetrators of GBV. This includes conducting regular surveillance and enforcing legal measures to create a deterrent effect.

iii. The Ministry of Devolution and ASAL Areas, in partnership with local communities, should provide comprehensive training, technical assistance, and financial support to strengthen local NGOs and Community-Based Organizations (CBOs) involved in GBV prevention and support. This includes training on child protection, case management, funds management, and reporting frameworks. Corporate Social Responsibility (CSR) initiatives can also be tapped for funding and support.

iv. Religious institutions should collaborate with the Ministry of Education to integrate GBV awareness and condemnation into formal religious teachings. Religious leaders should

actively raise awareness of GBV and the factors enabling it, promoting a culture of respect and gender equality within their congregations.

v. The Ministry of Health, in partnership with relevant stakeholders, should enhance community outreach programs to identify and rescue GBV victims who are trapped in abusive situations. Religious institutions can play an active role in these programs by providing safe spaces and support for victims seeking help.

vi. The Ministry of Environment and Forestry, alongside health and community organizations, should establish initiatives that link environmental governance with health and poverty alleviation efforts. These initiatives can address the socio-economic factors contributing to GBV by providing opportunities for economic growth and empowerment.

vii. The Ministry of Youth and Gender Affairs should create tailored programs that empower youth and women through skills development and economic activities. This promotes financial independence and reduces economic dependency, contributing to a more gender-equitable society.

viii. The Ministry of Public Service and Gender, in collaboration with mental health professionals, should establish recovery and support programs within care centers for GBV survivors. These programs should offer psychosocial support, empowerment training, and resources for survivors to rebuild their lives.

ix. The Ministry of Culture and Heritage should lead efforts to reform national values and cultural practices that enable GBV. Government-led campaigns should promote cultural practices that align with human rights principles, fostering a safe and respectful environment.

x. The Ministry of Education, in partnership with local governments, should allocate resources to boost literacy levels in rural areas. This includes expanding budgetary allocations for capacity development, adult education, and vocational training, contributing to sustainable socio-economic growth.

5.5: Suggestions for Further Studies

This study was centered on the role of socio-economic factors notably; religion, economic dependency, cultural factors, and literacy levels towards the prevalence of GBV in Kuria East. Through this research study, more areas of inquiry were identified, to further enrich the existing knowledge on GBV prevalence, thus the study recommends further studies on:

i. The dynamics in cultural practices perpetuating continuation of GBV in Kuria Community.
ii. The pitfalls in governance policies towards the prevention of GBV in Kenyan traditional society.
iii. The existence of parental care obligation as cultural indoctrination and its contribution to the prevalence of intimate partner violence in cohabiting partners across rural Kenya.
iv. The migration of Tanzanians through fraudulent networks at the Isebania border to perform FGM on their young girls and women, despite it being banned in the country.

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APPENDIX I: QUESTIONNAIRE

Hello, I am a postgraduate student at the Catholic University of Eastern Africa. I am conducting a study on *the socio-economic factors on prevalence of gender-based violence in the Kuria Community in Kuria East Sub County, Migori County, Kenya.* I would like to know your experiences, factual information, and knowledge of the issue prevalence of GBV in Kuria East sub-county and possible ways to reduce the vice. Your participation is entirely voluntary, and your responses are anonymous. Kindly review each question carefully and provide responses based on their experiences and observations. You can skip any questions you are not comfortable with.

Thank you for your participation.

Yours Sincerely,

EUNUKE MORAA BIKUNDO
Admission No: 1039909

CONSENT FORM FOR RESPONDENTS

I hereby agree that I am willfully participating in this study and will give honest feedback to questions posed.

Name: ……. **Sign**: ……

CONSENT FORM FOR GUARDIANS

I hereby give permission as the guardian/parent for the kid under my care to participate in this research.

Guardian: …… **Sign:** …….

PART I: GENERAL INFORMATION

(Tick Appropriately)

1. What is your gender?

   Male ☐ **Female** ☐

2. For how long have you lived in Migori East sub-county?

   Less than 2 Years ☐
   2-5 Years ☐
   6-9 Years ☐
   10 Years and Above ☐

3. What is your age?

   Less than 25 Years ☐ **26-35 Years** ☐
   36-45 Years ☐ **46 Years and Above** ☐

4. Which group do you belong to?

   Women and Girls ☐
   ☐

Administration Officer

Community Elder ☐

Healthcare Provider ☐

Rescue Center Personnel ☐

5. What is your highest level of education?

Primary ☐ **Certificate** ☐

Secondary ☐

College ☐ **University** ☐

PART II A: RELIGION

6. Do scriptural teachings affect the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐ **No** ☐

7. Do religious norms affect the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐ **No** ☐

8. To what extent does religion influence prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Very much ☐

Moderately ☐

Very little effect ☐

9. In what ways, can the community use religion to increase awareness on GBV and reduce its prevalence in the sub-county?

……

……

……

…….

PART II B: ECONOMIC DEPENDENCY

10. Do family economic resources and their distribution between the partners affect the prevalence of gender-based violence in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐

No ☐

11. Does family wealth affect the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐

No ☐

12. To what magnitude does economic dependency and family economic resources affect the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Highly Affects ☐

Moderately Affects ☐

Lowly Affects ☐

Explain;

……

……

……

PART II C: CULTURAL PRACTICES

13. Do Kuria cultural practices like FGM, child marriages, wife inheritance, and wife battery, influence the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐

No ☐

14. Does the Kuria culture affect the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐

No ☐

15. To what extent, do cultural practices affect the prevalence of gender-based violence against women and girls among Kuria communities in Kenya?

Very Much ☐

Moderately So ☐

Low Effect ☐

16. What approaches can the community adopt to use culture to promote human rights and protection of women and girls, thus reducing GBV?

……

……

…….

PART II D: LITERACY LEVELS

17. Does the level of education affect the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐

No ☐

18. Does the level of public awareness of GBV affect the prevalence of gender-based violence against women and girls in the Kuria Community in Kuria East Sub County, Migori County, Kenya?

Yes ☐

No ☐

19. Are most members of the Kuria community in Kuria East aware that GBV is wrong and harmful to women and girls?

Yes ☐

No ☐

20. To what extent, do literacy and public awareness levels and cultural practices affect the prevalence of gender-based violence against women and girls among Kuria communities in Kenya?

Very Much ☐

Moderately So ☐

Low Effect ☐

21. In what ways can the local administration help to improve literacy levels and raise public awareness on GBV?

……

……

PART III: INTERVIEW GUIDE

This interview guide has a list of high-level topics that the researcher plans on covering in the interview with the high-level questions that they want to answer under each topic.

1. Do you understand what GBV is?
2. How do you understand GBV?
3. Do you have any experience on issues of GBV in Kuria East Sub County?
4. Are the prevalence rates of GBV high in Kuria East sub-county?
5. What are the most common causes and contributing factors of GBV in Kuria East sub-county?
6. Is the Kuria community in Kuria East sub-county are religious society?
7. Does religion have any effect of the prevalence of GBV in Kuria East sub-county?
8. Are there power dynamics between men and women/girls in Kuria East sub-county and how do they play out?
9. In what ways do family incomes and the economic capability of both partners affect GBV prevalence?
10. What are the major cultural practices and norms that perpetuate GBV in Kuria East sub-county?

11. Are literacy levels of the partners an issue in GBV and its prevalence?
12. Is the community widely aware that GBV is a crime and hurtful to the victims?
13. Where do victims report and how are they assisted by community leaders and members?

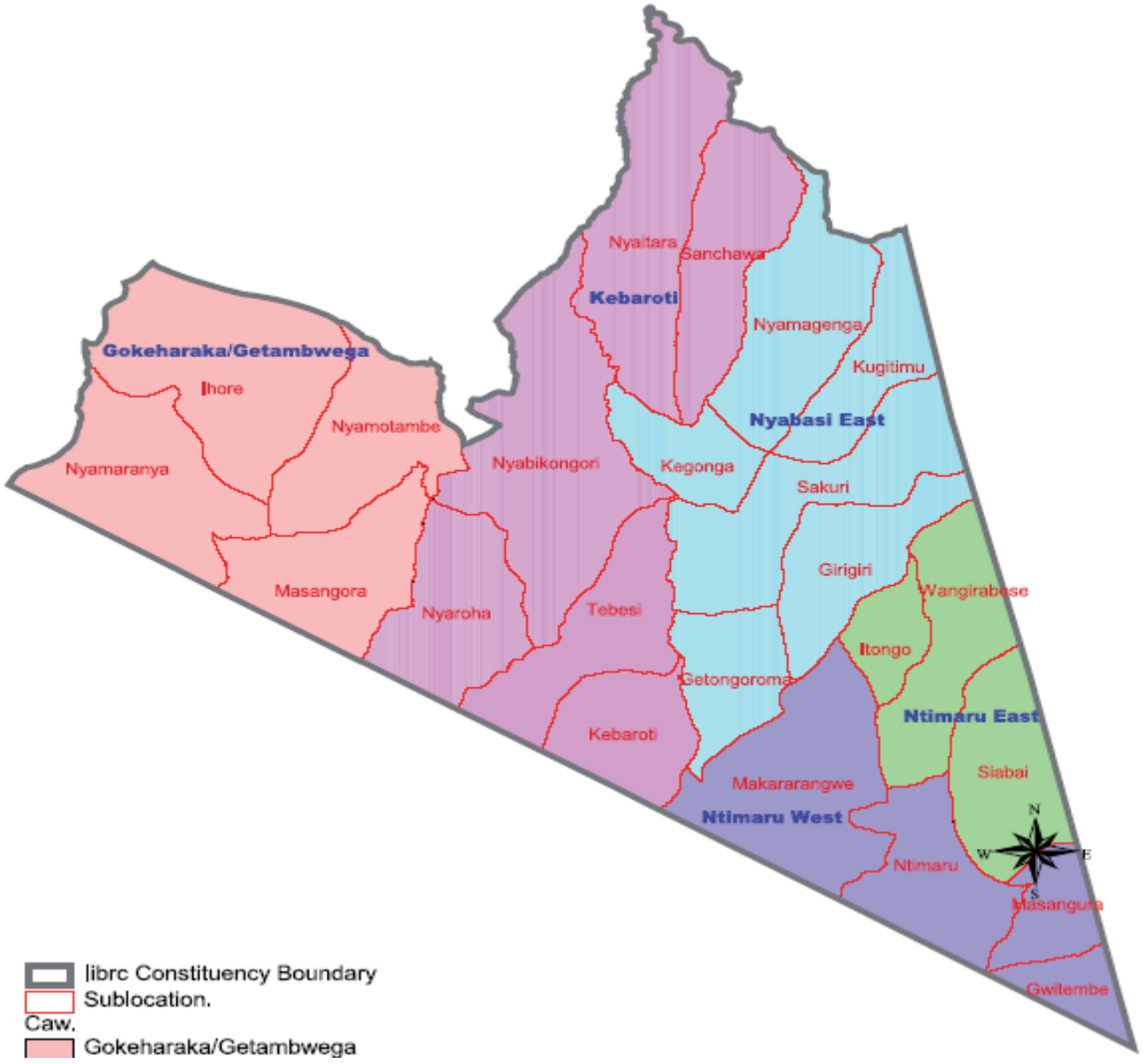
THANKYOU FOR YOUR COOPERATION

APPENDIX III: MIGORI COUNTY AND KURIA EAST SUB-COUNTY

I: MIGORI COUNTY



II: KURIA EAST SUB COUNTY



APPENDIX IV: TIME SCHEDULE

ACTIVITY	Nov 2023	March 2023	April 2023	May 2023
Questionnaires Design and Testing				
Data Collection				
Analyzing Data and Report Writing				
Project Submission				

Source: Author (2023)

APPENDIX V: BUDGET

Item (s)	Unit (s)	Unit Cost (Ksh)	Total Cost (Ksh)
Stationeries and Accessories			
Writing Materials	20	100	2,000
Files & Folders	2	250	500
Internet, Printing and Photocopying Services	3,000	10	30,000
Field Work			
Commuter and Travel	30	1,000	30,000
Research Assistants	7 days	3,000	17,500
Communication with the Respondents:			
Phone Calls	100	70	7,000
Data Analysis and Reporting			
Consultation with a Professional Research Analyst	1	30,000	30,000
Results			
Thesis Production	10	3,000	30,000
Contingencies		15,000	15,000
Grand Total			**Ksh. 162, 000.00**

Source: Author (2023)

APPENDIX VI: NACOSTI RESEARCH LICENCE

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **663545**

Date of Issue: **23/September/2022**

RESEARCH LICENSE



This is to Certify that Ms.. EUNUKE MORAA BIKUNDO of The Catholic University of Eastern Africa has been licensed to conduct research in Migori on the topic: The effect of Socio-Economic factors and Prevalence of Gender-based Violence in the Kuria Community, Kuria East Sub County, Migori County, Kenya for the period ending : 23/September/2023.

License No: **NACOSTI/P/22/20582**

663545

Applicant Identification Number

Director General
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Verification QR Code

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Website: www.nacosti.go.ke

APPENDIX VII: CUEA AUTHORITY LETTER

THE CATHOLIC UNIVERSITY OF EASTERN AFRICA

Faculty of Arts and Social Sciences

Department of Social Sciences and Development Studies

16th September 2022

The Director
National Commission for Science, Technology and Innovation
Box 30623 - 00100
NAIROBI - KENYA

RE: EUNUKE MORAA BIKUNDO **REG. NO. 1039909**

I am writing to introduce to you **Eunuke Moraa Bikundo** who is a finalist student pursuing Masters of Arts in Social Work Degree at The Catholic University of Eastern Africa, Nairobi – Kenya, and to request you to assist her to accomplish her academic research requirements.

Eunuke has completed all course work requirements for this programme. However, every student in the programme is required to conduct research and write a report/thesis submitted during the final years of studies.

Accordingly, Eunuke's research topic has been approved. She will conduct research on the following topic:

> ***"The Effect of Socio-Economic Factors and Prevalence of Gender –based Violence in the Kuria Community, Kuria East Sub County, Migori County, Kenya"***

Thanking you in advance for any assistance given to Eunuke.

Sincerely yours,

Catholic University of Eastern Africa
Head of Department
Social Sciences
P. O. Box 62157 - NAIROBI

Dr. S. Ngacha Njeri, PhD, OFS
Head, Department of Social Sciences and Development Studies

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