AN ESTABLISHMENT OF THE PSYCHOSOCIAL EFFECTS OF

GENDER BASED VIOLENCE ON WOMEN

Case study: NGARIAM SUB -COUNTY KATAKWI DISTRICT

A Dissertation Submitted to the Institute of Ethics and
Development Studies as a Partial Fulfillment of the
Requirement for the A ward of Bachelor's Degree of
Arts in Democracy and Development Studies
of Uganda Martyrs University

ASENGO ANNA GRACE 2011-B103-10029

JULY 2016

Dedication

This dissertation is dedicated to my husband Mr. okello Gabriel and my sons Okello Jesse Ariko, Ecokit Joshua and my name sake Asengo Rebecca Grace. Not forgetting my dear mother Aanyu Mary Alongu, Sisters Florence, Betty, Helen, Rose, and Brothers Moses, Alfred, Peter and Sam and all the leaders of Ngariam Sub County.

May God reward you and always be your guide in life

Acknowledgement

I would like to express my sincere appreciation to my supervisor Dr. Emmanuel mutyba for his patience; guidance and encouragement that made me succeed in producing this work.

In particular, I am grateful to all the staff of Uganda Martyrs University (UMU) especially those in the Faculty of Ethics and Development Studies.

I wish to express my gratitude to my colleagues and friends, especially Hellen Abillu, and Mr. Echodu Alfred Thomas for their moral support when I was writing this dissertation

I am also grateful to respondents, who provided me with the data that I needed during the study.

Iam grateful to my dear mother Mrs. Aanyu Mary Alongu, brothers Moses, Alfred, Sam and sister betty, Florence and Rose and all the members of Katakwi PAG church for their spiritual and moral support and not forgetting my dear Husband Mr. Okello Gabriel for his usual encouragement ,spiritual and financial support that made this whole course a success. Lastly, special regards to our beloved sons Okello Jesse and Ecokit Joshua who used to miss me whenever am out for face to face sessions.

To all I say "May the almighty God reward you in abundant".

Table of Content

Declaration	ii
Approval	iii
Dedication	iv
Acknowledgement	, v
Table of Content	vi
List of Figures	іх
List Of Tables	
Abbreviations	хі
Abstract	жіі
CHAPTER ONE	1
GENERAL INTRODUCTION	1
1.1 Introduction	1
1.2 Back ground to the study	2
1.3 Statement of the problem	4
1.4 Objectives of study	5
1.4.1 General objective	5
1.4.2 Specific objectives	5
1.5 Research questions	5
1.6 Scope of the Study	5
1.7 Significance of the study	7
1.8 Justification of the research	7
1.9 Definition of key terms	
1.10 Conceptual framework	10
CHAPTER TWO	12
LITERATURE REVIEW	12
2.0 Introduction	12
CHAPTER THREE	21
RESEARCH METHODOLOGY	21
3.1 Introduction	21
3.2 Research Design	21
3.3 Area of study	21
3.4 Study Population	
3.5 Sample size and Sampling techniques	23

3.6 Research Instruments 2	3
3.6.1 Questionnaires Guide	
3.6.2 Interview Guide	
3.7 Quality control method	
3.9 Ethical considerations	
3.10 Limitations of the study/anticipated constraints 2	6
CHAPTER FOUR 2	7
DATA PRESENTATION AND DISCUSSIONS	7
4.1 Introduction	7
4.2. Background information of the respondents 2	7
4.2.1 Age of the respondents	7
4.2.2 Marital status of the respondents	9
4.2.4 Occupation of the respondents	2
4.4 Research Question Three: what Strategies can be put in place for the prevention of gender based violence among women? 4	
4.5 Conclusion	7
CHAPTER FIVE 4	8
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS	
5.1 Introduction	
5.2 Summaries 4	
5.2.2 The social effects of gender based violence on women's	
behaviours 4	8
5.2.3 Strategies for prevention of gender based violence 4	9
5.4 Recommendations 5	C
REFERENCES	1
APPENDICES	4
Appendix 1: 5	
Questionnaires for the Counselors	4
Appendix II: 5	7
Interview Guide for the women victims of GBV 5	7
Appendix III: Budget for data collection	8
Appendix IV: Work Plan	
Appendix V: Introductory letter	
Appendix 7: A map OF Uganda showing Katakwi district the area of study	

Appendix	8:	Α	map	of	Kat	akwi	di	stri	ct	showi	Lng	the	SU	ıb-c	cour	nty	th	ıe
are	ea	of	stu	dy .														62

List o	f	Figures	3			
Figure	<u> </u>	shows	the	Conceptual	framework	11

List Of Tables

	3.1 showing the categories of respondents and their distribution	23
Table 2	2: Marital status of the respondents	29
Table 3	3:showing the education level of the respondents	31
Table 4	4: Occupation of the respondents	33
	5: Shows respondents' responses on the psychological effects of gender based violence on women's behaviours.	34
	6: Shows respondents responses on social effects of gende based violence on women's behaviors	
	7: Responses on what strategies can be used to prevent gender based violence among women	43

Abbreviations

AIDS- ACQUIRED IMMUNE DEFICENCY SYNDROME

CAO- CHIEF ADMINISTRATIVE OFFICER

CDO- COMMUNITY DEVELOPMENT OFFICER

CEDAW- CONVENTION FOR ELIMINATION OF ALL FORMS OF

CFPU- CHILD AND FAMILY PROTECTION UNIT

DISCRIMINATION AGAINST WOMEN

GBV- GENDER BASED VIOLENCE

SAS- SENIOR ASSISTANT SECRETARY

TIP- TESO INITIATIVE FOR PEACE

UNFPA- UNITED NATIONS POPULATION FUND

UNHCR- UNITED NATIONS COMMISSION ON HUMAN RIGHTS

WHO- WORLD HEALTH ORGANIZATION

Abstract

The study establishes some of the psychosocial effects of gender based violence on women in Ngariam Sub County Katakwi district. The objectives of the study were to establish the effects of psychological and social effects of gender based violence on women's behaviors and to identify strategies for prevention of gender based violence among women. The variables that guided the research were psychosocial effects of GBV as independent variable, the women's behaviors as dependent variable, and Education, Policies, age, environment, laws enforced on gender as intervening variable.

The researcher used a case study research design and with both qualitative and quantitative approaches. The respondents and sample size for the study involved the Counselors (30) who were purposively selected, women victims of GBV (20) who were randomly selected for the study (20). The questionnaires and the interview guide were used for data collection.

The findings for objective one were that; women were stressed up all the time to the extent that one becomes absentminded and shows actions of suicidal acts (46.7%) of the respondents. Women victims were always scared of any person around them due to mistrust and fear of being victimized (30%) of the respondents. Women victims always developed an addiction of alcohol/drug use (23.3%) of the respondents. In conclusion, GBV impacts on women's ability to care for themselves and their children, is associated with self-destructive behaviors such as alcohol and drug abuse, suicidal acts, poor social skills, development of illnesses like mental health problems, low self-esteem, Trauma, Isolation, failure to overcome post-traumatic stress disorders. From the conclusion, the researcher recommends for Change of societal, cultural norms and changing Men's attitudes of gender inequalities that drive GBV.

CHAPTER ONE

GENERAL INTRODUCTION

1.1 Introduction

Having heard a lot on social media in Uganda about the rampant gender based violence against women and their psychological effects, the research got interested in establishment of the psychosocial effects of gender based violence on women in Ngariam Sub County.

The study was organized into five chapters. Chapter one consists of the background of the study, the statement of the problem, the objectives of the study, Significance of the justification of the study and the scope of the study. And the conceptual frame work of the study. Chapter two presents a review of related literature on the study subject and this was accessed from various sources including research newspapers, text books and internet. Chapter three presents the research design, the area of study, the study population, Sample population, Sample size and sampling techniques, data collection methods and instruments, data analysis, ethical considerations, quality control methods, limitations of the study. Chapter four, entailed data presentation and discussions and Chapter five entailed summary, conclusions and recommendations.

1.2 Back ground to the study

Gender-based violence (GBV), primarily against women, is a pervasive, global phenomenon affecting both developed and developing countries. Over 35% of the world's female population has experienced gender-based violence at some point in their lives (World Health Organization, 2013). According to the United Nations Population Fund (2010), "GBV is a serious public concern that also impedes the crucial role of women and men in development."

Violence against women is now well recognized as a public health problem and human rights violation of worldwide significance. It is an important risk factor for women's ill health, with far reaching effects for both their physical and mental health. Violence against women of which domestic violence is a part, is a phenomenon that cuts across the regional, social, cultural, economic boundaries and threatens the health, well-being, rights and dignity of women in streets, in workplace, and at home. The risk factors vary from culture to culture, but the effects are almost similar all over the globe (Bacchusl Z 2004 and Klein, R. 2004).

It affects women and men of all ages in different ways. However, females are more often the victims than males, with children and women with disabilities facing the most challenges (Heisse, 2008). According to Neft and Levine (2003), gender-based violence takes place throughout the life cycle

The effects of Gender-Based Violence on women vary widely. It depends on the nature of the particular incident, the woman's relationship with her abuser, and the context in which it took

place. The psychosocial effect of Gender-based violence typically has psychological and social effects. Psychosocial effect may affect psychological and social aspects of individual's life (WHO 2013).

United Nations Population Fund (UNFPA) 2010, states that globally at least one in the three women and girls has been violated either psychologically or socially in their lifetime. In Zimbabwe, domestic violence accounts for more than 60 percent of murder cases and social violation that go through high court in Harare. 14.8 percent of adult women in United State of America (USA) said they have been survivors of gender based violence mostly physical and psychological violence.

Gender-based violence has been recognized as a widespread and escalating phenomenon in Africa (Boonzaier & de la Rey, 2004; Mama, 2001; Merry, 2006), one that takes various forms - including physical, psychological, sexual and/or economic abuse - and occurs in both domestic environments and public spaces, with known and unknown assailants (Adames & Campbell, 2005; Manderson, 2001). Government and community services, health services, law enforcement, legal services, and families are all affected by violence against women. Yet, despite its high social and personal costs and its pervasiveness, it is only in the last few decades that violence against women in Africa has become a subject for research (Jewkes, 2001, 2002; Manderson, 2001).

In Katakwi District for a longer time, the researcher observed that women fall victims of gender based violence as compared to men. Women continue to be victims of GBV irrespective of Government's efforts to integrate a variety of approaches to gender-based violence. The Police child and family protection

Unit report showed that Ngariam sub-county in Katakwi district registered the highest number of GBV and psychosocial effects (53) related cases in 2014.

1.3 Statement of the problem

Despite of the government and Non -Government Organizations' efforts to stop violence in Uganda, gender-based violence continues to occur and its psychological effects were commonly observed on women. Over 35% of the world's female population has experienced gender-based violence at some point in their lives (World Health Organization, 2013).

According to the United Nations Population Fund (2010), "GBV is a serious public concern that also impedes the crucial role of women in development." The World Health Organization (WHO) estimates that at least one in every five of the world's female population has been exposed to GBV at some time (Population Reference Bureau, 2001). This prompted me to examine the established

It was against this background that the researcher was prompted to carry out a study to establish some of the psychosocial effects of gender based violence on women.

1.4 Objectives of study

1.4.1 General objective

The general objective of the study was to establish the psychosocial effects of gender based violence on women in Ngariam Sub County.

1.4.2 Specific objectives

- To establish the psychological effects of gender-based violence,
- ii. To establish the sociological effects of gender-based violence, and
- iii. To identify strategies of preventing gender based violence among women.

1.5 Research questions

- i. What are the psychological effects of gender based violence on women's behaviours
- ii. What are the social effects of gender based violence on women's behaviours
- iii. What strategies can be put in place for the prevention of gender based violence among women.

1.6 Scope of the Study

1.6.1 The Content scope of the study

The study was to establish the psychosocial effects of gender based violence on women in Ngariam Sub County. It focused on psychological and social effects of gender based violence on women's behaviour and identification of strategies for prevention of gender based violence among women. The counselors

and women survivors of GBV were the key respondents and constituted the scope of the study.

1.6.2 The geographical scope of the study

The study was conducted in Ngariam Sub County, Katakwi district eastern part of Uganda. Ngariam Sub County geographically located at the East of Katakwi district. It bordered by Napak district from the East, Nakapiririt in the south east, Katakwi Sub County from the West, Palam Sub County from the North and Magoro Sub County from the South. Ngariam Sub County has six parishes of Pakwi, Osobut, Bisina, Kaikamosing, keelim and akism. However, the researcher conducted the research study in the two parishes of Pakwi and Osobut. The two parishes were chosen because of the high rate of gender based violence occurrences on women. Women in Ngariam sub- county continue to be victims of GBV irrespective of Government's efforts integrate a variety of approaches to gender-based violence. Women survivors of gender based violence Ngariam Sub County Katakwi district are psychosocially affected and as a result women no longer perform their home and community role in which would lead to development.

1.6.3 Time scope of the study

The study was limited between the periods 1986 to 2014. This duration was taken based on the time when insecurity intensified and the communities drawn to internally displaced persons' camps where gender based violence intensified and its psychosocial effects started to manifest.

1.7 Significance of the study

The researcher believes that the study will provide a foundation for the authorities and parties like community development services, future researchers, planners, policy makers, and implementers with basic data to make reference to.

The study will help in unearthing the psychological effects of gender based violence among women such that the local government leaders in the Sub County and district and non-governmental organisations would lay strategies to prevent the gender based violence.

The study will create awareness to the policy makers of the current situation on the psychological effects of gender based violence among women.

The research was intended to be a point of reference for other scholars as it will be a basis for further research on the topic and other related aspects of primary schools in general. In a nutshell, this study will act as basis for reference for future researchers and other scholars who may need to deal with a related topic.

1.8 Justification of the research

According to the United Nations Population Fund (2010), "GBV is a serious public psychosocial concern that also impedes the crucial role of women in development." Women continue to be victims of GBV irrespective of Government's efforts to integrate a variety of approaches to gender-based violence .80 percent of women survivors of gender based violence are psychosocially affected (WHO 2013). It was against this background that the researcher was prompted to carry out a study to establish some of the psychosocial effects of gender based violence on women.

The researcher carried out a study in this moment because it is a requirement for a partial fulfillment of the award of Degree of Bachelor of Arts (Democracy and Development Studies) of Uganda martyrs University

1.9 Definition of key terms

Gender based violence is the general term used to capture violence which is directed to a person on the basis of gender or sex. It included acts that inflicted physical, psychological, economical and sexual harm or pain, threats of such acts, coercion and other deprivations of liberty (Bloom 2008). Or The term gender based violence has been defined as "acts or threats of acts intended to hurt or make women suffer physically, sexually or psychologically, and which affect women because they are women or affect women disproportionally" (Campbell, I. 2002 and Krantz, G. and Carcia M.C. 2009).

Psychosocial relates to one's psychological development in, and interaction with, a social environment. Thus, gender based violence causes immeasurable social and psychological damage. (WHO, 2009).

Psycho- denoting the psychological elements which refers to feelings, thoughts, attitudes, emotions and are normally understood as "internal" and linked to the mind; Social- as the relation between the person and the "external" world, such as the interactions in the family, at work and in general in the socio-cultural environment (Guillermo 2009).

Trauma is damage to biological organism caused by physical harm from an external source. In psychology, trauma is a type of damage to the psyche that occurs as a result of severely distressing events (Frank 2008)

Low self esteem can be viewed as a continuum, and can be high, medium or low, and is often quantified as a number in empirical research (Laul Mcleod 2012)

Victim of violence: The person who is affected by violence

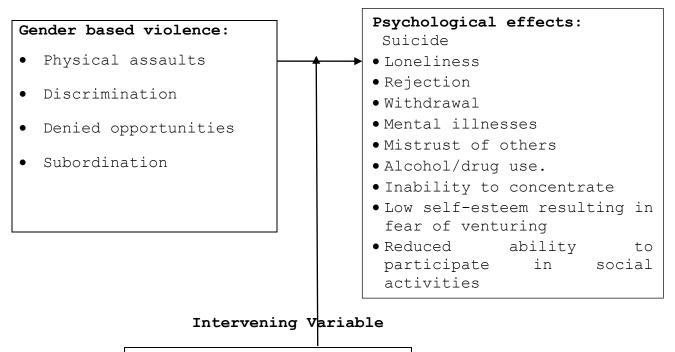
whether physically, socially, psychologically or economically (WHO, 1999).

Violence against women is "any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life." (Campbell, I. 2002)

1.10 Conceptual framework

Independent variable

Dependent variable



- Education
- Government intervention Laws Enforced on gender based violence
- Environment
- Age

Figure 1 shows the Conceptual framework

Source: Bloom (2008).

The above diagram shows that the independent variable gender based violence influences the dependent variable which is psychological effects.

Gender based violence characterized by physical assaults, discrimination, denied opportunities

Subordination results to psychological effects such as Suicide, loneliness, rejection, withdrawal, mistrust of others, alcohol/drug use, low self-esteem resulting in fear of venturing, and reduced ability to participate in social activities.

The intervening variable (Characterized by Education, Policies, age, environment, laws enforced on gender) also influences the relationship between the independent and dependent variables. For instance illiterates, policy ignorance, children and youth, rural settings, weak law enforcement exposes women to GBV hence resulting to psychosocial effects.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

The chapter presents a review of related literature on the study subject and was accessed from various sources including research reports, newspapers, text books and internet. The review focused on the key themes related to the study subject, the researcher identified the key gaps that emerged out of the literature review and these constituted the areas of focus of this study.

2.1 psychological effects of Gender based violence and women's behaviors

Psychosocial relates to one's psychological development in, and interaction with, a social environment. Thus, gender based violence causes immeasurable social and psychological damage. (WHO, 2009).

Psycho- denoting the psychological elements which refers to feelings, thoughts, attitudes, emotions and are normally understood as "internal" and linked to the mind;

Social- as the relation between the person and the "external" worldd, such as the interactions in the family, at work and in general in the socio-cultural environment (Guillermo 2009).

Gender-based violence has serious effects that put the health of victims under risk. Apart from the health effects, gender based violence has serious psychological effects. The psychological effects of gender based violence include depression, anxiety, post-traumatic stress disorder, shock, memory loss, and sexual dysfunction (Mejiuni, O. 2006). Similarly Gender-based violence

has been linked to many serious health problems, both immediate and long-term. These include psychological health problems which can be both direct/ indirect. Direct may include anxiety, fear, mistrust of others, inability to concentrate, loneliness, posttraumatic stress disorder, depression, suicide, etc. Indirect may include psychosomatic illnesses, withdrawal, alcohol or drug use (Pickup, F. et.al 2001). According to the researcher, much as the government of Uganda has set physical and legal redress for gender based violence survivors and against perpetrators through medical treatment given to the gender based violence survivors and the perpetrators handled in courts of law, the psychological wellbeing of the women survivors is left to whom it may Concern unattended to. This is why the advocate for Human Rights observed that hopelessness, loss of control, anger, suicide, behavior disorders, and eating disorders are some the effects of psychological effects of gender based violence especially when different forms of gender based violence go undiagnosed and untreated (Merry, S. E. 2006).

Psychological scars often impede the establishment of healthy and rewarding relationships in the future (Violence Against Women (2002). According to the researcher, victims of gender based violence may transfer their frustrations on their children and others, thereby transmitting and intensifying the negative experiences of those around them. Children, on the other hand, may come to accept violence as an alternative means of conflict resolution and communication. It is in these ways that violence is reproduced and perpetuated

According to UNIFEM (2010), women who are affected by gender

based violence play a very low role in the development of their households. Problems of food and nutritional insecurity, low income generation and improving rural and overall wellbeing will be difficult. This is why the researcher, comments those Survivors of gender based violence who are often women play a key role or contribute to agriculture and rural enterprises, fuel local and global economies. Yet around the world survivors face persistent structural constraints that prevent them from fully enjoying their human rights and hamper their efforts to improve their lives as well as those of others around the world.

The researcher totally agreed with the author (UNIFEM 2010) because women were indeed the contributors in agricultural sector but the monetary benefit goes to men and this lack of share of agricultural produce makes women to end up experiencing effects of psychological effects of gender based violence.

According to WHO (2013) those psychosocial effects of gender based violence result in women's death. Fatal outcomes may be the immediate results of a woman being killed by the perpetrator or in the long term as a consequence of other advanced health outcomes for example mental health problems resulting from trauma can lead to suicidelity, or to conditions such as alcohol abuse or cardiovascular diseases that can results in death. The researcher agrees with the author in that, psychological effects of Gender Based Violence for example cases of women victims committing suicide.

In addition, formerly abducted women suffer from psychological trauma manifested in fear, anxiety, nightmares, aggressive behaviour and feelings of committing suicide (Chrobok and Akutu 2008). According to the researcher, in families/communities,

such women face adaptability problems and find it hard to reason in a responsibly. Women who returned from abduction with babies have difficulties with reintegration and were usually unable to rejoin school (Annan et al, 2009). They faced rejection and isolation from their peers and also reported inability to concentrate in class (Chrobok and Akutu, 2008).

2.2 Social effects of Gender based violence and women's behaviours

Women who were abducted by Lord Resistance Army rebels in North and North Eastern Uganda were allocated to soldiers to serve as (Annan et al, 2009). Ιn Teso region, the LRA responsible primarily held for the recruitment soldiers. The implications of these acts on women's emotional and social wellbeing are manifested in the way they relate to others in their communities. Formerly abducted women/girls face isolation from their families, communities and schools, they are subjects of ridicule and evidence indicates that some of such women would prefer to rejoin their abductors, given the chance as opposed to facing condemnation within their own families and communities (Chrobok and Akutu, 2008).

Furthermore, gender based violence has negative effects not only on the health and psychology of victims but also on the social and economic activities of victims, within the community and the state in general (Kumar, S. 2005). From social impact perspective, in some societies it is difficult for a female who has been subjected to gender based violence to find a partner for marriage. Most societies tend to blame the victim and hence, this social rejection results in further emotional damage like shame, self-hate and depression (WHO, 2012)

Furthermore, fear of additional gender based violence also keeps women from going about with their normal activities such as attending school activities, engaging in the family/ community activities, or participating in politics (Panagioti, M. 2009)

The social effects include the loss of role/function in society, social stigma, social rejection and isolation, feminization of poverty and increased gender inequalities (Mialon, H. M., & Mialon, S. H. 2006). The researcher agrees with the above authors in that women victims tend to develop low self esteem and as such they gender based violence also keeps women from going about with their normal activities.

Individual-level factors are biological and personal history factors that increase the risk of violence. For example, young age and low-economic status/income have been associated as risk factors for both experiencing and perpetrating intimate partner violence (WHO 2010). Similarly, WHO (2013) observed that a global synthesis of lifetime prevalence data on intimate partner violence reveals high prevalence rates among young women, indicating that violence starts early in women's relationships. ever-partnered women aged 15-19 years, experienced physical and/or sexual violence by an intimate partner. Prevalence reaches its peak in the age group of 40-44 years (37.8%) and declines for women aged 50 years and older. However, this fact does not necessarily imply that older women experience lower levels of intimate partner violence.

Individual-level factors are biological and personal history factors that increase the risk of violence. For example early marriage and low-economic status/income have been associated as

risk factors for both experiencing and perpetrating intimate partner violence (WHO 2010). The researcher agrees with the author in that unmarried female respondents were more likely to experience physical violence than married respondents. I This is why individual-level factors are biological and personal history factors that increase the risk of violence. For example, a low level of education, and low-economic status/income have been associated as risk factors for both experiencing and perpetrating intimate partner violence WHO (2010).

Engagement in certain types of occupation and Some types of occupation also put women more at risk of gender-based violence. These discriminate women in family, government or even workplace settings, as the patriarchal society thinks 'headships' or certain jobs are performed best by man (Saidi, H, et.al2008).

2.3 Strategies for the prevention of gender based violence among women

Media Information and Awareness Campaigns - The media is a key conduit for making GBV visible, advertising solutions, informing policy-makers and educating the public about legal rights and recognize and address GBV. Newspapers, magazines, newsletters, radio, television, the music industry, theatre, advertising, the internet, posters, leaflets, community notice boards, libraries and direct mail are all channels for providing information to victims and the general public about GBV prevention and available services (Garcia Morena C, Jansen H. 2000). According to the researcher, Working with Perpetrators of (batterer-intervention programs) controversial and occasionally successful response. While victim assistance services are a useful band aid to address an existing problem, this approach targets efforts at the source of the problem, attempting to change violent men's.

Education - School systems are instrumental to stopping GBV before it starts. Regular curricula, sexuality education, school counseling programs and school health services can all convey the message that violence is wrong and can be prevented, suggest alternative models of masculinity, teach conflict-resolution skills and provide assistance to children/adolescents who may be victims or perpetrators of violence. Integrating GBV as subject into psychology, sociology, medicine, nursing, studies, women's social work and other programs providers to identify and attend to this problem. In addition, Exploring Masculinities - Programs which address masculinities attempt to explore what "makes a man" (Walby 2004). This is in line with the researcher's suggestion that the central idea is to educate boys from the earliest age that violence (against anyone) is wrong, that the prevailing definition of masculinity in any society is not the only alternative, and that even though they are physically different, girls are entitled to the same rights and opportunities as men

Faith-Based Programs and Services - Religious counseling, support groups, education programs, study groups and assistance programs can address GBV with their participants/worshippers. Most religions emphasize the importance of peace and tolerance. Framing a discussion of GBV in the context of religious tenets is one way to foster awareness and discussion of the problem. It may also be a way to identify and assist victims who do not feel comfortable talking to a health care provider or police officer (WHO 2013)

Legal Responses - The criminalization of all forms of GBV domestic violence, rape, sexual harassment, psychological violence etc. has been an important step in eliminating it. What is the consistent application of these implementation of penalties, and greater focus а on rehabilitating convicted perpetrators. Other legal responses to GBV have included: legal aid services; training of police and judicial personnel; establishment of police child and family protection unit; legal advocacy and lobbying; training of family, criminal, immigration and juvenile court lawyers and bar association advocacy (Kurz and Johnson- Welch, 2000)

Community Networks and Interventions - A number of studies have involving entire communities in addressing and working to prevent GBV is one of the surest ways of eliminating it. To be optimally effective, community networks must bring together all of the responses outlined above, integrating members from all sectors of the community: families; businesses; advocacy groups/civil society; public services such as police, fire fighters and medical examiners; social services such as welfare, unemployment, public housing and health; education; the media and officials from national, state/provincial and local/municipal governments (World Health Organization, 2002). The researcher believes that Community interventions must send a clear message about what gender-based violence is all about and what intervention should be put in place.

The guiding principle that should underpin all programme activities to ensure equal participation by women and men, girls

and boys in planning, implementing, monitoring and evaluating programmes, ensure coordinated multiple sectorial actions by all actors, strived to integrate, mainstreamed actions and ensure accountability at all level. (United Nations for High Commissioner for Refugees, May 2003, guiding principle for prevention and response to sexual and gender based violence against refugees, returnees and internally displaced persons).

Summary

In conclusion, various authors have done a lot in identifying gender based violence psychosocial effects to women, identified how they affect women and proposed some remedies to gender based violence. However, the identified gap was how GBV influences women psychosocial effects.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

Chapter three presents the research design, the area of study, the study population, Sample population, Sample size and sampling techniques, data collection methods and instruments, data processing and analysis, ethical considerations, quality control methods and limitations of the study.

3.2 Research Design

The researcher used a case study design. She chose a case study design because it was the only type of design that could generate the data that could respond to the nature of the research questions of this non-interventional research that studied a single group of people. The researcher also employed both qualitative (for the analyses of data) and quantitative (for the statistical purpose) approaches.

3.3 Area of study

The study was conducted in Ngariam Sub County, Katakwi district in the eastern part of Uganda. Ngariam Sub County is geographically located at the East of Katakwi district. It is bordered by Napak district from the East, Nakapiririt in the south east, Katakwi Sub County from the West, Palam Sub County from the North and Magoro Sub County from the South. Ngariam Sub County has six parishes of Pakwi, Osobut, Bisina, Kaikamosing, keelim and Akism. However, the researcher conducted the research study in the two parishes of Pakwi and Osobut. The two parishes were chosen because of the high rate of gender based violence occurrences on women. Women in Ngariam sub- county continue to

be victims of GBV irrespective of Government's efforts to integrate a variety of approaches to gender-based violence. Women survivors of gender based violence Ngariam Sub County Katakwi district are psychosocially affected and as a result women no longer perform their home and community role in which would lead to development.

3.4 Study Population

The target population was composed of counselors and the women victims of GBV. The counselors were contacted because they had direct contact and confidence with the victims hence they have much information about the magnitude of gender based violence and its psychosocial effects on survivors in the sub county.

The women victims were selected because they were the primary persons who were undergoing hick ups of gender based violence in the sub county.

In general, Ngariam Sub County in Katakwi District has six parishes with a population of 13,968 people, the number of males were 6,759 and 7,209 were females with a total number of 2,041 households (National Housing and population census 2014). The two parishes under study have a population of 5067 people where 3030 were females and 2037 were males with a total of 509 households. The people of Ngariam Sub County are engaged in activities like small scale business, vegetable selling, charcoal burning and selling, growing of crops and rearing of animals.

The sample size was 50 respondents. This number of respondents was chosen since it was sufficient to generate substantial information required.

Table: 3.1 showing the categories of respondents and their distribution.

S/No	Categories	Sample	Sampling			
		Population	size	techniques		
1.	Counselors	35	30	Purposive		
2.	Women victims of GBV	23	20	Simple random sampling		
	Total	58	50			

Source: Krejcie and Morgan (1970) Table as quoted by Amin (2005:454).

3.5 Sample size and Sampling techniques

The researcher used purposive sampling for choosing the Counselors. Counselors were purposively because of their relevancy due to their technical skills concerning the issue and they also had direct information from the victims.

Simple random sampling using lottery method was used for selecting the victims of gender based violence because it gives equal opportunity to all to be chosen or not. Therefore it is non-biased and it simplifies deciding on whom to choose. The sample size of the respondents was 50 participants.

3.6 Research Instruments

The researcher collected data using both questionnaires and interview guides.

3.6.1 Questionnaires Guide

The researcher used questionnaires with both close-ended and open ended questions. Closed ended questions helped to obtain specific information regarding the topic under study. Open-ended questions were utilized to enable the researcher collect data on non-specific aspects but a variety of information on psychosocial effects of gender based violence on the women. questionnaires were designed according to the theme objectives of the research. Questionnaires were used so as to reduce bias in that the researcher's own opinion would not influence the respondent to answer questions in a certain manner. Bryman, (2001) argues that questionnaires are handy in reducing bias because there are no verbal or visual clues that influence the respondent. Questionnaires were administered to counselors and victims who were able to read and to write.

3.6.2 Interview Guide

The interview guides were applied to women victims of GBV who could neither read nor write and to some counselors who had little time to answer questionnaires. The interview guides helped in probing of some interesting and unexpected behavior/responses. This approach enhanced data got from the questionnaires and was used to supplement and fill the gaps or unclear items. This approach was guided by the consideration that interview method of gathering information can be used to get opinions and suggestions of the respondents. It was also used as a means of probing of some interesting and unexpected behavior (Silverman, 2001).

Indeed interviews too were essential since they provided an indepth data that would not be possible to get in a questionnaire. Creswell (2007) argues that interviews provide room for probing details and classifications, the questions were mainly openended and a few semi-structured ones.

Also, the researcher applied the interview guide or schedule because the method was flexible and gave the respondents chance to offer their own time, suggestions, ideas and opinion.

3.7 Quality control method

The interview guide and questionnaire as data collection tools were developed and presented to the supervisors to check the validity of the information or data. Validity and consistency of the questions in the tools was systematically checked for the relevance of the questions to the research topic and research objectives. This helped to ascertain whether the questions in the data collection tools rhymed with the topic and the objectives of the study. Updating and adjusting or correcting of the data collection tools was done and often guided by the supervisor.

3.8 Data analysis

Quantitative data got from questionnaires were analyzed using computer, where programmes such as SPSS version 20 were used while qualitative data got from interview guides were analyzed manually where they were be put in themes and later be used to back up the quantitative data. The findings were be presented using tables.

3.9 Ethical considerations

The researcher got an introductory letter from the university.

Respect and consent of respondents was ensured and

confidentiality to what respondents responded in the data collection tools was not disclosed to any one during the interpretation of the data collected.

3.10 Limitations of the study/anticipated constraints

Denial of the information due to fear from some respondents was a challenge the researcher faced during the research study. The researcher thoroughly explained herself to the respondents and the ethics of research were put into consideration and the respondents were informed of this research ethic before the exercise.

Language barrier was another challenge faced by the researcher especially when interviewing the karamojong residents. The researcher got an interpreter to cater for language barrier.

The commitment of the key informants was a challenge faced by the researcher and this was solved by making appointments with those respondents.

CHAPTER FOUR

DATA PRESENTATION AND DISCUSSIONS

4.1 Introduction

This chapter presents and discusses data got from the field relating it to the literature review seen in chapter two of this work.

4.2. Background information of the respondents

4.2.1 Age of the respondents

The researcher was interested in the age of the respondents because the girls are more violated than the elderly women.

This means the information got from the different age helped in the reliability of the study based on the different experiences. Therefore, the researcher is convinced beyond doubt that the different age groups of the respondents in this study have been very effective elements for the successes of this study.

The researcher recorded the age of each respondent and the results were summarized as given in table 4.2 below.

Table 1: Age structure of respondents in the study

Age of the respondents	Frequency	Percentage
25-30	17	34
31-35	12	24
36-40	09	18
41-45	05	10
46-50	03	6
51-55	03	6
56 above	01	2
Total	50	100

Source: primary data 2015

Table 1 show that a cross-section of respondents with different age brackets was involved in the study.

A majority of respondents (34%) were 25- 30 years, followed by (24%) of the respondents who were at the age bracket of 31-35 years, (18%) of the respondents who were at the age bracket of 36-40 years, (10%) of the respondents were at the age bracket of 41- 45 years, (6%) of the respondents were at the age bracket of 46- 50 years, (6%) of the respondents were at the age bracket of 51- 55 years and (2%) of the respondents were at the age bracket of 56 and above years. This implies that the conclusions based on the data that they provided were trustable and credible since they were generated from different respondents with different age bracket. This is in line with the reality on the ground since gender based violence is throughout women's life cycle. The finding implies to the objectives that young women always suffer from psychosocial effect of GBV.

This finding is related to WHO (2010) observation that Individual-level factors are biological and personal history factors that increase the risk of violence. For example, young age and low-economic status/income have been associated as risk factors for both experiencing and perpetrating intimate partner violence.

Similarly, WHO (2013) observed that a global synthesis of lifetime prevalence data on intimate partner violence reveals high prevalence rates among young women, indicating that violence starts early in women's relationships. Among everpartnered women aged 15-19 years, 29% have experienced physical and/or sexual violence by an intimate partner. Prevalence reaches its peak in the age group of 40-44 years (37.8%) and

declines for women aged 50 years and older. However, this fact does not necessarily imply that older women experience lower levels of intimate partner violence.

4.2.2 Marital status of the respondents

The marital status of the respondents was also covered and analyzed to assess their views in relation to the study variables of the psycho social effect of gender based violence on women.

The researcher was interested in the marital status of the respondents because unmarried women are more violated than the married

The different marital status categories play a very significant role in availing the information based on their experiences as far as the marital status in regards to the psychosocial effects of gender based violence on women in Ngariam Sub County Katakwi district is concerned. This means the information got from the different marital status helped in the reliability of the study based on the different experiences. Therefore, the researcher is convinced beyond doubt that the different marital status of the respondents in this study has been very effective elements for the successes of this study.

Table 2: Marital status of the respondents

Marital status	Frequency	Percentage
Married	30	60
Hallica	30	00
Single	11	22
Divorced	9	18
Total	50	100

Source: Primary Data, 2015

The table 2 above, indicates that majority of the study respondents $30\,(60\,\%)$ were married and these were followed by respondents who were single as reported by $11\,(22\,\%)$ of the respondents, $9\,(18\,\%)$ had divorced and none of the study respondents reported to fall under the category of separated and widowed respectively. This reinforces the expectation that the data they provided is dependable since they had various marital status.

The finding implies to the objectives that married women occasionally suffer from psychosocial effect of GBV. This finding is related WHO (2010) observation that Individual-level factors are biological and personal history factors that increase the risk of violence. For example early marriage and low-economic status/income have been associated as risk factors for both experiencing and perpetrating intimate partner violence. Unmarried female respondents were more likely to experience physical violence than married respondents.

4.2.3 Education levels of respondents

The researcher was interested in the Education levels of the respondents because violence is commonly done on non-educated.

The different Education levels categories play every significant role in availing the information based on their experiences as far as the Education levels in regards to the psychosocial effects of gender based violence on women in Ngariam Sub County Katakwi district is concerned. This means the information got from the different Education levels respondents helped in the reliability of the study based on the different experiences. Therefore, the researcher is convinced beyond doubt that the

different Education levels of the respondents in this study have been very effective elements for the successes of this study.

The researcher recorded the Education level of each respondent and the results were summarized in table 3 below

Table 3:showing the education level of the respondents

Level of Education	Frequency	Percentage
None	25	50
Primary	15	30
Secondary	05	10
Tertiary	05	10
TOTAL	50	100

Source: primary data 2015

In table 3, it is clear that a majority of the respondents involved in the study (50%) had not even attained primary education level, (30%) had attained at least primary education level, (10%) had attained at least secondary education level, (10%) had attained at least a tertiary education level. This was important in knowing the extent to which respondents were knowledgeable about the variables that were involved in the study and the extent to which the data they provided could be generalized to the population.

The finding implies to the objectives that non educated women always suffer from psychosocial effect of GBV. This finding is related to WHO (2010) observation that iindividual-level factors are biological and personal history factors that increase the risk of violence. For example, a low level of education, and

low-economic status/income have been associated as risk factors for both experiencing and perpetrating intimate partner violence.

4.2.4 Occupation of the respondents

The researcher was interested in the Occupation of the respondents because the house wives are more violated and the working women are violated by their bosses at work.

The different Occupation categories play every significant role in availing the information based on their experiences as far as the Occupation in regards to the psychosocial effects of gender based violence on women in Ngariam Sub County Katakwi district is concerned. This means the information got from the different Occupation respondents helped in the reliability of the study based on the different experiences. Therefore, the researcher is convinced beyond doubt that the different Occupation of the respondents in this study has been very effective elements for the successes of this study.

The occupation of the respondents was covered and analyzed to assess their views in relation to the study variables of the psycho social effect of gender based violence on women.

The researcher recorded the gender of each respondent and the results were summarized as in table 4 below.

Table 4: Occupation of the respondents

Occupation of	Frequency	Percentage
the respondents		
Peasant/House	40	80
wife		
Self employed	05	10
Civil Servant	05	10
Total	50	100

Source: Primary Data, 2015

In Table 4, it is clear that most of the respondents involved in the study were peasants as reported by (80%) of the respondents, followed by self-employed as reported by (10%) of the respondents, and civil servants as reported by (10%) of the respondents. The participation of different categories of respondents in this study validated the reliability of this research data as it was important in knowing the vulnerability of women as per the occupations. The finding imply to the objectives that house wives and working women always suffer from psychosocial effect of GBV caused by their husbands and their bosses respectively.

This finding is related to Saidi, H, et.al(2008) observed that engagement in certain types of occupation and Some types of occupation also put women more at risk of gender-based violence. These discriminate women in family, government or even workplace settings, as the patriarchal society thinks 'headships' or certain jobs are performed best by man.

4.2 Research Question One: What are the psychological effects of gender based violence on women's behaviours?

To find out the effects of psychological effect of gender based violence on women victims in Ngariam Sub County Katakwi district, the researcher administered questionnaires to counselors because the study was intended to establish the effects of psychological effect of gender based violence on women. Interviews were also conducted with the women victims. The responses were summarized according to the categories of respondents as given in table 5.

Table 5: Shows respondents' responses on the psychological effects of gender based violence on women's behaviours

psychological effects of gender based violence on women's behaviours	Frequency	0/0
Stressed up all the time to the extent that one talks within herself loudly, absentminded and shows actions of suicidal acts	14	46.7
Women victims are always scared of any person around her due to mistrust and fear of being victimized	09	30
Women victims always develop an addiction of alcohol/drug use	07	23.3
Total	30	100

The findings show that 14(46.7%) of the respondents said that women victims are always Stressed up all the time to the extent that one talks within herself loudly, absentminded and shows actions of suicidal acts. The finding is in line with the literature in that believes that psychosocial effect of gender based violence results to women's death. In the long term as a consequence of other advanced health outcomes for example mental

health problems resulting from trauma can lead to suicidality, or to conditions such as cardiovascular diseases that can result in death.

The findings further highlight that 9(30%) of the respondents said that women victims are always scared of any person around them due to mistrust and fear of being victimized. The findings are related to what WHO (2013) observed that those psychosocial effects of gender based violence result in women's death. The long term as a consequence of other advanced health outcomes for example mental health problems resulting from trauma can lead to fear and lack of confidence among women victims of GBV. addition, formerly abducted women suffered from psychological trauma manifested in fear, anxiety, nightmares, aggressive behaviour and feelings of committing suicide (Chrobok and Akutu 2008). In families/communities, such women faced adaptability problems and found it hard to reason/thick in a responsibly. Women who returned from abduction with babies have difficulties with reintegration and were usually unable to rejoin school (Annan et al, 2009). They faced rejection and isolation from their peers and also reported inability to concentrate in class (Chrobok and Akutu, 2008). The researcher has a similar view with the findings and the author's that psychological effect of results to anxiety, withdrawal, mistrust of inability to concentrate, loneliness, post-traumatic disorder, depression among others. In addition, violence can destroy the ability to think clearly

The findings also showed that 7(23.3%) of the respondents said that women victims always develop an addiction of taking drugs

or alcohol. The finding was in line with literature in that, the effects of social GBV impacts on women's ability to care for themselves and their children, and is associated with selfdestructive behaviours such as alcohol and drug abuse. addition, psychosocial effects of gender based violence affects the women victims by making them resort to over drinking, promiscuity, child neglect, realize famine and hunger, resort to prostitution hence affecting their family development, increasing family divorce/separation, death, acquiring disease such as HIV/AIDs among others. The researcher has a similar view with the findings and the author's psychological effect of GBV results to psychosomatic illnesses, and alcohol or drug use.

One respondent during the interviews had this to say,

"The psychological effects may include; High illiteracy, unemployment, development of poor eating disorders, poor social skills, increased household poverty, Deformities/disabilities, poor family relationships, development of illnesses like ulcers, high blood pressure, mental health problems as such victims dropout of school/workplaces due to low selfesteem, Trauma, Isolation, failure to overcome post-traumatic stress disorders."

findings are related with Chrobok and Akutu, (2008)observations that families/communities, such women face it hard to adaptability problems and find reason responsibly. Women who returned from abduction with babies have difficulties with reintegration and were usually unable rejoin school (Annan et al, 2009). They faced rejection and isolation from their peers and also reported inability to concentrate in class

4.3 Research Question Two: What are the social effects of gender based violence on women's behaviors

To find out the effects of social effect of gender based violence on the women victims in Ngariam Sub County Katakwi district. The researcher administered questionnaires to the counselors because the study was intended to establish the effects of social effect of gender based violence on women victims. Interviews were also conducted with the women victims of gender based violence. The responses were summarized according to the categories of respondents as given in table 6.

Table 6: Shows respondents responses on social effects of gender based violence on women's behaviors

social effects of gender based violence on	Frequen	ે
women's behaviours	сy	
Women victims of GBV become isolated from other people, they prefer being alone and doing their own things hence exposing them to another GBV	12	40
Women victims of GBV develop low self-esteem such that they think that they cannot take any part in any activity at home/community/work place	08	26.7
Women victims of GBV always move alone aimlessly and may even remain stay wherever, darkness gets her	07	23.3
Women victims of GBV become hopelessness and ashamed of being with other people	03	10
Total	30	100

The findings show that 12(40%) of the respondents said that Women victims of GBV become isolated from other people, they prefer being alone and doing their own things hence exposing them to another GBV.

The findings are similar with the comments by Mialon, H. M., & Mialon, S. H. (2006) that the social effects include the loss of role/function in society, social stigma, social rejection and isolation, feminization of poverty and increased inequalities. Furthermore, fear of additional gender based violence also keeps women from going about their activities such as attending school activities, engaging in the family/ community activities, or participating in politics (Panagioti, M. 2009). The researcher also agrees with the findings and the author's observation in that isolation is as a result of rejection, ostracism and social stigma at community level.

The findings further highlight that 8(26.7%) of the respondents said that Women victims of GBV develop low self-esteem such that they think that they cannot take any part in any activity at home/community/work place. The finding was in line with the observation of Heise et al (2009) in that social effects result to loss of role/function in society, social stigma, rejection and isolation, feminization of poverty and increased gender inequalities. In addition, psychosocial effects of gender based violence played a very low role in the development of their households. Problems of food and nutritional insecurity, low income generation and improving rural and overall wellbeing will be difficult. Survivors of gender based violence who are often women play a key role or contribute to agriculture and rural enterprises, fuel local and global economies. Yet around the world survivors face persistent structural constraints that prevent them from fully enjoying their human rights and hamper their efforts to improve their lives as well as those of others

around the world (UNIFEM 2010). The researcher has a similar view with the findings and the author's that social effect of GBV reduces the victims' ability to participate in social and economic activities

The findings also showed that 7(23.3%) of the respondents said that women victims of GBV always move alone aimlessly and may even remain stay wherever, darkness gets her. The finding was in line with the literature in that psychological effect of gender based violence affects the survivors by reducing women's opportunities for work outside the home, their mobility and access to information and children's schooling (United Nations, 2005). The researcher has a similar view with the findings and the author's that social effect of GBV increased vulnerability to other types of gender-based violence.

The findings also showed that 3(10%) of the respondents said that Women victims of GBV become hopelessness and ashamed of being with other people. This is why WHO, (2012) observed that social impact perspective; in some societies it is difficult for a female who has been subjected to gender based violence to find a partner for marriage. Most societies tend to blame the victim and hence, this social rejection results in further emotional damages like shame, self-hate and depression. In addition, observed that fear of additional gender Panagioti, M. (2009) based violence also keeps women from going about with their normal activities such as attending school activities, engaging the family/ community activities, or participating politics in fear of GBV occurrences. Formerly abducted women face isolation in their families, and communities they are subjects of ridicule and evidence indicates that some of such

women would prefer to rejoin their abductors, given the chance as opposed to facing condemnation within their own families and communities (Chrobok and Akutu, 2008). The researcher has a similar view with the findings and the author's that social effect of GBV may result to a cute fear of future violence, which extends beyond the individual survivors to other members in the community.

One of the women victims of GBV interviewed said,

"I leave my home very early in the morning looking for where to get beers or local brew and come back home late in the night. I have forgotten my roles and responsibilities as a woman in the house. I no longer provide moral support and guidance for my children. Many women have also resorted to over drinking with the reason of forgetting the stress they are encountering in the families. Poverty has accrued up because I have resorted to drinking with less or no interest to garden work".

Similarly, the findings are related to (Pickup, F. et.al 2001) observation that Gender-based violence has been linked to alcohol or drug use by the victims.

One of the women victims of GBV said,

"My husband drinks a lot, he often comes home late and asks what to eat, if he finds that there is nothing to be eaten, he starts quarreling and fighting me. This has forced me also to begin drinking as a way of forgetting the effects of this violence. I could not also go to the garden to dig; the end result was famine and hunger. Due to this my children are loitering from home to home looking for what to eat. They are even insulted from neighborhood. The children can-not go to school because they were used as cheap labour in the other homes where they could work to look for survival".

In support, the findings are related to UNIFEM (2010) who

observed that Survivors of gender based violence who are often women play a key role or contribute to agriculture and rural enterprises, fuel local and global economies. Yet around the world survivors face persistent structural constraints that prevent them from fully enjoying their human rights and hamper their efforts to improve their lives as well as those of others around the world and participate in different development activities.

4.4 Research Question Three: what Strategies can be put in place for the prevention of gender based violence among women?

To find out the strategies for the prevention of the gender based violence among women Ngariam Sub County Katakwi district. The researcher administered questionnaires to the counselors so as to identify strategies for prevention of GBV. Interviews were also conducted with the women victims of GBV. The responses were summarized according to the categories of respondents as given in table 7.

Table 7: Responses on what strategies can be used to prevent gender based violence among women

strategies for prevention of gender	Total		
based violence among women	Frequency	%tage	
Economic empowerment, Media Information, and awareness Campaigns	16	53.3	
Community education through medias and use of Faith-Based Programs and Services	13	43.3	
Having Legal Responses such as Bye-laws on GBV	01	3.3	
Total	30	100	

The findings show that 13(43.3%) of the respondents said that Community education through medias and use of Faith-Based Programs and Services can be a strategy for prevention of gender based violence among women. The above findings are in line with literature review in that the United Nations commissioner for refugee (2003) said in the literature reviewed that the complexities of psychosocial effects of gender based be best addressed when multiple can organization and disciplines work together in identifying and designing joint strategies to address these human violations. All actors involved in developing those strategies should agree to adhere to a set of guiding principle and understand that gender based violence are a human right violation. The quiding principle that should underpin programme activities to ensure equal participation by women and men, girls and boys in planning, implementing, monitoring and evaluating programmes, ensure coordinated multiple sectorial actions by all actors, strive to integrate, mainstream actions

and ensure accountability at all level. Many Non-governmental organization (NGO) and civil society organizations in Africa have tried to empower women's status economically. Women have been put in development groups that will enable them access soft loans. Women have been encouraged to join village saving and lending association. Information is given to women on how they can improve their economic status.

Similarly, given its complexities, gender based violence is best addressed when multiple sectors, organization and disciplines work together in identifying and designing joint strategies to address this human rights violations. All actors involved in developing those strategies should agree to adhere to a set guiding principle and understand that gender based violence is a human right violation (United Nations for High Commissioner for Refugees, May 2003, guiding principle for prevention and response to sexual and gender based violence against refugees, returnees and internally displaced persons).

The findings show that 16(53.3%) of the respondents said that economic empowerment Media Information, and awareness Campaigns. Similarly, the findings are in line with UNFPA report (2001) in that many Non-Government organizations and civil society organizations in Africa have tried to empower economic status of women. Women have been put in development groups that will enable them access soft loans. Women have been encouraged to join village savings and lending associations information is given to women on how they can improve their economic status. A majority of women have not conceptualized the concept of village saving and lending association, this has left many women still to depend to their male counterpart who still abuse their rights

and freedoms. The few who have now managed are now independent and their rights are now respected.

The findings show that 1(3.3%) of the respondents said that having Legal Responses such as Bye-laws on GBV can help prevent GBV among women. According to the Centre for disease control (2009) the governments in the world have tried to ratify to the decrees, convention and declaration set up by the United Nations. Uganda as a country has ratified too many conventions and protocols. She has many laws, Acts and policies that are against the cultural norms and practices which are against women. At the district and sub county level ordinances and byelaws are set to avert cultural norms and practices against women and also to alleviate poverty and psychological and social effect from women. The operationalization has not been effective in these areas which are rural settings where communities are not literate.

Since Gender based violence is a problem that affects individuals, communities and institutions it should be best addressed when multiple sectors, organization and disciplines work together in identifying and designing joint strategies to address this human rights violations. All actors involved in developing those strategies should agree to adhere to a set of guiding principle and understand gender based violence as a human rights violation (World Bank, 1993).

During the interviews with one of the respondents (women victim of GBV had this to say,

"For women to come out of the problem of gender based violence there is a need to empowerment them economically. Women should be industrious, they should

join village saving groups that will enhance their capability to any business. Women should not depend on men because men have showed us what they are. Our men have become negligent; they do not bother of their families. We the survivors of violence of whatever kind should mobilize ourselves and begin saving and lobby from government to support us"

The findings are related to (Kurz and Johnson- Welch, 2000) suggestions that training of police and judicial personnel; establishment of police child and family protection unit; legal advocacy and lobbying; training of family, criminal, immigration and juvenile court lawyers and bar association advocacy teams which involve even the victims

In an interview with the women victims of GBV, one said,

"Their sub county is planning in all circles of development to involve women representative in the planning process. This is at the village, parish and sub county levels. In these, women's' views are also taken care of and integrated in the development plan of the sub county. Issues of gender are therefore plan integrated in the development and sensitizations activities are done at the village and parishes in the sub county. The sub county has made sure that the issues of gender mainstreaming are done in all key sectors in the sub county for example health, community development, production, education and security/police. The sub county through lobbying, we have also attracted other development actors in the sub county like TPO Uganda, Lutheran World Federation, ACTION aid and Teso Initiative for Peace who have played a tremendous role in fighting against gender based violence and also supporting the women who are abused in the sub county".

The findings are in line with (World Health Organization, 2002) who suggested that Community Networks and Interventions - A number of studies have shown that involving entire communities in recognizing, addressing and working to prevent GBV is one of

the surest ways of eliminating it. To be optimally effective, community networks must bring together all of the responses outlined above, integrating members from all sectors of the community: families; businesses; advocacy groups/civil society; public services such as police, fire fighters and medical examiners; social services such as welfare, unemployment, public housing and health; education; the media and officials from national, state/provincial and local/municipal governments. Community interventions must send a clear message about what gender-based violence is

4.5 Conclusion

This chapter presented the results and discussions by relating data got from the field with the literature review seen in chapter two of this work.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

The chapter presents the summaries, conclusions and recommendations of the study. This are presented in order of the research objectives and the research questions.

5.2 Summaries

5.2.1 The psychological effects of Gender Based Violence on women's behaviours

The study findings highlighted the following as effects of psychological effects of GBV:

Stressed up all the time to the extent that one talks alone absent minded and shows actions of suicidal acts

Women victims are always scared of any person around her due to mistrust and fear of being victimized

Women victims always develop an addiction of alcohol/drug use

Psychological problems such as post-traumatic stress disorders such as depression, anger, suicidal thoughts, and anxiety, shame, fear, self- hate, self-blame, paranoia, hallucinogen and mental illness.

5.2.2 The social effects of gender based violence on women's behaviours

When the researcher examined the social effects of gender based violence on women, the following were some of the effects:

Women victims of GBV become isolated from other people; they prefer being alone and doing their own things hence exposing them to another GBV

Women victims of GBV develop low self-esteem such that they think that they cannot take any part in any activity at home/community/work place

Women victims of GBV always move alone aimlessly and may even remain stay wherever, darkness gets her

It impacts on women's ability to care for themselves and their children, and is associated with self-destructive behaviours such as alcohol and drug abuse.

Hopelessness, ashamed of being with other people, rejection from relatives and inferiority from women suicidal tendencies, Isolation and becoming more vulnerability to diseases, poverty, loneness among others

5.2.3 Strategies for prevention of gender based violence

The study findings highlighted that the following were some of the strategies to prevent GBV:

Economic empowerment, Media Information, and awareness Campaigns
Having legal responses such as bye-laws on GBV
Community education through Medias and use of Faith-Based
Programs and Services

5.3 Conclusions

The psychosocial effects of gender-based violence are farreaching beyond the individual survivor, to the family and society as a whole. GBV is a major public concern with devastating effects of psychological and social effects of gender based violence on women. It impacts on women's ability to care for themselves and their children, is associated with self-destructive behaviours such as alcohol and drug abuse, suicidal acts, poor social skills, development of illnesses like mental health problems, low self-esteem, Trauma, Isolation, failure to overcome post-traumatic stress disorders. It also results to hopelessness, rejection from relatives and inferiority from women suicidal tendencies, Isolation and becoming more vulnerability to diseases, poverty, and loneness among others.

GBV is a human rights violation such that the prevention of GBV requires a multi approach at all levels of societies through economic empowerment Media Information, and awareness Campaigns. Community education through media and use of Faith-Based Programs and Services

5.4 Recommendations

From the conclusion, the researcher recommends for:

Change of societal, cultural norms and changing Men's attitudes of gender inequalities that drive GBV

Organizing Media, International Women's Day (March 8th), International Day for the Elimination of Violence against Women (November 25th) and conducting prevention campaigns through Changing gender attitudes in men

REFERENCES

Bacchus, L.et.al (2004), Domestic violence: prevalence in pregnant women and associations with physical and psychological health, European Journal of Obstetrics & Gynecology and Reproductive Biology, 113: 6-11.

Bitangora, B. (2009). "Rape, the Silent Cancer among Female Refugees". In: Conveying Concerns; Women Report on Gender-based Violence. Washington: Population Reference Bureau, (2000) Measure communication

Campbell, J.C. (2002) Health effects of intimate partner violence, The Lancet 359(13):1331-1336.

Garcia Morena C, Jansen H. (2000) WHO Multi country study on Women's health and domestic violence against women: initial results prevalence, health outcomes and women's response. Geneva, Switzerland).

Guillermo B. (2009) Psychosocial Counseling and Social Work with Clients and their Families in The Somali Context- A facilitator's

quide. UNCHR Representative to Somali

Haise et al 2009and WHO (2013) the impact of gender based violence on women's health Centre for disease control 1999

Human Right Watch, Seeking protection, 2000, addressing sexual and domestic violence in Tanzania's refugee's camps. New York.

Humanitarian Work, Oxfam GB

Klein, R (2004) Sickening relationship: Gender-based violence, women's health, and the role of informal third parties. Journal of Social and Personal Relationships, 2004; 21(1):146-165.

Krantz, G. and Garcia, M. C. (2009) Violence against Women', Journal of Epidemiology and Community Health, 2009; 59(10):818:821.

Kumar, Shuba. Jeyaseelan, Lakshmanan. Suresh, Subhadra. Ahuja, Ramesh Chandra. Domestic violence and its mental health correlates in Indian women, The British Journal of Psychiatry, 2005, 187: 62-

Kurz and Johnson- Welch, (2000) impact of gender based violence

Mejiuni, O. (2006). "Some women are stubborn": Power, violence against women and the challenges of religion. *CODESRIA Bulletin*, 1 & 2, 38-40.

Merry, S. E. (2006) Human rights and gender violence: Translating international law into local justice. Chicago, LI: University of Chicago Press.

Mialon, H. M., & Mialon, S. H. (2006) Violence against women, social learning, and deterrence, *Journal of Evolutionary Economics*, 16(4), 367-382.

Njenga, F. (2009). "If your Husband is Abusive, Leave Him!" In: Conveying Concerns: Women Report on Gender-based Violence. Washington. Population Reference Bureau, (2000) Measure communication.

Panagioti, Maria. Gooding, Patricia. Nicholas Tarrier. Posttraumatic stress disorder and suicidal behavior: A narrative review, Clinical psychology review, 2009; 29:471-482.

Pickup, F., Williams, S., Sweet man, C. (2001) Ending Violence against Women: A Challenge for Development and

Saran, S. (2009). "Rape Are you at Risk?" In: Conveying Concerns: Women Report on Gender-based Violence. Washington. Population Reference Bureau, (2000) MEASURE communication

Saidi, H, Awori, K.O, Odula P. (2008). Gender associated violence at a woman's hospital in Nairobi. East African Medical Journal, Vol. 85 No. 7, 347-354

United Nations for High Commissioner for Refugees, May (2003), guiding principle for prevention and response to sexual and gender based violence against refugees, returnees and internally displaced persons

United Nations High Commissioner for Refugees (2003), the sexual and gender based violence against refugees, returnees and internally displaced persons, guidelines for preventions and response.

United Nations Population Fund- UNFPA, (2010), progress of the world's women, New York.

Violence against Women (2002), Effects on Reproductive Health, Vol.20, No. 1 September,

World Health Organization (2013), "Female Genital Mutilation: Programmes to Date. What works and What Doesn't. Geneva: World Health Organization Press

World Health Organization, (2002), world report on violence and health WHO Geneva.

APPENDICES

Appendix 1: Questionnaires for the Counselors

My name is ASENGO ANNA GRACE. I am undertaking a study on examining some of the psychosocial effects of gender based violence on women in Ngariam Sub County in Katakwi district". The Study is part of an academic fulfillment for dissertation writing for the award of a Bachelor of Arts degree in Democracy and Development Studies of Uganda Martyrs University. The study aims at examining some of the psychosocial effects of gender based violence on women, how it affects the women socially and psychologically, and the possible ways of preventing gender based violence among the community.

You have been selected as one of the respondents for in-depth interview. All the information you give will be used solely for the purpose of the research and with maximum confidentiality. Your participation is voluntary.

Tick the appropriate box

Section: A Bio-data

1	Pagno	ndents	Ago	e+*11	atura
_	. Respu	nuents	Aue	SLLU	CLULE

25-30		
31-35		
36-40		
41-45		
46-50		
51-55		
56 above		

2.	Respondents Man	rital status
	Married	
	Single	
	Divorced	
3.	Respondents Edu	ucation level
	None primary	
	Primary	
	Secondary	
	Tertiary	
4.	Respondents Occ	cupation
	Peasant/House v	wife
	Self employed	
	Civil Servant	
	•	s of psychological effect of gender based
viole	ence	
5.	What are the p	sychological effects of gender based violence
	among women vio	ctims in Ngariam Sub County?
	Section C, soci	ial Effects of gender based violence
6.	What are the s	social effects of gender based violence among

women victims in Ngariam Sub County?

			Thanl	k you	so m	uch	for you	ır time.		
	• • • • •		• • • • •	• • • •			• • • • • •	• • • • • • • •	• • • • •	• • • • • • •
	• • • • •		• • • • •	• • • •		• • • •	• • • • • •	• • • • • • • •	• • • • •	• • • • • • •
	amono	g wome	en?							
7	. What	strat	tegies	can	help	to	preven	t gender	based	violence
	Secti	ion D,	Strat	egies	s to 1	prev	ent gen	der based	l viole	nce
			• • • •							
	• • • •		• • • • • •	• • • •		• • • •	• • • • • •		• • • • • •	• • • • • • •
	• • • •			• • • •					• • • • • •	

Appendix II: Interview Guide for the women victims of GBV

- 1. What is your opinion about the extent to which psychological effect of gender based violence affects the survivors?
- 2. What is your opinion about the extent to which social effect of gender based violence affects the survivors?
- 3. What is your opinion about the strategies that can help to prevent gender based violence among women?

Thank you so much for your time.

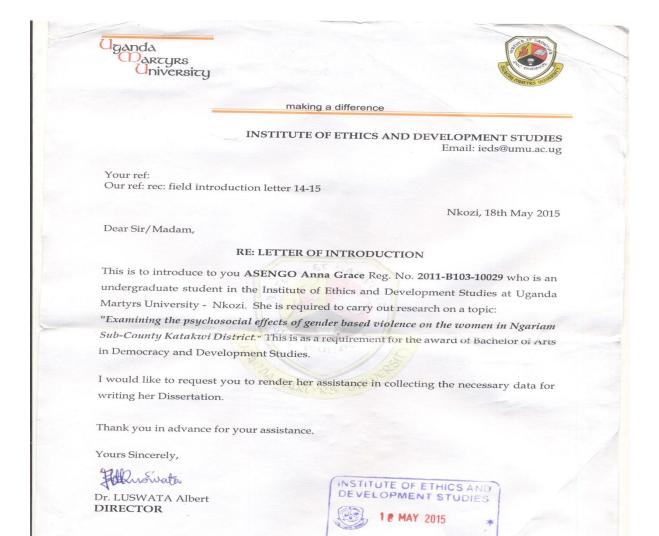
Appendix III: Budget for data collection

Item	Amount
Transport during data collection	200,000
Typing and printing	100,000
Stationary	15,000
Binding	50,000
Meals	20,000
Internet Services	400,000
Total	785,000

Appendix IV: Work Plan

Months	Activities	Resources	Persons
			involved
June 2014	Submission and	Pens and papers	Researcher and
	approval of the		supervisor
	research topic		
Jan- May 2015	Writing and	Pens, papers,	Researcher and
	approval of a	literature	supervisor
	research	,books	
	proposal and		
	research		
	instruments.		
June 2015	Data collection	Pens, paper	Researcher,
		tools, tables,	respondents;
		chairs, a	
		letter	
June 2015	Data analysis,	Papers, pens,	Researcher and
	typesetting	secretary,	supervisor
	report,	computer	
	submission of		
	the report for		
	corrections		
March 2016	Submission of	Transport	Researcher and
	the research		the supervisor
	report for		
	marking		

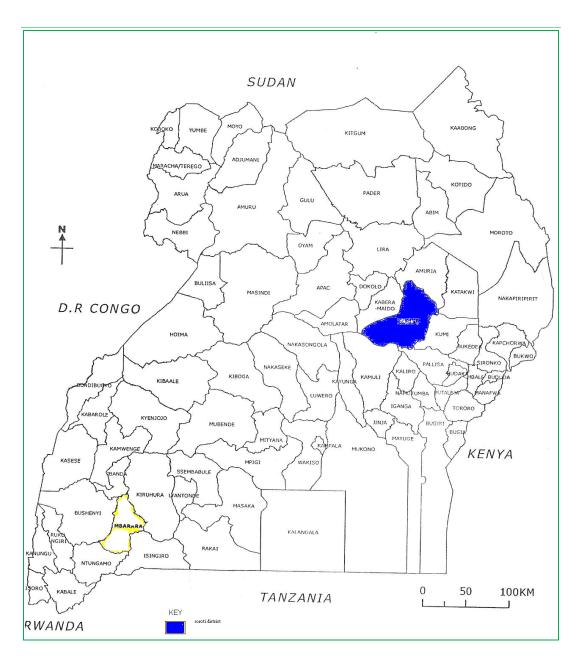
Appendix V: Introductory letter



Uganda Martyrs University P. O. Box 5498 - Kampala - Uganda Tel: (+256)038-410611 Fax: (+256)038-410100 E-mail: umu@umu.ac.ug

DIRECTOR

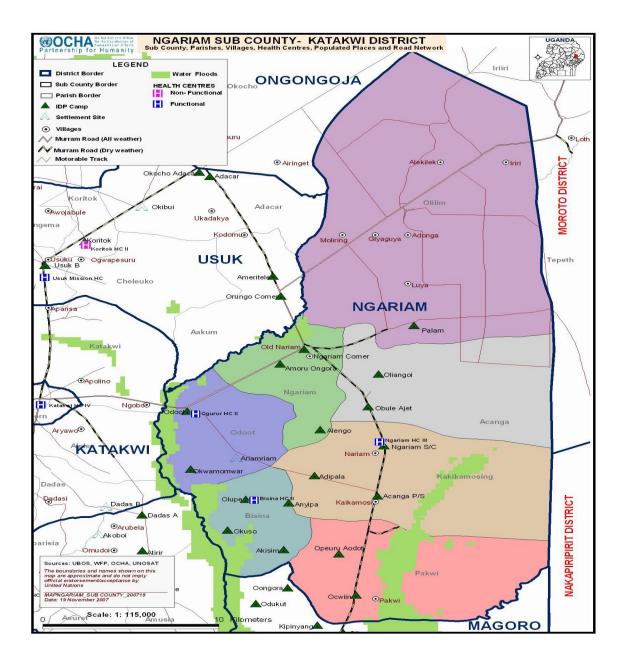
Appendix 7: A map OF Uganda showing Katakwi district the area of study



Key

Katakwi District the area of study

Appendix 8: A map of Katakwi district showing the sub-county the area of study



Key



Ngariam Sub-county the area of study