PROJECT INITIATIVES AND THE PERSISTENCE OF PHYSICAL PARTNER VIOLENCE AMONG WOMEN IN MARA REGION.

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ABSTRACT

Physical partner violence is a global public health problem and an issue gaining attention worldwide due to the numerous known negative consequences, including injuries that extremely affect women. In Tanzania, almost 2 out of 5 women aged 15 to 49 years have experienced physical violence at some point in their lives. Women who experience physical partner violence show more physical symptoms of poor health, absenteeism at work, and injuries than women who have not been abused. However, there is insufficient information on the associated factors of lifetime physical partner violence among women in the Mara Region. Henceforth, this study is intended to provide the magnitude of lifetime physical partner violence and associated factors among women aged 18 to 49 years in Mara.

Keywords; Physical partner violence, women

BACKGROUND OF THE STUDY:

Physical partner violence is a major public health problem and issue that extremely affects women. Statistics report that 37% of ever partnered women globally have experienced physical violence by a partner in their lifetime (WHO, 2018). The level of physical partner violence in Africa was estimated at approximately 36%, the highest ever recorded worldwide (WHO, 2013).

Physical partner violence is widespread throughout sub-Saharan Africa, with the overall past-year prevalence of 36% exceeding the global average (WHO, 2018). More women in Africa are subject to lifetime physical partner violence (45.6%) than women anywhere in the world, with the notable exception of high-income countries in the case of rape (Abrahams et al., 2013). In the past 15 years, a growing number of population-based surveys of representative samples have improved understanding of the scope and determinants of physical violence on the African continent. Most epidemiological or demographic studies in Africa focus on women as victims and men as perpetrators, although there are some which include both sexes as either victim or perpetrator (Andersson et al., 2007).

Some of the factors for physical violence in Africa mirror those found in other regions of the world such as individual-level characteristics (excessive drinking or a past history of child abuse) or socio-economic conditions such as unemployment. In addition, long standing masculinity traditions play a role (Morrell & Lindegger, 2012). African cultural beliefs and traditions promote men's hierarchical role in sexual relationships and especially marriage (Morrell & Lindegger, 2012).

In Tanzania, statistics provided by the TDHS report that the lifetime prevalence of physical partner violence is estimated at 43.7%, while the past-year physical partner violence at 27.1% among ever-married women. In Mara Region, statistics show that the prevalence of physical violence among women aged 15-49 years is estimated at 29.5% (TDHS, 2015).

These so-called interventions or rather "project initiatives" as they are formally called raise another aspect that this document will thoroughly dwell upon and that is how these initiatives have left a hole in the ship and allowed the problem of physical partner violence to carry on drastically in the region we know as Mara.

LITERATURE REVIEW

Theoretical Literature review:

It is not an easy task to translate the practical implications of violence against women into theoretical formulations because women have historically been a hidden aspect of society for a variety of reasons. Women's theoretical formulation nearly establishes the methods that are sufficient in acquiring the various aspects in different thinking satisfaction. As Jasinski 2001 says "There are theories that can explain the reason behind the violence against the women and there are also some theories that are always happened to stop that violence in the relative way."

Several researchers witnessed the actual thinking paradigm shift because different scholars have their own attitude regarding women violence with various ideas. The author will consider the most

well-known scholars on violence against women. According to Jasinski, J.L., (2001), the major factor that was significant in numerous ways is giving birth to three types of beliefs concerning violence against women. These three types of ideas are basically the three types of levels that have always occurred in society with various elements. The first part is about thinking about society at the micro level, and micro theories define women at the most basic level.

The gender theory is another thing that considered the macro aspect and this macro theory is about the violence differing with view constructing and basically provides the way as per the need show and implement. The social system of multidimensional theory always happens in various aspects because influence of power of man over woman is the worst form ever. The intimate relations among them, sometimes are the causes of violence against the women in several ways (Jasinski, 2001).

The other three types of models are regarded to be the primary causes of violence against women and are influenced by multidimensional theories. The first part is the male peer-support model, just as alcohol usage by men promotes to violence. The next model is the social Etiological model, which explains the structural inequality of men and women at the same level

METHODOLOGY:

The study was be conducted in Mara Region. Tanzania has 31 administrative regions, one of which is the Mara Region. The municipality of Musoma serves as the regional capital. An analytical cross-sectional study design was used; the cross-sectional study looked on physical intimate partner violence and associated factors among women in Mara Region, Tanzania and quantitative method were used for data collection with the estimated study duration of two weeks. The study included women who are in an intimate relationship (casual partner, cohabiting and married) with the age range 18 to 49 within 4 administrative districts of Mara Region which are Musoma district, Rorya district, Serengeti district and Tarime district.

The research study employed the use of simple random sampling in determining the sample size of the population. Simple random sampling (SRS) is a probability sampling method where researchers randomly choose participants from a population. All population members have an equal probability of being selected. This method tends to produce representative, unbiased samples (Jim Frost, 2022). The sample size was a total of 100 women chosen from four wards in the Mara region.

FINDINGS:

Socio- demographic characteristics of respondents:

A total of 100 women from four wards in the Mara region were selected and included in the study. Table 2 summarizes the characteristics of the study participants. More than half of the participants (55%) had an age range of 26–35 years. About 39% had primary education, while only 11% of the participants had no education. 58% of those in the study had been married for more than five years. The major occupation of women in the study was self-employment, at 43%, while only 25% of women were employed. A majority of 86% of women had low income, 10% had medium income,

and only 3% had high income. Less than half (48%) lived with 4-6 people in their households, 36% lived with 1-3 people, and only 14% lived with 7-9 people in their households.

Table 1. Socio-demographic characteristics of the study participants (N=100)

Variable	Categories	Frequency (n)	Percentage (%)
Age (years)	18 - 25	18	18
	26 - 35	55	55
	36 - 49	26	26
Education	No formal education	11	11
	Primary	39	39
	Secondary	37	37
	College	11	11
Marital status	Currently married	20	20
	Married five years	58	58
	Married more than once	16	16
	Divorced or separated	3	3
	Widow	2	2
Occupation	Employed	25	25
	Self-employed	43	43
	Unemployed	30	30
Income	High	3	3
	Medium	10	10
	Low	86	86
People living in the house	1 - 3	36	36
	4 - 6	48	48
	7 - 9	14	14

Magnitude of forms of PPV among women in Mara municipal:

Less than 20% of the participants had never experienced any forms of physical partner violence, while the majority of the participants had experienced at least one form of violence from their partner in their lifetime.



Figure 1: Magnitude of forms of PPV among women (N=100)

Psychological factors associated to PPV among women in Mara Region:

Table 4 presents the psychological factors associating to lifetime PPV where as 37% agreed that having poor self-image and concentration difficulties associate with PPV; also 35% of the study participants strongly agreed to empathy for the perpetrator contributes to PPV but only 2% strongly disagreed that feeling of helplessness cannot be associated to lifetime PPV among women in Mara region.

Table 1. Psychological factors associated to lifetime PPV among women (N=100)

Table 2. Psychological factors associated to lifetime physical partner violence among women (N=100)

	Participants' responses				
Variable	Strongly Agree (%)	Agree (%)	Neutral (%)	Disagree (%)	Strongly disagree (%)
Poor self- image	35	37	9	14	5
Concentration difficulties	28	37	17	15	3
Feeling of helplessness	30	32	18	16	2
Poor thought processing	32	33	17	14	4
Empathy for perpetrator	34	33	15	12	6
Suicidal thoughts	29	30	14	20	7
Belong to broken family	21	29	12	28	10

PPV – Physical partner violence

Social factors associated to PPV among women aged 18 in Mara Region:

Less than half (48%) of the participants strongly disagreed that infidelity contributes to PPV; also, 38% strongly agreed and 36 % agreed that cultural norms that tolerate and blame women for violence are associated with PPV among women; 37% agreed that tolerance and male dominance are associated with PPV.

Table 2. Social factors associated to PPV among women (N=100)

Table 5. Social factors associated to physical partner violence among women (N=100)

	Participants' responses				
Variable	Strongly Agree (%)	Agree (%)	Neutral (%)	Disagree (%)	Strongly disagree (%)
Cultural norms that tolerate and blame women for violence	37	36	13	11	3
Poor community services	24	35	16	22	3
Community awareness on physical violence	31	35	17	14	3
Cultural norms that promote male dominance and aggression	32	33	15	16	4
Community helping attitude of women experiencing violence	24	34	16	23	3
Religious values that promote female submission	32	30	18	14	6
Tolerance and male dominance	31	36	19	11	3
Infidelity contribute to physical partner violence	48	30	9	8	5
Poor social status	34	25	10	25	6

PPV – Physical partner violence

Factors associated to lifetime PPV among women in Mara region:

Table 7 shows the factors associated with lifetime PPV among women in the Mara region. Findings reveal that the psychological factors were significant to lifetime PPV with a P-value of 0.049, while the social factors presented only an association but they were not significant.

Table 3. Factors associated with PPV among women (N=100)

Table 7. Factors associated with partner physical violence among women in Mara Municipal (N=100)

		Experience Partner physical violence		
Variable	Categories	Yes (%)	No (%)	p-value
Physical factor lead to PPV	Perceived low	81	19	0.049
	Perceived high	89	11	
Social factors lead to PPV	Perceived low	85	15	
	Perceived moderate	86	14	0.953
	Perceived high	85	15	

PPV – Physical partner violence

Discussion of Findings:

Socio-demographic factors associated to lifetime PPV among women in Mara region:

In the socio-demographic factors, age was found to be associated with lifetime PPV among women, as women aged 26–35 years were found to be the most physically abused. These findings are similar to those of Mosha et al. (2019). This could be caused by the fact that at this age, male partners are young and active. As a consequence, they practice PPV with their female partners. Furthermore, women with self-income were associated with lifetime PPV. This could be explained by the fact that men feel inferior simply because women earn more than they do and are independent. Other studies by Koenig et al. (2003) and Mosha et al. (2019) found similar results.

Psychological factors associated to lifetime PPV among women in Mara region:

The study has shown that there is an association between psychological factors and lifetime physical partner violence. This could be because many women feel pity for their partners. If they have children, it becomes even harder for them to stay in an abusive relationship. These findings confirm what was found by Lövestad & Krantz (2012) that while battered mothers can provide the warmth their children need, they are unable to impart the authority needed to walk away from a physically violent relationship, resulting in low self-esteem in not just themselves but also their children (Lövestad & Krantz, 2012). It also confirms the findings of (Niolon, Kearns, & n.d.)

Social factors associated to lifetime PPV among women in Mara region.

The study did not find any association between social factors and lifetime physical partner violence. This may be due to social norms that make a woman feel obligated to the male partner, meaning that even if violence exists, there is a way that it is defined by society to be seen as normal and when a woman reacts to it as vice versa. The economic power that men have over women makes both genders (male and female) think they have an obligation to men. This conclusion is justified by his partners' submission; these findings contrast to other studies done (Laisser et al., 2011).

CONCLUSIONS AND RECOMMENDATIONS:

5.0 Conclusion:

Based on the findings, a large proportion of women aged 18–49 years have experienced some form of PPV in their lifetime. There was no correlation between social factors and lifetime PPV in women. However, in socio-demographic characteristics, age was found to be somehow significant to lifetime PPV among women. Psychological factors were significantly associated with lifetime PPV among women in the Mara region.

5.1 Recommendations:

We recommend programmes that will emphasise prevention and strategies for dealing with PPV and more psycho-education against PPV to society; also, the elimination of the social norms that influence PPV among women.

Furthermore, a qualitative study on this topic will highlight how PPV can destabilise the existing gender orders and gender roles that may influence PPV among women, especially in the Mara region.

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